

# Policy for Male Circumcision

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Version:	1.4
Purpose	This document is part of a suite of policies that the Integrated Care Board (ICB) uses to drive its commissioning of healthcare. Each policy in that suite is a separate public document in its own right but will be applied with reference to other policies in that suite.  This policy is based on the ICB's Statement of Principles for Commissioning of Healthcare (version in force on the date on which this policy is adopted).
Supersedes:	1.3
Author (inc Job Title):	
Ratified by: (Name of responsible Committee)	ICB Board (adopted 1 July 2022)
Cross reference to other Policies/Guidance	
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Document control:		
Date:	Version Number:	Section and Description of Change
November 2017	1	Pan-Lancashire and South Cumbria ratified policy
December 2017	1.1	OPCS and ICD codes added to appendices
July 2021	1.2	Changed word order of title. No change to content required.
January 2022	1.3	JH proposal to add not routinely commission circumcision for physiological phimosis. Clarified that it was all-age. Ratified by Strategic Commissioning Committee
July 2022	1.4	Policy adopted by Lancashire and South Cumbria ICB – references to CCG replaced by ICB where relevant

# 1. Policy

- 1.1 The ICB will commission male circumcision when one or more of the following criteria are satisfied:
  - 1.1.1 Congenital abnormalities with functional impairment
  - 1.1.2 Distal scarring of the preputial orifice
  - 1.1.3 Painful erections secondary to a tight foreskin
  - 1.1.4 Recurrent bouts of infection (Balanitis / Balanoposthitis)
  - 1.1.5 Redundant prepuce, pathological phimosis, and paraphimosis (inability to pull forward a retracted foreskin).
  - 1.1.6 Lichen sclerosus (balanitis xerotica obliterans) chronic inflammation leading to a rigid fibrous foreskin.
  - 1.1.7 Pain on intercourse secondary to a tight foreskin (Phimosis)
  - 1.1.8 Traumatic injury
  - 1.1.9 Potentially malignant lesions of the prepuce, or those causing diagnostic uncertainty.
  - 1.1.10 Exceptionality has been demonstrated in accordance with section 9 below.
- 1.2 The ICB will not commission male circumcision for non-therapeutic purposes such as cultural, religious or cosmetic reasons.
- 1.3 The ICB will not routinely commission circumcision for non-retraction of the foreskin (physiological phimosis) in children and up to 18 years of age, as retractility increases with maturity.

# 2. Scope and definitions

- 2.1 Circumcision is a surgical procedure with a range of medical indications.
- 2.2 The scope of this policy relates to requests for Male Circumcision at all ages.
- 2.3 The scope of this policy does not include Female circumcision which has no medical indication and is prohibited in law by the Female Genital Mutilation Act 2003 and is the subject of multi-agency guidelines from the Department of Health.
- 2.4 The ICB recognises that a patient may:
  - suffer from a condition for which male circumcision has been offered.
  - wish to have a service provided for their condition,
  - be advised that they are clinically suitable for the treatment, and
  - be distressed by their condition, and by the fact that that this service is not normally commissioned by this Commissioning Organisation.

Such features place the patient within the group to whom this policy applies and do not make them exceptions to it.

2.5 For the purpose of this policy the ICB defines male circumcision as the surgical procedure to remove of all or part of the foreskin of the penis.

# 3. Appropriate Healthcare

3.1 The ICB considers that the purpose of circumcision is to prevent, diagnose and treat a medical condition and therefore, accords with the Principle of Appropriateness.

## 4. Effective Healthcare

- 4.1 If the ICB is satisfied by evidence in relation to a particular treatment or service that the probable effect on a population of patients is that the benefits of the treatment or service will substantially outweigh the harm done by the treatment or service, then the ICB regard the treatment or service as effective.
- 4.2 Male circumcision will be funded for therapeutic reasons only (as described in section 1).
- 4.3 The reported benefits of male circumcision, reduction of urinary tract and sexually transmitted infections and reduction of penile cancer risk are insufficient to justify its therapeutic use.

## 5. Cost Effectiveness

5.1 The ICB recognises that the outcome cost effectiveness of this treatment is within the threshold, and that the service satisfies the criterion of cost effectiveness.

#### 6. Ethics

6.1 The Commissioning Organisation recognises that this service satisfies the criteria within the 'Ethical' component of the Principles for Commissioning Health and Health Care document.

# 7. Affordability

7.1 The ICB recognises that this service satisfies the criteria within the 'Affordability' component of the Principles for Commissioning Health and Health Care document.

# 8. Exceptions

8.1 The ICB will consider exceptions to this policy in accordance with the Policy for Considering Applications for Exceptionality to Commissioning Policies.

## 9. Force

9.1 This policy remains in force until it is superseded by a revised policy.

## 10. References

Female Genital Mutilation Act 2003 http://www.legislation.gov.uk/ukpga/2003/31

Female Genital Mutilation: multi-agency practice guidelines. Department of Health, February 2011

https://www.gov.uk/government/publications/female-genital-mutilation-multi-agency-practice-guidelines

Siefried N, Muller M, Deeks J, Volmink J. Male circumcision for prevention of heterosexual acquisition of HIV in men. Cochrane Database of Systematic Reviews 2009, Issue 2. <a href="http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD003362/pdf\_fs.html">http://www.mrw.interscience.wiley.com/cochrane/clsysrev/articles/CD003362/pdf\_fs.html</a>

Royal College of Surgeons Commissioning guide: Foreskin conditions (October 2013) http://www.rcseng.ac.uk/healthcare-bodies/docs/published-guides/foreskinconditions

British Medical Association (2006), London. The law and ethics of male circumcision: guidance for doctors. J Med Ethics 2004; 30: 259-263 http://jme.bmj.com/content/30/3/259.full.pdf+html

## 11. Clinical Codes

OPCS Codes	N303 Circumcision
	Z412 Routine and ritual circumcision
ICD 10 Codes	Exclusions - if they have any of these in any position they
	are out of scope
	N47X Redundant prepuce, phimosis and paraphimosis, N480 Leukplakia of penis N481 Balanoposthitis
	L900 Lichen sclerosus,
	C600 Malignant neoplasm of the prepuce,
	L905 Scar conditions and fibrosis of skin,
	L910 Hypertrophic scar