

ACORN

Issue
Nº 1 2000
Editor
Steve Acorn

Editorial

Welcome to the first issue of the year 2000, and my first issue as editor. I would like to say a big thank you to David for his outstanding job over the last ten years. There is no question that his role has been crucial in keeping the Society together and his unbiased approach has made the newsletter a robust forum for discussion rather than just one sided ranting as is the case in many other organisations. I shall do my best to continue his work.

Please note the new box number is now up and running and it should be used for all correspondence to the Society. The old box number will be phased out in due course.

We will get at least four newsletters out this year as evenly spaced as possible. These four issues will make up the balance of issues that were due in 1999, and therefore it has been decided there will be no additional subscription for the year 2000. I know that this reduction in frequency will disappoint many people, but the biggest problem is a lack of good content. We have a small core of members who have written many articles, and the large bulk of us have contributed very

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E-Mail may be sent to: acrnsoc@aol.com

little or nothing at all. So please can we all do our utmost to submit articles, long or short, fact or fiction, but particularly anything that can contribute to the understanding of why the presence or removal of a small piece of skin is of such deep significance.

Steve Acorn

Skiathos

My partner and I have recently enjoyed a two week sojourn to the Greek island of Skiathos. Although a relatively small island, Skiathos boasts quite a number of very beautiful beaches. Two of these in the south are designated Naturist and can be reached by bus, followed by an arduous twenty minute walk or, as we soon discovered, by boat.

Aptly named: big banana and little banana (because of their crescent shape) they are separated by an outcrop of rocks forming the stalk. Big banana, we discovered is a mixture of textile and naturist, totally textile at one end, totally naturist at the other with a small mixed area in-between. Little banana however was totally naturist and this was the one we preferred. It boasted a very nice Taverna, sun beds and shades as well as the most amazingly crystal clear water seething with fish.

Whilst lazing away the hours, soaking up the sun, I decided to undertake a bit of investigation on behalf of *Acorn*, so here are the approximate results:- 75-80% of the beach population were heterosexual couples. The remaining 20-25% were gay men, with a smattering of assorted others. The predominant nationalities were British, Dutch, Scandinavian and a few Greeks. The ages ranged from 17 – 70+ and I would estimate that 85-90% of the males were uncut.

Of the men who were circumcised there did not appear to be any connection to age, although the majority seemed to be British. I was surprised to note that quite a number (perhaps 20%) of the uncut men wore their foreskin rolled back to sunbathe and swim. Having read so much in the *Acorn* magazine about the extra sensitivity of the uncircumcised glans, I would have thought they would have found exposing it to the sun very uncomfortable.

My Prince Albert was very much in the minority and I only spotted two other genital piercings during ten or eleven visits to the beach. Initially it did arouse some curiosity but fortunately no hostility and soon became accepted, along with my other piercings.

The freedom of a naturist beach is something I can really recommend for a holiday and a great way to loose some of the inhibitions and worries about the shape/size and surgical status of your wedding tackle!

V.W. – Leicester

PS: A lot of pubic hairdressing was in evidence, the most popular style for men being shaven scrotum and short neatly trimmed bush, although some were completely depilated, whilst a few favoured the wild and natural look. Most of the ladies sported the bikini wax.

Piercing Sensitivity

Although its not a strictly cock related issue, I wonder if any other *Acorn* members can explain why some men have erectile, sexually sensitive nipples whilst many of their more unfortunate brothers have little or no feelings there at all. You may have gathered that I am one of the lucky ones and the merest touch on one of my erect nipples can cause stirrings down below. The brush of a shirt or hand can send electrical feelings straight to my groin and, since having them pierced, the movement of the rings as I bend or turn can cause a quick thrill. However a friend who had non sexual nipples found that his piercing made no difference at all. Most people seem to associate male nipple play with S&M and consequently tend to be rather rough but a gentle tickling and stroking can be a far more effective method of foreplay, leaving the heavier stimulation for later. I would be interested to hear the views of any other nipple buffs.

V.W. – Leicester

The Guide

Just by chance the other day I was passed on an American monthly publication called *The Guide* which appears to list, comment on and write about most things on the American gay scene, much as perhaps *Gay Times* does here in the UK.

I have never ever seen this magazine before and just casually glanced through it to see what it was all about. However the point of interest was this months leading article entitled 'Restoring Your Foreskin'. I read this article and its contents were most informative. The article covered four A4 size pages, and in brief listed various methods that could be used to stretch or re-grow a foreskin on a penis that had previously been circumcised. The article, written by Scott Richards, was not only very informative but also listed various organisations where further advice could be got and also a list of suppliers from where the various apparatus described in the article to aid the re-growth of a foreskin could be purchased. As well as all this there were a list of various publications that may be of interest and listings of internet websites that would be of interest to those wishing to restore their foreskin.

Having read on many occasions articles from *Acorn* members about the restoration of foreskin tissue, it occurred to me that while the topic had over

the years been well aired in print as yet no informed or too serious advice had been given on the subject. Having read this American article it appears to go a long way to remedy this shortcoming.

As this magazine was already three months old, by the time this letter gets in to print it will be twice this time out of date so its not much use suggesting people write to its publishers for a copy. However I will be more than pleased to send any one a photostat copy of this article should they be interested to read it for themselves. Please send your SAE via the *Acorn* box number to me and I will forward a copy by return.

Wm. – Dorset

Browned Off

Having studied the topic of circumcision ever since I discovered myself a preputial amputee, my presumed 'mastery' received a setback when I was asked to explain a distinct brown ring on an American nudist's circumcision. Recalling decades of study I could not find the cause for such a phenomenon. From shower room sightings at school where the circumcision rate was a heady 45%, and at work, baths, changing rooms and the beach where Plastibelled neatness was an occasional occurrence, not one brown ring was present on any of those hundreds of circumcisions seen.

It took much reading before I meanderingly came across two mentions of a brown ring!

- 1) A Sacramento man recalled as a young boy noticing a brown ring around his penis whilst bathing. Asking his mother what it was, he was told... "That's where you were circumcised...to keep it clean."
- 2) A tightly circumcised 40 year old from Missouri admitted to having a $\frac{3}{8}$ " wide brown ring around his penis.

Was this a phenomenon of the land of scars and stripes never encountered in Britain's ever decreasing minority of circumcised males?

The reason was simply an instrumental one. It resulted from the skin crushing of the Gomco clamp, the most often used circumcision clamp in the U.S.A., remaining unchanged since it's introduction in 1935. Though Aaron Goldstein's Gomco clamp remained across the Atlantic, the disposable Hollister Plastibell, first used in 1965, has gained favourable acceptance in Britain, and never produces the wide brownish stripe, and only very rarely slight discolouration after healing.

Yes, the brown stripe has become a strange distinguishing feature of many American post 1935 circumcisions, even ritual ones on Liberal and Reform Jewish babies where the mohel uses a Gomco clamp. Though the cut edge is exceptionally neat, even near invisible, the wide brown band visually separates

the denuded glans from the natural remaining shaft. The ring, hardly one of confidence outside America, will, like vaccination marks, widen with growth up to a possible ½" in width.

In comparison, the Plastibelled penis is of relatively uniform hue after healing and consolidation of tissues with growth. With a recent sighting, the scar was barely visible and well incorporated into the infant's shaft tissue slightly below the glans.

For years I have taken 'browned off' as highly synonymical of 'cheesed off'. In the smegmaphobic U.S.A. it is clearly possible to have one without the other!!

Anthony

Lubrication

I had always been a little envious when seeing a roundheaded guy with a large, prominent and flared helmet and considered this a great boon in sex, being able to stimulate the walls of the vagina more easily.

However, surfing the Internet and reading articles now it seems that this is perhaps not the case and that such a helmet may cause irritation rather than pleasure.

The modern theory is that the foreskin assists greatly in sexual intercourse not only for the woman, but for the man as well, with its enormous area of nerve endings to heighten sensation.

So, maybe I'm lucky in having a long foreskin and now that I've overcome the problem of insufficient natural lubrication (my original cause of investigating circumcision), I want to make the best of what I have.

For years I've worn my foreskin rolled under itself, so that part of the helmet shows – comfortable, looks better than a tapering skin and I don't have to pull it back to pee. Occasionally, I'll have it all the way back, but not for long periods and only when there is some tight clothing to hold it in place – when it gets cold, it flops back of its own accord anyway.

Recently I've been trying wearing my foreskin in its original, full length state – a strange feeling with this extraneous bit of skin protruding beyond my helmet – sometimes it causes irritation, other times it tingles with sensation. My latest trick is to put a spot of lubricant, usually KY jelly on to the helmet under the skin and then roll the skin completely forwards, so that the cool lubricant is trapped – it gives a delightful, icy feeling. I try and do this before having sex and, as my foreskin still remains covering the whole helmet even when hard, my wife then rolls it back in foreplay and there is the lubricated helmet, ready for action – better than having to stop halfway through the proceedings and apply the jelly!

I'd be interested to hear from others, both roundheads and cavaliers, about lubrication and how much they need. It is important to apply just the right amount – too little and it causes irritation, too much and one slides around without getting any sort of grip. I'm never sure to what extent my foreskin is coming forwards over the helmet during sex, but sometimes the sensation is almost unbearable, so maybe this is when the helmet is bare on the inward stroke.

Having grown up as a cavalier in a minority group, it is quite nice now to look around a changing room and see that my cock and its long foreskin are quite normal and in the majority – one sees far fewer cavaliers with protruding helmets than with long overhanging foreskins.

Anon

Mind Over Matter

A small excerpt from page 75 of the book *Mind Over Matter*, Ranulph Fiennes, Mandarin, 1993

I buried the pants, my only pair, and the crotch-rot did in due course begin to get better. But the remaining two protective layers of underclothing were not enough even at sea level and, with the sharp winds off Berkner, my private parts were nipped and swelled up. When I mentioned this to Mike, it turned out that he was having the same problem only worse, with a blistered end. He was circumcised and therefore, in effect, had one less layer of insulation. I made a note of this factor in terms of selecting future candidates for polar expeditions.

Reply To A.B. & Other Thoughts

I really enjoyed the last newsletter and one of the articles 'reactions' by A.B. of Bucks. particularly interested me.

A.B. says that her brother is gay and has recently got himself circumcised because a gay friend of his told him that it would make him more 'acceptable' in gay circles. She also states that his penis looked 'traumatised' after the operation.

I don't think anyone goes and has a painful, irreversible operation on their cock without thinking about it carefully first and I'm sure A.B.'s brother thought about it long, hard and carefully before going ahead and becoming a roundhead. As far as making him more acceptable in gay terms, I don't think

that's true. In my experience the only age group where circumcised cocks are in the majority is those men aged 50 – 70 years old. I don't think that as a whole gay men prefer cut meat, although I know I do! There are certainly men who love it uncut as evidenced by *Uncut* magazine, etc.

Secondly, what does A.B. expect her recently post-op brother's cock to look like anyway? It's hardly going to look like the final healed roundhead. It's of course going to be swollen, have stitches and look a mess for up to a month. After my first circumcision age 16 it took the best part of 3 months for my cut cock to finally smooth out and take on its final appearance.

I also think that A.B.'s comment about her brother's choice re a revision is again very short sighted of her.

If someone is going to get their cock altered then they sure want it to be perfect and looking how they want it, and I think that people who are dissatisfied with their current shoddy circumcisions should pull their fingers out and go and get them re-shaped.

I would also like to reply to Anthony's article, in particular reference the change in shape of the glans post circumcision. I have always thought that after removal of the foreskin the glans rim does become more prominent and mushroom like. This was based on seeing other lads in the swimming pool changing rooms at school. However these lads may have had large helmets that meant they necessitated circumcisions due to relative phimosis. This is certainly true of a friend of mine who was cut when aged 21 when he went and emigrated to Canada. His helmet is huge and has a roughly 1cm overhang all around it at the coronal sulcus before the very mushroom and bulbous head joins his quite short and thin cock shaft.

I personally noticed no change in the shape of the glans after my first circumcision because there was an awful lot of loose skin left behind that nestled my glans the whole time, and never put any tension on the shaft even when erect. In contrast to this immediately after my second circumcision 7 years later at the age of 23, I noticed a very big difference. This is because the surgeon used the cuff resection technique and radically exposed my helmet at rest. The look in the mirror when I got home was great as now lots of the excess shaft skin that bunched behind and over the glans rim had gone and left me with a relatively more narrow and tight shaft and a well protruding helmet which was very prominent looking.

The angle that my cock rested at seemed to change after the second op and instead of being vertical when flaccid, it just jutted out a little because of the tension in the shaft skin.

Another first hand experience I have of seeing an adult uncut cock head change shape and flare out is when my partner became a roundhead. His prepuce covered his glans completely and his helmet wasn't particularly prominent through his foreskin. When erect the glans didn't become fatter

than the diameter of his shaft. After his circumcision there was a gradual change in the size of his coronal overhang and he noticed and commented on it before I said anything. Now it looks great especially when flaccid because his cock is still quite large when limp and his mushroom shaped glans really fans out beautifully and stops any of his slightly loose shaft skin moving forward and encroaching on his helmet. When his cock is erect now, it looks very prominent and bulbous, with a great overhang at the coronal rim.

As a young lad my dad used to walk around the house naked and the shape of his cock head was extremely pronounced and prominent. He had been circumcised around 1940 as a baby and I recently found out that he had wanted to have me cut as a baby too. He said (and was quite right) that I had a very long foreskin and that he had been circumcised and loved it and wanted me to have all the benefits of cleanliness and also the same look as him. However the hospital refused and my mother said I could always get it done later if need be. Dad's cock was probably the most obvious circumcised cock I've seen at a swimming pool with trunks on, the coronal ridge juts out whichever way his cock is and looks really good.

He commented after my first circumcision that he though my cockhead would enlarge and flare out more because he said that several boys from his school days had had circs at 16 and their helmets had enlarged. He was disappointed with the result of the initial circumcision like I was because it just looked shoddy and from the other end of the changing rooms you'd have trouble telling I'd been circumcised at all. The day I came back from hospital he came up to my room and asked if he could see what the result looked like. When I showed him he wasn't impressed and thought they should have removed more of the shaft skin.

In summary I think that lots of factors about being circumcised and the way it changes the proportions of the shaft and glans etc. make it always look more bulbous. I also think that guys with large helmets are more likely to get cut because their helmets are so big anyway. I also believe that there is a variable flaring 'mushrooming' of the glans post circumcision that is highly desirable and makes roundheads very sexy, bulbous & prominent. I put this to good effect down the gym when I wear my lycra cycling shorts which show my well defined exposed helmet off very well and don't leave people in any doubt as to what my status is!

Dan

New PO Box Number For Acorn

Please note that we have a new PO Box Number to which all correspondence should now be sent. The old Box in Weston is being phased out.

The address is now:- **The Acorn Society, PO Box 296, Ipswich, IP2 8SH**

Revision

I was circumcised as a young boy and since joining *Acorn* two years ago I have been increasingly interested in being re-circumcised to remove some of the slack in the skin on the shaft of my penis.

Through reading articles in the newsletter I am aware that this operation can be performed quite successfully, but my problem is that I'm unsure where to go to get such an operation performed. I am aware of a Dr. Sifman who can be approached but I'm keen to hear from *Acorn* readers about other doctors or clinics who may provide this service. I'm also keen to find out about the methods used.

This is quite a big step for me and understandably, I want to be sure that I'm going to get what I ask for. Therefore, if any reader has personal experience of, and can recommend, a sympathetic doctor or clinic who will understand what I am asking for I would be very grateful.

Anon

[If any replies could be open and published, I would be very grateful — S.A.]

Australian Holiday

A recent and wonderful holiday in Western Australia gave me the opportunity to size up the scene in Oz. Here are my findings:-

The saunas seemed to be the best starting point. What a variety of establishments, and what a variety of clientele! All races, religions, colours, shapes and sizes meet in Australia. Uninhibited behaviour in the saunas reveals all the goods on offer in a very short time and what a selection there is.

Oz is a half cut country. About 50% of the males appear to be cut, as a general rule and disregarding colour and creed.

Aboriginals by tradition are mostly circumcised but unlike in the UK many orientals are cut too. Oz white men whether of British or Irish descent are generally cut if born in Australia. Immigrants are far less likely to be so. Australians of Greek and Italian descent are generally uncut. Vietnamese likewise. Thais and those of Malaysian descent are often cut.

I chatted to many people and formed the opinion that as a routine 'at birth' procedure, circumcision is going out of favour. However, many young men are cut later in life. I was unable to find out who performs the operation and at what cost. That research must wait until my next visit.

M. – Worcester

Reply To R.H.

I felt interest in reading the last issue (no4, 1999) of *Acorn* and specially R.H.'s letter.

I totally agree with his thoughts about the positive effects of circumcision. I think, me too, that circumcision cannot be a remedy for unhygienic problems.

R.H. wrote his glans has not flared since the operation, but a friend of his saw his own glans increase greatly after being circumcised. I knew a similar situation and during the three months after the operation my glans began more bulky (around a third more).

Am I to understand I'd be this friend and so have I already seen this R.H.'s nice circumcised... dick?

Ronald – Paris (France)

Restoration

I am 51 and gay and have consequently observed many penes (I think that is the correct plural). I joined *Acorn* in an attempt to see things from the other side as there are definitely two camps, one for the knife and the other against. I have never been able to reconcile the idea of circumcision as anyone 'uncut' can easily retract their foreskin to expose what is hidden beneath but nature's own can be restored after use. Those people that I have encountered who have been circumcised all suffer from a very dry glans and have to resort to lubrication in order to masturbate satisfactorily.

I was circumcised very badly at birth, the frenulum was cut away leaving a second aperture in my urethra on the underside of my glans where it had been attached which made urinating very difficult with two streams in opposite directions. Various skin tags and stitch tunnels were also left although fortunately the skin was not stretched tight for the chop and left the basis for restoration.

My ambition is to 'restore' my foreskin, by stretching or other means. I have read many books on the subject of restoration and they nearly all suggest stretching using various appliances. I have tried these and find them all to be rather awkward or inconvenient. I have now stretched the remains of skin so that it will cover my glans completely but without an attached frenulum and frenar band the skin retracts. However, by stretching two of the stitch tunnels, left after circumcision, I have effectively formed two piercings in my new foreskin and with a ring inserted it helps to hold the skin forward. I have noticed a very considerable difference to the feel of my glans now that it is covered. It is now moist and feels very smooth and soft to touch. It is far more sensitive than before which can be a problem as I do tend to reach an

orgasm more quickly. Previously my glans was dry, tough and wrinkled with much less sensitivity.

I would like to investigate the possibility of surgery to either re-attach my frenulum, it appears to remain attached to what is left of my foreskin although it has been cut from the glans. Additionally I would like to find out if it is possible to reform the end of the skin into a tighter aperture as it is currently the same width for its length. I am too embarrassed to ring around general surgical clinics but I would be pleased to hear from anyone who may know of a clinic which could offer help in restoration rather than removal.

Anon

America Re-visited

Longtime readers of the *Acorn Magazine* may remember my contributions to the magazine under the heading "Ian's Tail" and "More of Ian's Tail" etc. in issues 4/93, 5/93 and 7/93. These articles told much of my own circumcision history, (circumcised at the insistence of a midwife shortly after birth, an untidy job, hated my state as a child, became reconciled to it in adulthood with the intervention of a doctor I worked with in New York and had a revision to circumcised normality after returning to England). Having worked in a New York hospital for a year and in addition to becoming familiar with the New York circumcision scene I also established friendships which have endured.

I have returned to America for holidays of two or three weeks at a time most years since 1970. On each occasion I have kept both my eyes and my ears open for any information I could glean about the attitude towards, and practice of, routine circumcision in infancy. One of the ways I have done this is to visit the larger reputable bookstores and to look through the index of recently published books written to give advice to parents on child care. Throughout the 1970's the editions of Dr Spock's advice to parents strongly supported the circumcision of infant boys, on the grounds that it made them regular little guys, and like all the other kids on the block. Publications by a number of other authors also supported routine circumcision, usually as a measure of good hygiene and to prevent trouble later. There appeared to be a general agreement that circumcision after infancy was both embarrassing and painful, the increased cost of circumcising an older boy was occasionally mentioned. The embarrassment of a teenager or young adult I can understand, the idea of it being painful was, I believe exaggerated, as pain control, even in the 1970's, was not difficult to achieve.

I was interested to note that when Militant Feminism came along, and the movement of Lesbians that wanted children, men were useful only for shooting their sperm into a bottle, or into the turkey baster, depending on the degree of sophistication to be used for insemination. However, those women who rejected

the input of men (please excuse this expression), certainly wanted their male offspring to remain intact; they howled against circumcision as something brutal, done to the infant male, by the mature male. This was contrary to the opinion I had formed in both England and the United States where I had found women to be in charge of child care to the almost total exclusion of the man, be it father or partner.

Following the *Statement on Routine Circumcision of Infants*, published by the American Academy of Paediatrics, the advice to parents was bland, usually something like "If your child is a boy you may wish to discuss with your Obstetrician whether or not your son is to be circumcised".

On my recent visit to America (September 1999), I again visited the bookshops and find a significant change in the advice offered. The only advice against circumcision that I could find was in the few childcare books originating in the United Kingdom. American publications, and there are lots of them, appear to encourage circumcision but emphasise that it is now a matter of parental choice. The following are quotations from recent publications:

"If your tribe or religious group believes in it (circumcision), go ahead.

If the child's foreskin can not be retracted by mid-childhood have him circumcised or a less radical procedure.

If Dad and all the other males in the family are circumcised you may want to have him circumcised to avoid invidious comparison."

Elmer R Grossman MD. *Everyday Paediatrics for Parents*. Pub. Celestial Arts.

"I always ask the father, if its a boy do you plan to have him circumcised? I think the father should make the choice. Most fathers want their sons to be like themselves." "...this is of deep significance to a male, the father's choice needs to be based on his emotional reaction rather than on the fairly inconclusive studies that have been done so far. I will support the father in either option".

T Berry Brazerton MD. *Touchpoints*. Pub. Perseus Books.

"I encourage you and your baby's father to follow your hearts. My boys are circumcised primarily because I am a product of the 1950's and wanted to share the circumcision bond with my sons".

Alan Greene MD. *A-Z Guide to your new baby*. Pub. (sorry, not recorded).

During this visit I caught up with Peter whom I first knew as a young schoolboy, he is now married, has moved away from New England and is the father of two sons, Joseph, aged 5 and Michael 2. Peter was making a visit to his mother, the neighbour of my hostess. Peter's wife, mother and my

hostess decided on a girls' night out leaving Peter and I to care for the boys and to catch up on what has happened to us in more than ten years since our last meeting. During Peter's bathing of the two boys I noticed that both were radically circumcised. When we settled down with a beer I remarked to Peter that I had noticed that both boys were circumcised and said that I understood, from magazine articles, that this was no longer a routine practice. Peter's reply was along the lines that I should not believe all that I read. I pressed for more information with a question about whether or not there had been need for discussion about it with the doctors. On this occasion Peter's reply was succinct. "What is there to discuss, I am circumcised, they are my boys, they are circumcised." Our conversation moved to other matters.

Before returning to England I had a 'telephone visit' with Arthur, a doctor with whom I worked in New York in 1965. Arthur helped me to accept my circumcised state and encouraged me to have the revision which took place after I returned to England; Arthur is now a practitioner in family health in Vermont. During a conversation of more than an hour I asked about the effect of the American Academy of Paediatrics *Statement about Routine Infant Circumcision*. "It didn't have much effect here, we are a small and stable community, folks did what the family had done in the past. Most all the boys here are circumcised before they leave the hospital. We have a small Hispanic community, they disallow it, and a couple of French families that came here from Quebec. I actively encourage it only when there is already a circumcised boy in the family, sibling rivalry will always come up sooner or later but I think brothers should be alike in this department." I asked "What's the bottom line on your own opinion?" "I'm a Hicksville kid, born in a shack in the mountains, I have two brothers both a lot older than me, none of us were cut as kids. There were only two or three uncut kids in my year at school, and it was like that when I went to College and Med School. I married just before I went off to Vietnam. Sex was great but if it got a bit hectic I was a bit sore for a day or two afterwards. My circumcision was a present to myself, I had it just before my discharge from the Army – I have before and after experience, I've no regrets, I like it, I just wish it had been done when I was a kid."

Ian

Stan & Eddie

Regarding the dispute over comedian Stanley Baxter's status, I sat opposite him, virtually knee to knee, in a sauna, and he certainly looked circumcised to me. I suppose there is a chance he could have had his foreskin pulled back. Add to the list Eddie Izzard, outed as a cavalier by the theatre critic Nicholas de Jongh when reviewing the play *Lenny*. De Longh could not take seriously Izzard, with a foreskin, playing Jewish Lenny Bruce. Subsequently a line was added to 'explain' this situation.

Gary – London

An Alternative To Circumcision

I was in our local bath's changing room recently, and happened to notice the only other occupant, like me appeared radically circumcised. A second glance showed his shaft to be unusually thick and near the scrotum were three tiny gold rings. Seeing we were alone I asked him the reason for the nearly invisible gold rings being put where they were. He explained that several years ago he had gone to one of the body piercing shops and asked them to keep his foreskin permanently retracted for him, with as neat a job as possible. What they did was to initially insert the open rings in the tip of the foreskin. The latter was then fully retracted, and the rings inserted in to holes made in the skin at the base of the shaft, whereupon they were closed and sealed. The foreskin was then unable to return leaving the glans permanently free as if it had been circumcised. He was, he said, delighted with the result, and said that his wife enjoyed his thickened shaft.

Thinking about this later, it occurred to me that now that the medical profession make such problems about circumcising infants, this would be a good alternative for them, as the parents had only to take the baby to the piercer. By keeping the foreskin of a young infant retracted like this the enlarging and flaring of the glans would naturally occur as in a genuine circumcision, and say by the age of five the rings could be removed with no risk of the skin slipping back to cover it. I only wish I had known of this technique when my sons were born, as the doctors refused to circumcise them, and this would have achieved the same result.

Anyone contemplating circumcision which of course can't be reversed if for some unlikely reason you don't like it, this technique is fully reversible and gives a chance to savour the delights of the bared glans.

R.F.W.

Anthony Strikes Again

There was a bold fireman from Ryde,
Whose foreskin was tougher than hide,
He declared it his hose,
Directing the flows,
At old flames and lovers beside.

A teacher whose foreskin was 'taut',
Got a 'lesson' with help which he sought,
The bit that did 'flop',
Was given the chop,
With a new 'head' revealed as it ought.

Anthony

Circumcision — My Story

Part 2

In part 1, I told you about my first self-circumcision attempt and my subsequent trip to the hospital. After that experience I was left with a divided frenulum, a loose lowish circumcision and a skin tunnel along the top of the scar area where one of the dissolvable stitches did not dissolve and was not taken out.

For some time I lived with this situation and wasn't terribly unhappy. I had a number of sexual partners and they didn't complain about my cock.

Anyway at about the age of thirty I discovered the internet, and went back to my early fascination with circumcision. I found out about people who had re-circumcisions, removed their frenulums and other modifications.

So my search started for someone who could perform a re-circumcision and frenotomy. I found that most of the places that I could get this done I could not afford, so the next port of call was the N.H.S. Of course this meant coming up with some symptoms – tightness and soreness mostly around the skin bridge and the divided frenulum. I went to see a surgeon who said he was willing to remove the skin tunnel on the scar and to remove the part of the frenulum on the shaft; he was not willing to remove the part of the frenulum on the head or to do a re-circumcision.

The task was carried out at the local general hospital, under local anaesthetic it took approximately 15 minutes. Healing took about three weeks. I was very careful to follow the surgeon's instructions about stitches to prevent any new skin bridges forming. After healing I found that I was not completely satisfied with the end result. The surgeon had done a good job, but I wanted complete removal of the frenulum! Also removal of the skin bridge had left me with two nodules on the top of my cock. I then decided that because there was not much of the frenulum left I could most probably remove this by crushing and cutting. I had read of people doing this on the internet and so decided to have a go myself.

I cleaned up my cock, I also got together some gauze, lint and micropore tape as I knew that there could be bleeding, but I also knew from my past experience that this would most probably be (in my case) not a problem. I

also cleaned up a set of electrical side-cutters, these are used for cutting wire etc. The cutting edge is not particularly sharp. Carefully placing these so that they were as tight against the underside of the cock head as possible with the remnant of the frenulum in between, I slowly started to squeeze the handles. When I began to feel a little pain I stopped and waited for it to subside. I continued the process squeezing tighter and tighter until finally I felt things give way. I had finally got rid of the residual piece of frenulum. As it turned out because of the crushing there was no blood but in order to protect the area at least for a day or two, I applied a small piece of sterile gauze with micropore tape.

Part 3 will go into my last circumcision experience using a home-made plastic ring and some fishing line as a crushing device. Will I ever be satisfied?

Please note that since Part 1 my E-mail address has changed, so feel free to E-mail steve@topcat.nccnet.co.uk

Steve – Northampton

ACORN

Issue
N^o 2 2000
Editor
Steve Acorn

Editorial

Many thanks to all of you who have sent in articles for this and future issues of the newsletter and to those who have welcomed me to this new post.

I am sorry to have to inform you that Brian has decided to leave the *Acorn Society*. Brian has done a huge amount of work for the Society over many years and his single handed production of the magazine, at such low cost has enabled the subscription to be kept at a modest level. Another major task he undertook was the organisation of the meetings. Aside from his hard work, Brian will be missed by us all.

We are now working on how best to move forward. Unfortunately, it has not been possible to organise a Spring meeting, however, there will be an Autumn meeting as usual. We have plans for the production of the next couple of issues, but the long term solution needs to be found. If anyone has any good ideas, or has the time, means or skill to help, please let us know.

I think that there are some interesting articles in the newsletter this month, please keep them coming!

Steve Acorn

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Third Time Lucky?

This is my first letter to *Acorn*, although I've been a member for a year. I was so glad to find this society, as I couldn't get enough circumcision stories. It's great to have a magazine that doesn't apologize for publishing articles and letters about circumcision. This said I'd like to read more letters per issue, and also read more detailed descriptions of circumcised cocks.

I've got quite a lot to talk about, and for this reason I'm going to send the information in 'installments'. Logically enough I'll start with how I came to be circumcised, and why I've probably been circumcised more times than anyone else. In following letters I'll talk about my experiences of being circumcised and reactions to it and describe the operations on my cock, masturbation and 'fetishes'.

So, I first heard of circumcision when my best friend noticed I wasn't circumcised in the toilets at 6 years old. He'd recently 'been done', and told me you had to have it done to be a 'real man'! This stirred my interest, and by the time I was ten I was madly into circumcised dicks, and desperately wanted to have the operation done. To add insult to injury my brother had the operation at about the same time. Just seeing a circumcised cock would turn me on (but not uncircumcised ones), and I started to wonder how normal this was, and if I was homosexual. In fact, I've always fancied girls a lot, and have never had any amorous feelings towards men just circumcised cocks. I've only had one sexual experience with another man (this year, and I'll talk about this 'planned one-off' in a future letter). I have a sort of fixation or fetish, which I've had to accept, I wonder if any other members are in a similar position?

I wanted to be circumcised for the appearance, which was different and the fact that something so private was made public and vulnerable. Later on, I felt 'dirty' and longed to have a clean, smooth glans for girls to suck. I fantasised about them noticing and talking about how much they liked my circumcision.

In fact, I never had any doubt about wanting to be circumcised, and the desire for it never abated. I prayed that I'd have a medical reason to have it done, or some valid excuse. And it wasn't until I was 29 that I finally plucked up the courage to speak to my GP about it (I had been within an inch of it the year before); I live in Spain and was in England on holiday. Amazingly, she told me that I could get it done on National Health. So, I made an appointment to see the surgeon. He told me that I couldn't have the operation done since I had a normal foreskin, and why did I want it done? I said for aesthetic reasons (a mistake). You should always say for health reasons at the very least. In the end, I asked him why the GP had sent me if I was just going to be wasting my time.

In the end he agreed to do the operation putting 'routine circumcision' as the reason to justify it to the NHS I suppose. He described briefly how he'd

do the circ, and that it would be done under general anesthetic. In fact this is why I decided to cancel, since I'd been told in another clinic in Spain that it could be done with a local one, which I believed was 'safer'.

Next, I phoned around hospitals (seemed cleaner than clinics) in Spain until I found one. I'd cancelled the day before the op in a private clinic due to getting strange feelings about the place.

After scouring the yellow pages under 'Urologists', I chose a surgeon at a hospital. He was a bit old, but I reckoned experience would tell. To get this far had meant me plucking up more courage than you could ever imagine, and getting cold feet and hanging up on the phone many times.

I had the operation (took a couple a pics before hand – still not developed), in a proper op theatre, and was bandaged up and walked straight out of the hospital.

I had asked to have the 'minimum circ', which to me meant cutting the skin to just behind the glans. To my later shock only the tip was cut off. I felt as if my whole world had collapsed around me. So much stress for this! I went back and demanded to know what he'd done and soon found out where the misunderstanding had come in. He agreed to do a 'full' circ, but was surprised I wanted be like the Jews! I said that's exactly what I wanted, although I don't think either of us knew how much is cut from a Jew.

Anyway, I readied myself with relief, for the second definitive chop. To my total disbelief, I got the following: 1 inch of mucus membrane left (top-side) and only the skin cut level with the corona, meaning the skin slightly covered the glans, definitely what I didn't want. The good news was that a small very sensitive 'hot spot' had been left on the back just below the scar, and when erect it looked extremely circumcised. Shortly afterwards I started going out with a new girlfriend (I'll talk about her interesting reactions in my next letter).

A year later I was still unhappy with the appearance when flaccid, and had become a fan of tightly circumcised cocks. I looked up more info about it on the web, and reckoned I knew what I wanted; the inch of mucus membrane pulled tightly back behind the glans when flaccid. The only thing that held me back from a third circ was losing the 'hot spot', but I wanted the tight circ so much that it outweighed the disadvantages. Strangely, I went back to the first private clinic as I remembered that the surgeon had asked if I'd wanted a full or part circumcision.

He remembered me. I said I'd had the op done on the NHS in England but was very unhappy with the result. I left the 'foreskin' as far forward as possible to prove it. I told him exactly what I wanted, and in fact on the operating table we negotiated the drawing of the lines so "there won't be any surprises". In fact he won the negotiation and surprised me because he left half an inch of under-skin (acceptable) but cut just below the corona line (unacceptable), because it leaves a small 'rolled up' ring of mucus membrane just touching the

corona on the top-side. When I went back for the check up I complained but he shrugged it off saying the stitches would have burst if it had been any tighter when erect. So, after 3 attempts I still don't have exactly what I want.

I now favour a tight circumcision, and would love to have my remaining mucus membrane pulled back when flaccid to highlight the glans even more. Due to my diminished sensitivity I'd probably be mad to go for a 4th circ, but if I could be sure I wouldn't be much worse off, I'd be willing to undergo a record-breaking one. Any suggestions on private clinics that could give such advice?

Below, I give more detailed information on the operations and my cock.

Surgery information

All the 3 circs were done under local anesthesia and each circ hurt more than the previous one, as more was cut off I suppose. The injections hurt a lot, but were just about tolerable. The penis soon goes numb luckily. The stitches dropped out after 2 weeks in the hospital case and 4-5 weeks in the clinic due to a different suture being used. The clinic's operating theatre was a small room with minimum equipment and strip lighting, with the surgeon taking emergency phone calls during the op! My hunch had been right the first time. I had the operations 4 years and 2 years ago. The first 2 cost in the region of 200 Pounds and the 3rd about 175 Pounds.

After the first time, I had almost full sensitivity, and it was a neatly done job. The second time it was a well-performed operation, although big stitch scars could be seen round the back, although I kind of liked this. I had a sensitive spot too.

The third operation has left an uneven scar on one side, which I don't like much. It was the last part to be stitched up as the local anaesthesia wore off. Sensitivity has now dropped considerably especially around the frenulum area. Although I always asked to have as much left as possible, the little 'thread' at the back is far less sensitive, and doesn't 'drive me mad' any more, and I don't have any 'hot spots' either. I would have accepted all this if I'd been circumcised as I'd wanted.

The glans is also much less sensitive than when uncircumcised, and in general sensitivity increases when a) I haven't masturbated for several days b) I rub in baby oil. The glans is only too sensitive to touch just after coming. Ejaculation is normally very pleasurable (luckily).

Description of Penis

When flaccid my cock measures 4 inches with half an inch of inner skin (smallest point, top-side) which rolls into a thin pink cuff touching the corona. Due to the shape of the glans there's an inch of inner skin behind the glans with a small thread of frenulum. The glans has a more sharply defined shape now, (especially the underside) and the 'thread' has 'crept' up to the pee-hole.

The penis is 7 inches when erect, and pulls the half inch of inner-skin back. To pull the skin over the glans I have to 'borrow' skin from the base of the penis (the pubic hair area), and with a 'comfortable' pull $\frac{3}{5}$ of the glans when pointing the cock upwards, and just cover $\frac{1}{5}$ when pointing it down.

How would my cock be classified in terms of tightness? Loose – medium tight? Well, that's all for the first installment. I wonder how many other members can relate to my experiences and feelings.

S.J.

Growing Up With An Acroposthion

I went to a minor public school in the early sixties. It was still the case then that boys from the aspiring classes were more often than not circumcised since it was considered one of the marks of a 'gentleman'. I unfortunately was not, since my parents were Hampstead socialists and although my uncircumcised father wanted me done, my mother, a forthright woman of powerful will, indignantly refused on the grounds that it would betray her left wing principles for me to have a cock associated with the hated upper classes. Anyway I was given a really hard time at school. The masters said little but when my long prehensile foreskin was exhibited in the changing room wriggling about like a worm as I changed, they indicated fastidious disapproval implying that possession of a foreskin was evidence of a character defect. Meanwhile the attitude of the other boys was one of horrified disbelief that I had been so neglected and interestingly, badly concealed envy from boys who recognised the fun-potential of a long sleeve of mobile skin in the universal wanking games which they organised and in which I was a sought-after partner. Those who enjoyed the exercise most though, saved their consciences by exclaiming how filthy foreskins were (although mine wasn't) and how glad they were to be circumcised, even though their actions showed clearly that they weren't. Anyway the fact is that I was being picked on by boys and masters and was consequently in a state of deep unhappiness. Finally I decided I'd had enough and on my next holiday, asked my mother if I could please be circumcised. She nearly went through the roof and accused me of being ungrateful after she'd carefully preserved my foreskin from all the pro-circumcision pressure and proceeded to instruct me in how lucky I was and why. With remarkable prescience she described the so-called benefits of circumcision as an old-wives' tale ("load of bollocks" to use her actual words). I'm afraid I was not convinced and still felt I'd be better off without it. Anyway, after she'd calmed down I told her how I'd been treated and she once again blew up, picking up the telephone and giving my housemaster the rough side of her tongue, before telling him that he had just lost a pupil.

I was then enrolled in one of the famous (now infamous) progressive co-ed schools where pupils were allowed virtually to do what they wanted provided that they did not overtly break the law. What a revelation! Firstly it was

co-educational and since the sexual revolution had just started, sexual activity whilst not compulsory was virtually universal. Secondly the kids at the school all came from arty-farty or show biz backgrounds, including a sprinkling of pop stars, where circumcision was not on the menu except for religious reasons. It was interesting that the few circumcised boys around suffered absolutely no abuse as I had done, although there were sniggering discussions and quiet disapproval expressed when they weren't there.

Whereas in my first school – a buttoned up single-sex school where sex was swept under the carpet, it was clear that in the environment of my new school, sexual expression was allowed to occur freely, although the older girls were discreetly supplied with the pill and the boys with condoms to prevent the unwanted publicity of pregnancy. My first shock came when I joined the weekly swimming session. Although compulsion did not exist in the school we were expected to establish our trendy credentials by all taking part in nude mixed swimming. The Head was very keen that children should not be shocked by nudity of any sort and therefore insisted that all staff (of both sexes) should also take part. This was not the imposition it might seem since the staff were all chosen for their progressive attitudes. A number of their wives came along too. I was shaken to the core at finding myself in a pool with a mass of nude people of all ages, including several in their late forties and fifties. The first thing I noticed was that, unlike most of the boys, nearly two thirds of the staff were circumcised. This formed a discussion point which we never tired of airing, with views being expressed for and against by both boys and girls. One particular thing which caused a great impression among the older boys (and some younger ones, including me) was the fact that the physics master's wife, a large brassy blonde, had shaved her pubic hair off, revealing with clear enjoyment her impressively developed pudendal slit, thereby causing the more susceptible of us to rise stiffly to attention as we looked at her, much to her amusement. (The others pretended not to notice.) Her husband also attracted a lot of attention, being endowed with a cock like a rolling pin from which drooped the longest foreskin I've ever seen. One of the more precocious girls gave the opinion that his wife was to blame for pulling it too much!

Sexual activity was of course widespread and although open displays of sexuality and orgies did not happen very often, when they did it was usually under the influence of drink (there was no prohibition on social drinking but getting pissed was discouraged). Amongst the younger kids, sex usually took the form of mutual handling and unlike the 12-year old shaggers today, full sex seldom occurred. A group of them would pair off and head for a secluded nook called the 'fornicatorium' where mutual masturbation took place. For the sake of those interested in wanking techniques, nearly all the boys – and girls – preferred the traditional method of whipping the foreskin up and down over the knob. One or two boys found this a problem due to tightness but other than arousing a certain amount of curiosity, no one got upset about it. The older ones naturally enough indulged enthusiastically in rumpy pumpy and it would be true to say that virtually everyone lost his/her cherry at some

stage. Two events stand out in my memory, both fuelled by booze. The first was joining a queue of boys at a 'production line' where a couple of girls serviced a line of boys, getting the first one's cock out and rubbing him to climax before taking on the next one. The other occasion was an outrageous display by four knickerless girls, known for their loose morals, sitting on a bench with their skirts up round their waists making fountains for the entertainment of the crowd of boys who stood round sniggering.

In later years I was lucky enough to have no sexual hang-ups and no urge to play away, since I was (and still am) happily married. However when my wife went off to look after a sick friend in Canada, I took a couple of weeks holiday in Ibiza – and I can tell you the goings on there made school high jinks look like a tea party! I've never seen so many people, mostly youngsters, so hell bent on getting their ends away, girls even more so than boys and the sights to be seen in the streets and clubs when the booze had been flowing were unbelievable! The highlight of the club scene was inevitably a live sex show with several couples stripping off and misbehaving in the most scandalous fashion on the stage in front of huge audiences, including a girl performer who stripped off and then, believe or not, pissed over the edge of the stage into the front row, to the huge delight of the rest of the audience! Apparently this practice was initiated by an all-girl band – banned in UK of course – called Rockbitch whose party piece it was to piss on one another on stage. Now this might seem like the raving of a seriously deranged fantasist – but it's not. It all happened and still is happening! But to return to the subject, public nudity in such an environment is almost a foregone conclusion and large numbers of drunken clubbers could be seen with their private parts in full view if not totally naked. Contrary to the assertions of the circumcisionists who claim to have seen lots of unhooded cocks in Europe, I never once saw one in Ibiza, either in the sex clubs or on the nudist beaches.

I notice in recent newsletters that some people have a hatred for the so-called "elephant's trunk". In virtually every case they are men who have had themselves circumcised for some reason and to whom it seems that the less penile skin remaining the better. I'm afraid they (and I) are in a small minority. Most women in my experience find a long foreskin attractive and my wife reckons mine is dead cute – otherwise I would certainly be circumcised myself now. Not just my wife though. In June a urologist, Frederick M. Hodges, published a paper entitled *Phimosis in Antiquity*. (See www.cirp.org/library/history/hodges1/) The following are quotes: "...useful Greek word *acroposthion*, which designates the visually defining, tapered, fleshy, nipple-like portion of the foreskin that advances beyond the terminus of the underlying glans penis. The acroposthion, especially in early youth, can run to impressive lengths. As demonstrated by their visual art, the Greeks highly esteemed the foreskin as a defining feature of the male body. Indeed, Galen speaks of the foreskin as a brilliantly useful *adornment*." Apparently the Greeks were so offended by the sight of a bare glans that athletes with short foreskins were required to wear a *kynodesme*, a string tied round the tip of the foreskin after it has been pulled

forward off the glans to avoid displeasing the ladies or frightening the horses. On the subject of long foreskins Hodges says, "One common misuse of the word phimosis by nineteenth-century and some modern medical writers concerns the length of the foreskin. Penises were and are frequently misdiagnosed with phimosis because the foreskin has arbitrarily been determined to be 'too long', 'redundant', or 'hypertrophic'. The Greeks, however, recognised no such disease. In antiquity, the problem was not having too much foreskin, but having too little. Consequently, classical medical writers were concerned with a deformity called *lipodermus*, a condition in which the foreskin was *not long enough* to cover the glans penis completely. Galen, Soranus, Dioscorides, and Antyllus among others, published lengthy descriptions of lipodermus and made detailed recommendations for its correction. Greek medical writers also devoted considerable space to surgical and non-surgical methods of foreskin restoration following posthectomy" (removal of the prepuce) presumably for the benefit of unhappy Jewish subjects.

I.D. – Sussex

More Questions

I was delighted with No.3/99 newsletter which contained much fascinating material about foreskins and less of the interminable methods of circumcision. It also included the first answers to I.D.'s questionnaire, which of course was fascinating to me, having been circumcised in infancy – probably for no very good reason. There are two further questions that should be added to the questionnaire:-

How much of the glans is covered when flaccid, and how much on erection?

Do you pull back your foreskin to pee?

This is advised in some books, presumably for better hygiene(?): but in my experience this is practically never done. Why not? Far from pulling back, most men seem to finish by pulling strongly forward several times, presumably to get rid of the last few drops.

All you lucky cavaliers, let's hear your answers, please.

I.D. – Herts.

Demanding Cut

When my partner pretended to have phimosis and we superglued his normal foreskin together, it completely fooled his G.P. who said she would refer him immediately to the Urologist.

The next week we went for the appointment and the Senior Registrar told Barry that he thought he would 'get away' with frenuloplasty and not have to

do a full circumcision. This wasn't what we had expected and Barry was a bit surprised and so at the time said nothing. We afterwards discussed the matter and decided that we would just have to re-superglue after the frenuloplasty and hopefully get a full circumcision the second time round.

However on the morning of the operation the Surgeon came to consent Barry for his frenuloplasty and Barry said that he would be very disappointed if the op failed and that he'd be angry if he had to have the full circumcision after all because it meant more time, pain and embarrassment. He said that he'd rather have the full circumcision straight off and get it 'all sorted'. The Surgeon said that he thought a frenuloplasty would do the trick and that a full circumcision wouldn't be necessary and was besides a longer op and more painful as an adult. Barry then said to him that he would hold him responsible if he had to come back again and that he wanted his preference to be put in his notes that he would prefer to be fully circumcised and not have the frenuloplasty. The Surgeon got a little bit angry at this point according to Barry but eventually agreed to do a full circumcision that morning even though he didn't think it 'medically or surgically the best option'. Barry therefore surprised me when I saw him the next day with a fully cut cock and great fully exposed helmet.

Dan

Psychology Of Circumcision

I watched the recent TV programme about amputees with some interest. There are apparently numbers of men and women who feel certain parts of their bodies don't belong to them. A woman had tried everywhere to persuade doctors to remove her legs as she longed to be rid of them as being alien to her. One man interviewed, had succeeded in getting one of his legs amputated and was, he said, delighted to be on crutches.

Well it struck me that many of us have had similar lifelong compulsions to be circumcised. In my case it started as far back as I can remember: At least as early as three when I used to play with our next door neighbour's son of the same age. He was circumcised and I loved to look at his clearly exposed knob in contrast to my long foreskin. In the 40's and 50's some 50% of the boys I saw at school were circumcised and I longed to be like them. One friend I had at about 12 years old was radically cut with inner foreskin going well over half way up the shaft. His knob was a lot bigger than mine with the typical flared edge of those cut at birth. Also the rim beside the sulcus was quite smooth, unlike mine which was covered in tiny bumps, which with the foreskin covering them had remained, unlike his, which had long ago withered away having no use without a foreskin.

I used to try and keep my foreskin retracted by such devices as surgical tape, rubber bands, etc. and even had it bare for three days before the constant

friction and awareness of the organ caused me to wank, when I would become too sensitive to try retracting it again for a while. I soon realised the only option was to remove my hated foreskin. As an older schoolboy, I was too shy to go to the old GP so I had to live with it for a few more years until I became a student. One particular girlfriend I remember taking my erect member out, and when she saw the long foreskin she dropped it with an exclamation of revulsion. That finally convinced me that I had to be circumcised! Sadly in the 50's clinics couldn't advertise and I knew of only our GP and couldn't go to him. I therefore decided on a DIY circumcision which if anyone is interested in contacting me I will describe in detail.

Going back to the psychology side of the subject I thought I would, once cut, be rid of my fascination with circumcision. Far from it I still find the word a quite magical one, and love to sneak a glance at the all too few men with cut penises one sees at the sports centre changing rooms. A few days ago I was in to the changing rooms of the local swimming baths and saw several boys of about eight taking off their trunks and noticed one had been circumcised. The circumcised boy even at that age had a glans twice as big as the others and made no attempt to hide his penis unlike the others who attempted to keep theirs covered with towels. Incidentally, from the neat appearance, I imagine he had been circumcised using a Plastibell.

I would welcome any correspondence and having recently heard about docking would like to meet someone who still sports a foreskin to demonstrate how its done.

R.F.W. – Surrey

Answer To Anon

I thought I would answer Anon on p9 of the last issue of *Acorn* by saying that a revision of his slack circumcision is very possible and indeed, highly desirable. As many readers of my DIY exploits (*Acorn* 1/93) will know I did a successful but slack cut at the age of 24. The skin when flaccid just lapped the corona which annoyed me greatly, and I decided to remove the excess. Having once circumcised myself I had no fears regarding pain or competence etc. however, if I was to achieve a radical result, I would risk the inevitable erections damaging the healing wound. I overcame this by use of good quality surgical tape which dragged shaft skin from the base down towards the glans so that the wound skin was kept in a state of slackness.

It is important to note that I did not use stitches during either operation for two reasons: 1) unnecessary pain by prolonging the op. 2) the cut edges joined together after healing leaving virtually no scar at all. All those who have seen the result have been very impressed.

R.F.W. – Surrey

A Suggestion

A suggestion; could you find someone who would write a comprehensive article describing the various forms of circumcision, ranging from the small snip of the end of the foreskin as used to be the kind done by the Jews to the complete stripping of the foreskin and skin of the penis back to the pubic area performed by certain Arab tribes.

If no member of *Acorn* has such knowledge, then perhaps Dr. John Warren of NORM UK or one of his members or medical colleagues may be able and willing to help.

Such information could be of interest to anyone who is thinking of being circumcised themselves or has responsibility for another person's proposed circumcision (e.g. a father).

A cut cock might look attractive but I believe that a lot of sensitivity is lost following the operation.

Anon

[There is a 'book' available, *Circumcision: An Ethnomedical Study* by A. Thomas which can be obtained by sending a cheque/P.O. for made out to A. Thomas to the *Acorn* box no. This is a very comprehensive study running to 264 pages with full illustrated descriptions of both infant and adult operations, as well as religious and tribal rites. There are also personal accounts, glossary, bibliography etc. — *Ed.*]

Replies To Dan, Anon & R.F.W.

Prominent Glans Rim: How fortunate for Dan to have a father who was circumcised himself, wanted the same for his son, and was evidently supportive when Dan obtained his first circumcision at age 16 and the revision seven years later which gave him the result of which he is so proud.

Dan has achieved the prominent glans rim that he wanted, after his revision circumcision radically tightened his shaft skin and removed the roll of skin that bunched behind and rolled over his glans, so that he now has a relatively narrow and tight shaft and a well protruding helmet which is very prominent looking. Indeed, Dan tells us that when at rest, instead of hanging vertically, his cock juts out a little because of the tension in the shaft skin. This is just the 'skinned back and ready for action' look which I think is so admirable in a well-cut cock. There is at least one such penis to be seen in the swimming pool changing rooms at my local Leisure Centre.

But, as with faces etc., the structure of the penis does vary with individuals, and even the tightest circumcision does not always produce the result which

Dan achieved. I was circumcised at 14, and was very pleased to have the bare glans which I so much wanted and which allowed me to join the roundheads, among whom were the school-friends I most admired. I still have a sense of pride and achievement when I remember being able to show it off for the first time. That, too, was a loose cut which was tightened when I was 21. The shaft skin is tense when I am erect, and well clear of my glans rim when flaccid, except in extremes of temperature (cool in the pool, hot in the sauna), when the shaft shrinks to a minimum and a wrinkle of skin covers the glans rim.

But whether flaccid or erect, the thickest part of my penis is the shaft about halfway along, and not the helmet. I have wondered whether there is some way to tighten the circumference of the shaft skin, so as to make the glans rim look more prominent. I have concluded, however, that the cigar-shaped shaft I have is the one I will live with.

Revision: Anon writes to ask about a revision. Circumcision is always done on a flaccid penis, and the main difficulty is to judge how much slack to allow for erection. A medic faces the risk of a charge of unprofessional conduct or even 'abuse' if he stimulates the patient to an erection. Yet this is really the only way to ensure that the right amount of foreskin is measured up and marked off for removal, and it has to be done before injecting the anaesthetic, which may cause some swelling and will almost certainly bring an erection to an end. For these reasons, a really tight circumcision is usually only achieved in one of two ways. Either the boy is circumcised before puberty, so that when the penis grows it takes up the slack in the shaft skin. Or a first circumcision is followed by a revision, when the proportion of skin to be removed to achieve the desired tightness is relatively small. Having seen the results achieved by Dr Sifman, I would happily recommend him for both sympathy and effectiveness. Alternatively, a request to VQ, c/o *Acorn* (together with two loose 1st-class stamps) will also bring a list of circumcisers, although without specific recommendations.

An alternative to circumcision: RFW tells us about the man he met with three small gold rings placed to keep glans bare and his foreskin tethered to the base of his penis. This is, indeed, a reversible alternative to circumcision, especially if sufficiently strong ball-closure rings are used. It would be well worth a try by any adult or teenager interested in feeling what it is like to have a fully exposed glans. But I take issue with RFW's suggestion to try it with an infant, since the foreskin may not be fully retractable in the first 3-4 years, and its bunched-up presence would be difficult to keep clean while the boy was still in nappies.

Tony Acorn

Impatiens Glandulifera

In response to Dan's article in the last newsletter which made reference to several well shaped helmets and of interest to those readers who like uniforms, I thought the following horticulture tip might be of interest to our gardening inclined readers, and anyone who might have joined *Acorn* thinking it was all about gardening for future generations.

A truly wonderful plant to grow in one's garden that is very easy to cultivate is *Impatiens Glandulifera* growing up to six feet tall in a season, its bronze stems and leaves are an architectural asset to any garden. Its pink flowers prolific throughout the season, their shape giving this plant the common name of Policeman's Helmet. Now there's a talking point to introduce *Acorn* issues. Its Latin name also should appeal to those who prefer to call bodily bits by their correct name. Will collect seeds for next season should anyone be interested.

I.W.

Anthony's Snippets

A greaser whose walk was a mince,
Was circumcised making him wince,
A very poor job
Was done on his knob,
His helmet he's hid ever since!

A yank feeling personal itches,
Was circumcised out of his riches,
Whilst there was no cheese,
His lover yelled "Jeeze"
When catching her lips on the stitches.

Acorn Issue 4/99

This was one of the issues you sent to me and I was particularly interested in the article "Comments On 'No Contest' (3/99) by CP – Wiltshire.

I note that CP advised he was going to the clinic in Byfleet to see if he could have more foreskin removed to tighten things up a bit. I would like to know how he got on. During the eleven years since my full circumcision there have been many, many occasions when my wife has masturbated me. She applies an aromatherapy blend called 'sexy' to my glans, masturbates me very

vigorously and the effect is mind blowing. However my wife pulls the shaft skin back very hard so that there is considerable strain on my penis and on the circumcision scar in particular. On the occasions I masturbate myself I also pull the skin back hard. Over the years the skin has stretched a little and now when my penis is flaccid a small amount of skin rolls over the top of the glans and the neat fully exposed look I had directly after circumcision has disappeared. I would like to get this look back but have, up to now, thought it unlikely that a surgeon would consider trimming my penis again. CP how did you get on??

C.B. – Cornwall

Circumcision Hailed As A Way To Curb AIDS

The following extracts are from an article on page 13 of the *Sunday Times*, March 26th 2000 by Brian Appleyard:-

New evidence suggests that circumcision of all male babies could help to halt the global Aids epidemic. With 50m living cases and more than 16m deaths, the disease is now the worst human health disaster since the black death.

The thesis – laid out in a scientific paper to be published soon – seems likely to create huge controversy as it represents a complete change in accepted ideas about the transmission of Aids.

One of the paper's authors, Roger Short, professor of obstetrics at Melbourne University and a respected scientist with long experience of Aids ravaged areas, has been told that he cannot address the subject at a forthcoming international conference.

Short and his co-author, Dr. Robert Szabo, are convinced that a high level of receptors – sites which invading organisms attach themselves – on the inside of the foreskin make it responsible for transmission.

Short and Szabo noted a sharp difference in the prevalence of HIV infection in the 'Aids Belt' countries in Sub-Saharan Africa. In some areas the infection rates are as high as 25%, in others as low as 1%. The lower infection rates were clearly associated with the practice of male circumcision.

"The presence of an intact foreskin" says the Short-Szabo paper, "has consistently been shown to be the single most significant factor associated with the much higher prevalence of HIV in the Aids belt."

The article goes on to describe further differences in infection rates of circumcised males as well as differences between countries with high circumcision rates versus low rates. They are hoping to shortly begin experimenting on 'newly removed' foreskins, and though not advocating

adult circumcision, believe that future generations could be saved if mass circumcision began now. The article concludes:

“The whole of my life’s prejudice has been anti-circumcision” said Short. “I’ve written papers against it. I didn’t believe the benefits outweighed the costs. If God had made us the way we were, why remove a sound organ? But I have been totally converted.”

Partial Cut

In a recent issue, one of our circ-curious colleagues listed several topics about which he would like to know more. The one topic that caught my eye was partial circumcision. As older members will know, I was circumcised in 1995 at 49 years old. Unintentionally, I was partially circ’ed. How did this occur?

I was cut for medical reasons – diabetes, its resulting urinary infections and balanitis. At the time I was quite untutored about the operation, but, when my doctor suggested the procedure, I began a rapid study. I made sure I knew the terminology that applied to my penile anatomy and had a general idea that I didn’t want to lose my frenulum. I had always enjoyed the feelings that originated in this spot and had noticed that most cut men seemed to lack this sinuous flesh.

During my pre-op consultation, I told the urologist that I didn’t want to have a tight cut, since I was dieting for my diabetes and losing weight quite effectively with the help of pondamin – a now discredited medication. I was afraid that if I were circ’ed tightly, the loss of weight might tighten my shaft skin even more, causing discomfort. The urologist agreed with my reasoning and scheduled the op. He did a freehand job – a dorsal slit. When I came to my senses after the procedure, everything was swollen and tight. My glans was prominently exposed to the cold (this was January) and to my briefs. I did note with satisfaction, however, that my frenulum was still in place and very swollen.

It took several weeks for the swelling to subside and several months for the frenulum to return to its supple form. However, in the meantime, I had to stop taking the weight reduction drug and I gained back 30 pounds. I am proud however, to maintained 100 pounds of my weight loss for over five years. The effect of this gain was a partial circ! Unfortunately, avoirdupois pushes downwards. Now my cockhead is $\frac{2}{3}$ covered, most of the time. With very little provocation, however, it reappears and completely uncovers – something that never occurred before the circ. My glans has never gotten tough, but remains moist most of time. As for sensitivity – it has lost some – I can touch it during masturbation. The cockhead dries out quickly when uncapped, allowing me to stroke it. I could never have done so before. During sex the slight loss of sensitivity has given me staying power.

All in all, I'm very satisfied at the partial circ result. I never had another urinary infection and sex is better than before. I would recommend it to any guy who wants the cut experience, but is isn't obsessing about the high and tight look. It's the best of both worlds.

I hope to react about other men's experience with a partial circumcision. So many in *Acorn* write about second and third cuts, I wonder if a partial cut has satisfied anybody else.

D.P.R. – NJ USA (deeper219@aol.com)

A Great Cut At 44

I sent a message to *Acorn* last year hoping for advice or help with my decision to seek a circumcision.

Well, I did proceed and the result has been fantastic. But I would like to thank a small group of people who encouraged me. I don't want to name anyone in particular but I have received e-mails of encouragement from subscribers of *Acorn*. I don't live in the U.K. so *Acorn* is a publication I am not familiar with.

I grew up in the minority at school being uncircumcised and was forever the subject of mockery and ridicule. Then when I left school, I was deterred by a doctor who was against such a procedure. I think he felt he knew best and the patient's needs and wants were secondary. His advice was simply at the age of twenty-one I was too old. And so, because of ignorance, I waited twenty-five years to have my circumcision.

With the advent of the 'net' and all the information that could be found there, I started researching the subject. I stumbled over anti-circ sites, one after the other. Then finally a small group of men who have experienced adult circumcision was revealed to me at certain sites. One by one they wrote of the revelation and enjoyment that being free of a foreskin meant both in every day life as well as in bed. With their encouragement I faced the doctor's scalpel last year. I have to say I enjoyed every minute. It almost felt like an initiation for me. It is something I would do again to feel the way I do now about myself.

Well, that's my story. The result has been fantastic, such was the surgeon's skill and so I wear my scar with pride.

denn45b@netscape.net

Translations Wanted

If any members are willing and able to translate some circumcision supportive literature into a) Italian and b) Spanish please contact Vernon c/o The Gilgal Society, PO Box 21675, London, SW16 4WY. Or email vernon@dircon.co.uk

ACORN

Issue
 N° 3 2000
 Editor
 Steve Acorn

Editorial

Finally here is issue 3, I know how hard it is for you all to have to wait for it, but the last few months have been exceptionally busy.

PS. Sending in articles will speed up the appearance of the next issue!!

AUTUMN MEETING 2000

Another year is rushing by and the summer has been and gone, but before we get to Christmas, there is the Autumn Meeting. This will be held at Hemel Hempstead (not Milton Keynes as had been hoped). I know that many of you were disappointed that we didn't hold the Spring meeting, but I think that this one will more than make up for it. Already nearly twenty people have signed up before the invites have even gone out, so I think that this may be one of the biggest meetings yet.

This Autumn Meeting will follow the same basic format as previous meetings. Please do try and come. Members will start arriving on Friday evening where we will meet informally in the bar & then have dinner later on. More members will arrive during Saturday morning;

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 IP2 8SH

Letters for forwarding should be marked with the recipient's identifier in pencil. They should be stamped 1st class and enclosed in an envelope addressed as above.

E-Mail may be sent to: acornsoc@aol.com

we will have a **very brief** business meeting starting at 2.30 pm, after that we have a private meeting room where we can all chat about our favourite subject and any others for the rest of the day until supper at approx 8.30 pm. A lazy morning on Sunday with rooms vacated by 12.00.

You are welcome to come along for as much or as little as you would like. Already nearly twenty members are definitely coming so it looks like it may be the largest meeting yet! If you would like to come but are 'unsure about it', let us know and we'll give you a call and explain everything. If you would like to meet up with someone beforehand, we'll see what we can organise. If you can't get there, let us know and we'll try to arrange a lift. There is no excuse not to go! Although there is plenty of space at the moment, the hotel will become fully booked up nearer the time, so please book early (we have tried many hotels, but most were fully booked already!)

Please fill out the enclosed form and return it to the PO Box.

Steve Acorn

The Sights Of Europe

In the interests of science, on my recent holiday, I did a tour of the gay saunas in Prague and Vienna. Of well over two hundred sightings I was amazed to find only one circumcision. We've had only one member from Austria, and he wanted a circumcision.

It would appear that in gay saunas it is not the done thing to talk to other people unless they are bosom (or is it bottom) pals. Anyway, they had to put up with me, although all I enquired about were their nationalities, as these are cosmopolitan cities. I found that there were Hungarians, Italians, Romanians, German and Swiss as well as their own nationals.

No attempts were made to keep foreskins retracted, unlike on the naturist beaches in this country. Maybe circumcisions are so uncommon there, and they know so little about the subject, that they don't think about imitating circumcisions like they do here.

Anyway, the vast majority of the foreskins were very normal with a gap at the tip and just a few long and short ones. All very interesting.

D.A.

Status

Leonado di Caprio – Uncut – Picture on the net.

John Edrich (former England Batsman) – Uncut – Personal sighting.

A Landmark Paper On The Foreskin

Lateral preputioplasty for phimosis

J R Coll Surg Edinb, 1999. 44:310-2

**TM Lane and LM South, Department of Surgery,
The Maidstone Hospital, Hermitage Lane, Kent, UK**

Abstract

There exists a lack of understanding of normal preputial development which is reflected in large numbers of inappropriate referrals for circumcision. While the scarred prepuce invariably responds best to formal circumcision a more conservative approach is recommended in those symptomatic patients with non-retractile foreskins. In this study, patients referred to the out-patient department with phimosis were assessed. Those with a phimosis and secondary preputial scarring were listed for circumcision. Those with a narrowed foreskin and a history of recurrent balanitis or local symptoms such as fissuration, thought suitable for a more conservative approach were listed for preputioplasty. N.B. Those with a phimosis but without local symptoms were reassured and discharged (no treatment was considered necessary or appropriate). Thirty patients were referred for preputioplasty. One patient developed a post-operative wound infection which settled with oral antibiotics prescribed by his GP. This left him with further preputial adhesions and he later underwent circumcision. The remaining patients reported no post-operative problems at follow-up. Cosmesis was good with high levels of patient satisfaction expressed. All had easily retractile foreskins at follow-up.

Large numbers of patients might reasonably benefit from a lateral preputioplasty when presenting with a symptomatic phimosis in the absence of significant scarring of the prepuce. It avoids the needless loss of the foreskin, the importance of which is only now beginning to emerge.

Correspondence: Mr T M Lane, 25 Harmood St, Camden, London, NW1 8DW

Reply To

'Circumcision Hailed As A Way to Curb AIDS'

I feel that I have to take up the cudgels in defence of the foreskin over this article.

It is true that some African countries such as Zimbabwe have a fearful high rate of AIDS, and the two main tribes, Shona and Ndebele do not ritually circumcise. But the same can be said for those countries that do circumcise, and, as *An Ethnomedical Study* shows, most tribes in Central Africa do ritually circumcise. I can remember Jomo Kenyatta making an edict that every man in Kenya must be circumcised. If what the article suggests is true, why isn't

it rife in China, Japan and India, where there are millions of foreskins. I suggest that the authors should look more at ethnic cultures to find out why one country has a lower rate of AIDS than others.

Let us now move onto the Western World. No one would doubt that there would be much difference between the promiscuity rate of American and European homosexuals. By 1995, half a million American gays were dead from AIDS. In Europe it was a few thousand. One would then, by the authors' hypothesis, be led to think that no Americans are circumcised and all Europeans are, although the reverse is true.

The poor old foreskin has had a torrid time of it in the last 150 years from the medical world. Imbecility, gout, piles, ingrowing toenails, gall stones and a host of other diseases, caused by masturbation, which in its turn was caused by the foreskin. (Think what all the circumcised are missing nowadays because they don't masturbate, their circumcision having taken away the urge to do it.) Then we've had cancer to women, penile cancer, and all sexually transmitted diseases. The whole lot have been unfounded. And now, up comes AIDS. What next!!

D.A.

Day Surgery

I recently had to visit the day surgery unit of our local hospital in order to have a cyst removed which repeatedly kept bleeding.

In the next bed was a young bloke who was clearly anxious to talk to someone and before long we were chatting away. He had never had to be a patient in hospital before and was very fearful of his present situation, he was about to be circumcised.

He had never been able to retract his foreskin and see his helmet, but this had never caused him any problems, he had never known anything different. He had two previous girlfriends but neither of them had mentioned his tight foreskin. He had now met a pretty Malaysian girl and was rapidly falling in love with her but she kept on asking when she was going to see his helmet; this was beginning to interfere with their relationship.

After giving the matter much thought he had decided to see his local doctor who confirmed that he definitely needed circumcising and if he left the matter he did run the increased risk of developing cancer of the penis – this had shaken him. He was concerned that even if he was circumcised there was no guarantee that they would not split up but he hoped very much that this would not happen and had decided to go ahead with the operation. For two strangers we found ourselves having a very intense heart to heart about an intimate subject. As I left the hospital, he was beginning to come round from the anaesthetic.

I told him that I had been circumcised as an adult some thirty years ago now. At once he was relieved to hear from someone who'd had a similar operation and he naturally had a number of questions he wanted to ask.

It had been possible to retract my foreskin which was long and often used to get red and sore particularly after sex. After the operation the surgeon had told me that my foreskin was abnormally long and this condition often does aggravate balanitis and that the only permanent solution was circumcision.

I told him that he would have a number of stitches and that any discomfort could easily be controlled with painkillers. I did warn him that to begin with his helmet would be very sensitive and that it would take some time to get adjusted to his new situation.

Quite by chance six weeks later I met him again in outpatients. We had both come to have checkups. This time his attitude was very different. He was very pleased with the result of the operation and his relationship with his girlfriend had deepened, and they were seriously considering getting married. Apparently a high percentage of Malaysians are circumcised. He was still adjusting to having a permanently exposed helmet, but things had turned out very much as I had described. Good luck to both of them.

Bill

A Tight Pullover

What do you do when you discover in early adulthood that you have a foreskin that is mobile and retractable when your penis is flaccid and soft but will not retract over the glans without pain and discomfort when erect? Sometimes it even gets painfully stuck behind the glans until the erection subsides. Over exuberance in intercourse results in several days discomfort and recovery time. On the other side you know of circumcision but don't want unnecessary surgery particularly when recognising your foreskin's major contribution to pleasurable sensations eg. during masturbation.

To heighten your dilemma, it's not an easy problem to discuss and you can't illustrate it to a doctor. You consult medical books and the diagnosis is that horrible word phimosis. Like tuberculosis and asbestosis it sounds like a disease, and bad news, but your foreskin is perfectly healthy – just tight. The books also state that the only cure is circumcision and also warn that if you have any penis or foreskin problems, don't under any circumstances put anything down your penis – consult a doctor. You do, and he merely confirms what the books said, in a conversation which makes you feel you should never have asked.

Some years later I consulted a specialist whilst going through a vasectomy, he also confirmed the diagnosis (phimosis) and the cure (circumcision). So its circumcision or soldier on with the considerable help and understanding of

my wife and in the strong belief that my foreskin though long (but not really knowing exactly what long is) was meant to be there, and also learning that circumcision is all or nothing – you can't just have an inch or so removed – I soldiered on. After all everything was healthy and worked OK, it was just too tight.

Why oh why did none of the books, or the doctor, or the specialist suggest stretching my foreskin – a gentle non surgical treatment just like a brace on a tooth? Perhaps because it was 20 years ago though I don't believe much has changed today unless you probe beneath the surface of standard medical information and practice. NOCIRC and NORM are doing this albeit from the viewpoint of those unhappy with their circumcised state. Finally the foreskin which nature provided all men with, is deservedly starting to get a better press and make a comeback.

The kick start for my cure was a NOCIRC piece on TV's Good Sex Guide showing downward stretching by weight and tension for foreskin restoration. If you can stretch downwards and you can put something down your penis (or at least inside the foreskin) why not stretch by width? Eureka! Suddenly I could see the light.

Several plastic and rubber devices of increasing diameters and lengths later (basically tubes) and nearly three years, the stretching is successfully and painlessly completed. The successful conversion of my foreskin from a pain into a pleasure. I don't accept that my problem was phimosis, just everything was intact but too tight – a 'tight pullover'. I'm also sure that for anyone starting from where I started now – the job could be done in much less time.

These questions remain on which members might have views, answers or observations:-

- 1) How common is the 'tight pullover' condition? Difficult to assess, but I don't believe my condition and the long overhang that undoubtedly encouraged it, is that unusual. If there are others out there, believe me there is an easy painless way to make a massive improvement in your sexual sensation and performance.
- 2) Having completed the stretching exercise successfully, is there any danger of the overhang foreskin retightening since it doesn't have the dilation effect of contact with the glans? As an insurance policy against nature undoing the benefits of stretching, I use a small dilator or sleeper in the form of a rubber thimble. Whilst it's easy to wear, day or night, is it necessary?
- 3) Now having the full benefits from the pleasurable sensations in all the nerve endings of a corrected foreskin begs the question is there an optimum length of foreskin? When it provides so many benefits, logic would suggest stretching further in length to provide additional benefits of pleasurable sensations during movement and retraction – or can you have too much of a good thing?

I await views and observations.

F.S.

A Well Cut Cock

Recent articles appearing in *Acorn* have prompted me, regarding what is considered to be a well cut cock, and that which is loosely cut, to write and give my views on what I consider to be a well cut cock.

From a purely personal point of view I give my definition of a well cut cock. When in the flaccid state there should be no loose skin around the base of the corona. The skin on the shaft should be smooth, without any wrinkles. When erect, the shaft skin is stretched tight, and if necessary skin is pulled up from the scrotum area. At no time should there be any noticeable folds in the skin whether flaccid or erect.

As some members know, I was circumcised some thirty five years ago. I was given the opportunity, by the Doctor who did the circumcision for me, to have a tight circumcision, or what he called a French style of circumcision. This, it transpired, was a partial circumcision, and only about half of my foreskin would have been removed. Fortunately, as far as I was concerned, I chose to have a tight circumcision. I was told that there would be no need for me to have a revision, and it would do me for the rest of my life. How glad I was that I chose the latter.

When all was healed, I ended up with a fairly 'radical' circumcision. There was no loose skin behind my corona and the knob was fully exposed at all times. Initially, when erect, there was a tight feeling and skin was pulled up from my scrotum area. This had the effect of causing my testicles to be tightly bunched, and not hang down in the sack. This has proved to be no disadvantage over the years. The compensation is a very aesthetically shaped cock, which has been admired by many people.

I once had the opportunity of giving advice to a guy I knew, who was having a circumcision done through the NHS. I advised him to insist on a tight circumcision, and not to be fobbed of with anything less. When he went in he was told that the surgeon would only split the foreskin, and not remove any of it. He protested strongly that he wished to be fully circumcised so that there was no need for a repeat operation. I believe he had quite a problem in convincing the surgeon what he wanted. He was finally able to get a tight full circumcision.

I since saw the final result, and he certainly got what he asked for. After some years, he said to me that he had no regrets at insisting that the job was

done properly, and he used to thank me for putting him on the right path. He said that he would not have been happy with a very partial circumcision.

As far as sensitivity is concerned, I would probably agree with those who say that when the frenulum has been removed there is a slight loss of sensitivity. However I would say that after thirty five years I have not found this a problem, and everything still works very well!

If I were to have the chance again, knowing what I do now, I would probably have tried to have a Muslim cut. This, I believe, entails keeping as much of the inner foreskin, whilst removing the skin on the outer foreskin. I am told that this allows the nerves of the inner foreskin to be exposed, and therefore maintains sensitivity. The resultant scar is some distance down the shaft. I have never been able to confirm this or not, as I have not had the opportunity of speaking, or corresponding with someone with this style of circumcision. If anyone has either got a circumcision like this, or has first hand experience of this I would be very interested to hear from them.

Returning to my original comment. A well cut cock has to have no surplus skin around the corona whilst flaccid, exposing the knob the whole time. I am sure that there are many who would argue the other way. Such is life.

If anyone would like to contact me I should be happy to pursue this further with them. I can also be contacted at: john@shakerley.fsnet.co.uk

J.S. – Guernsey

Byfleet Clinic Closure

Reference to my article in *Acorn* Issue 4/99 saying that I was hoping to have a Revision Circumcision done at the Emergency Plus Clinic in Byfleet Surrey. Well I had a booking for 10 a.m. on the 6th June. After doing a round trip of 250 miles I arrived to find the Clinic closed and all the windows had been whitewashed. On making a few enquiries no one next door was prepared to comment.

Me being me I rang the General Medical Council who very kindly gave me the address of the Surgeon who would have done my operation. I have been in touch with him and he gave me the run down on the situation. I have also written to the nurses that made my appointment and am waiting for a reply from them.

If anyone is interested and would like to call me or write to me on this problem I would love to hear from you, male or female, there may be hope in a couple of months time when the Surgeon is hoping something will open up again and he will contact me personally, although he only works for the Clinic and is not a part owner, he is very much in favour of surgery at the right price for the every day people who cannot afford the high private hospital prices for first time circumcisions and revision circumcisions plus many

other procedures for men and women. I have all the other procedures details if anyone would like them and very good prices, although obviously at the moment they are not available due to the closure.

He is quite disappointed that the Clinic closed in this way and assures me that things will sort itself out with new owners. Please do not hesitate to contact me on this problem and I will give you all the information that I have. As soon as I have some useful information regarding another Clinic I will share it with you all. My details are with Steve Acorn.

C.P. – Wilts.

Another Prince Albert

An article in the Kentuckian Gay Nudist, April 2000, states:

Did you know that the Prince Albert who gave his name to the form of genital piercing popular today, was not Prince Albert, consort and husband of Queen Victoria?

He was Prince Albert Victor, Duke of Clarence, a grandson of Queen Victoria, and the eldest son of the then Edward, Prince of Wales – the future Edward the VII. Prince Albert Victor was well known in society for his hedonistic and debauched lifestyle, and he was even rumoured to have been Jack the Ripper. The Prince died in mysterious circumstances before his father came to the throne and he is now almost forgotten, apart from giving his name to this rather strange form of personal adornment.

[Any remarks? — *D.A.*]

Thoughts On Acorn

Congratulations on taking over the mantle of Editor from the excellent David, though you may wonder at the moment if you've not been given a poisoned chalice! David told me of the problems being faced which was not just lack of suitable copy but a haemorrhaging membership.

In this respect I do think that if we want to expand the appeal of *Acorn*, we need to make it acceptable to a wider audience. For example in the last issue just received, all the letters bar one very brief one, were from pro-circumcision members. Consequently people like me who are not pro-circumcision will wonder if there's any point in continuing as members if our letters are not going to get published and our point of view is disregarded.

This is fine if it is the intention of the club to re-write the rules (which give equal emphasis to the foreskin as well as circumcision) but it is rather

sad for people like me – I shall always be grateful to *Acorn* for giving me the opportunity to express my life-long anguish and distress at being circumcised without the option. By unloading your pro-foreskin members you will virtually restrict your membership to gay men who have had themselves circumcised as adults and who get their jollies from talking about it. This is necessarily a tiny cross-section of the population and as a result, membership will never increase.

If on the other hand you do want to appeal to a wider audience, you need to get away from the endless diet of revisions, re-revisions, DIY knife and fork jobs and so on and I suggest you take a leaf out of *NORM-UK*'s book who are going from strength to strength, with a rapidly growing membership, charitable status and a national figure as its President. It also has a very powerful and effective women's section and a strong Jewish and Muslim membership.

So as well as re-instating pro-foreskin material, I suggest we expand to include women's issues, with articles about female circumcision for example – or the function of both male and female genitals in general. At the same time the price needs to go up quite drastically to pay for production expenses – if you rely too much on volunteers you will inevitably be let down. If people think that what we are saying is worthwhile, they'll be prepared to pay for it. That is certainly *NORM-UK*'s experience. But it must be worthwhile!

As a case in point I submitted a report on the BJU's Circumcision Supplement (enclosed) to David some time ago which he said he would publish since it is a landmark publication totally relevant to our chosen subject. Although it will make uncomfortable reading for a lot of our membership, we should be made aware of these developments, like them or not. Do hope you can find room for it.

Best regards – and good luck.

R.B.W.

[Many thanks for your letter which raises some good points.

I would love to have a large stockpile of letters, so that each issue could be well balanced. However that is not the way the letters come in, so the balance comes in over a number of issues rather than in just one. Issue 1 was fairly anti/pro-foreskin/restoration & unbiased observation, issue 2 was more pro, this issue is somewhat anti – a rough balance is achieved, I hope.

Any comments from members on your letter would be welcomed.

PS: The report on the BJU circumcision supplement runs to three closely typed A4 pages, and is rather large for the newsletter. If anyone would like a copy of this report, please send an SAE to the Box No. At least one member is planning to bring the full supplement to the Autumn Meeting & I will bring your report on it. — S.A.]

Childhood Wish Fulfilled

After reading the letters in the *Acorn* issues you sent I felt I had to write with my own experiences.

Born in 1948 in Germany (father BAOR). This period was still open season on foreskins and many boys (including HRH) were circumcised if their parents wanted it done. My father and brother (born ten years earlier than me) were both circumcised. According to my mother when she asked that I be circumcised she encountered some opposition from the doctors in the military hospital who did not want to perform the operation on me and it was some weeks after my birth, when my mother, claiming that my foreskin would not retract, finally persuaded the doctor (even though, I assume, it was known then that the foreskin is not necessarily retractable at such a young age) that my penis needed attention. However I was not fully circumcised but had what is called a dorsal slit presumably to allow my foreskin to retract over the glans. My foreskin was sliced apart on the top by about half its length. My mother must have been content with this or else she could not get a doctor to cut any more foreskin away, because no further attempts were made to remove my foreskin and I lived with my penis like this until I was 39.

During my early years my foreskin covered my glans but as I grew up it receded until, on the top of the glans it sat just over the rear of the glans the remainder of the top being uncovered but the underside and sides of the glans were well covered. If I gave the foreskin a tug it would cover more of the glans but after a while it would peel back to its normal position. (I hope you can get an idea of what it looked like but it is not easy to describe.)

During my school days I was the only one in my class who had been cut this way (the other boys were either totally circumcised or not cut at all. It was shortly after I started school at 5 before I realised that penises were different. My father never undressed in front of me and my brother was away at boarding school and being that much older than me I had not seen him naked either. I am sure there were occasions when I was nude with other boys and girls but these did not register. It was when I was in the toilets having a wee that a classmate also 5 made any reference to my penis. He challenged me to see which of us could wee up the wall the furthest and during the contest we obviously looked at each other's penis. I had pulled back my foreskin fully exposing my glans which was the usual way for me to wee. The other boy's penis was fully covered by his foreskin which was also quite long. He must have thought that I had an advantage by pulling my foreskin back and he tried to do the same thing. It must have been the first time he had tried to do this or he wrenched his foreskin back too firmly because either his foreskin and/or the tip of his penis started to bleed. Needless to say the game ended immediately. I do not remember the boy having time off school but I assume he must have had some time off because on a later occasion (it was only a few weeks after the earlier episode) when he and I were in the toilets playing the

same game that I noticed his long foreskin had gone and he had a red scar round the shaft of his penis. He told me that after our earlier game he had told his mother his penis had been bleeding and after a visit to the doctor he was taken into hospital and circumcised. That was the first time I had heard that word. When you are young significant episodes like the one just mentioned really stick in your mind.

Needless to say when I went home I told my mother that a boy in school had just been circumcised and the skin over his penis had been cut off. At this point my mother told me that she had asked the doctor to circumcise me when I was a baby but that he had only sliced through my foreskin which was why my penis looked the way it did. She also told me that my father and brother had been fully circumcised.

It was not until I was 11 and started secondary school that nakedness became a more familiar state. At the infant and junior schools PE was not really on the timetable. Our school did not go swimming and we did not have any proper facilities, consequently what little PE we did was done in our normal school clothes; we did not change into PE kit and there were no changing rooms. At 11 the boys in my class (I went to a Co-Ed school so each class was about 50/50 boys/girls) found ourselves thrown together with another class of boys of the same year for PE; PE was a recognised formal lesson and on the timetable; in fact we had a PE lesson almost every day. Now changing rooms were provided including showers and we were required to change out of our school clothing and into PE kit when we had a lesson. I remember our first lesson was gym and we had to strip off all our clothes including underwear and were just clad in our white shorts. On return from the gym we were all lined up naked to go through the showers. There were about 30 boys in the PE class and the showers only took 10 at a time so there was a queue. As this was the first time most of the boys (including me) had been made to stand naked in a queue, looking, even staring, at the other boys' penises was what most of us did and as I recall about half the boys were circumcised.

At the age of 23 I was married and my wife and I had two children (a boy and a girl). Our sex life was great until I was 38 when I started to get a problem with my penis. For reasons I could not understand the underside of the glans became very red and sore and looked as though the first level of skin had been peeled away and the inside of my foreskin became 'manky'. My doctor prescribed a cream and this appeared to do the trick. However a short while later the same problem flared up again but went away with the use of the cream. This problem occurred on a number of occasions during the next year but I was able to contain it by use of the cream. As you can imagine my wife was very concerned about the problem and wanted a permanent cure. On my next visit to the doctor he suggested that I consider a full circumcision. My wife and I pondered this proposal for a while but as we were just about to move house and location I had to put any decision on hold. However shortly after our move the old problem reared its head again and my wife and I decided

that the operation would be the best solution. Having just moved and changed doctors I did not feel like going through the same routines with my new GP.

Fortunately my wife saw an advertisement in the *Observer* newspaper that circumcisions were available privately at the Surgical Advisory Service for £190; I immediately wrote off for more information. The response was immediate; the letter gave clear information about the operation and advised there was a two week waiting list. I wrote back enclosing the deposit and an appointment was made for early August 1988. I opted for a local anaesthetic for my circumcision although a light general was available. My appointment was for 1:30 pm and I arrived about ten minutes or so early. The waiting room was comfortable and there was one other guy sitting there when I arrived. Not being one who just sits in silence and ignores people and as there were only the two of us we got chatting. This guy had been circumcised about half an hour earlier and was waiting for the surgeon to inspect his penis to ensure he was not bleeding. The door opened, in came another guy and the guy I was chatting to was called out. The guy who had come in had just been circumcised and was required to sit and wait for half an hour to ensure he was not bleeding. The nurse called my name and I was led to a small room and told to remove all my clothes below the waist. I sat there for a few minutes when the surgeon came to see me. He asked why I wanted to be circumcised and when I told him about the infections I had been suffering with he just said fine and led me into the operating room (I would not call it an operating theatre as it was pretty basic). During the chat with the surgeon I made it quite clear that I wanted a total circumcision with no foreskin left to cover the glans and he agreed.

I laid down on the table (I wanted to watch but the surgeon said he wanted me lying down so unfortunately I did not see what happened) and the surgeon applied some fluid and then injected my penis at four points. He then waited for a few minutes chatting to the nurse; returning to me he pricked my penis and asked if I felt any pain. Having established that my penis was completely numbed he commenced to circumcise me. I felt my foreskin being gripped and pulled forward at various points and I could feel/sense the foreskin being cut away. It took a very short time to remove my foreskin and then the surgeon was sewing me up; some gauze was applied and a bandage was wrapped round my penis. That was it. Back to the waiting room to wait my half an hour. There were two guys waiting; the guy who had been circumcised just before me and a new guy who I learnt had come to be circumcised. This guy asked if it hurt and I told him the only minimal discomfort I experienced was when the needle injecting the anaesthetic had been inserted in my foreskin. I told him the whole procedure took only a short time and that we seemed to be on a conveyor belt: one done, one being done and one waiting. The literature had advised that loose clothing be worn so that minimum rubbing of the penis would occur. I did not have any underwear on and just wore a pair of tracksuit bottoms so my penis was able to hang free in its bandage. I pulled the top of my tracksuit out so that the guy could get a view of what his penis

would look like in about 30 minutes; that is all wrapped in a bandage. After my wait and a quick check I was given a prescription for a couple of things which I got in a nearby chemist and I was on my way home.

I had travelled to London for the operation by National Express so I had about a four hour drive home. During the trip the anaesthetic wore off and I could feel my penis coming back to life. Surprisingly my penis did not hurt; it was a little uncomfortable but certainly not painful. Maybe I was lucky but the sort of stories one hears of regarding pain etc were not so in my case.

After three days I sat and soaked in the bath as the leaflet I had been given by the Surgical Advisory Service advised. I peeled off the bandage and the gauze and saw my fully circumcised penis for the first time. True to his word the surgeon had removed my foreskin completely and I had a circular cut round my shaft that was held together by numerous stitches. Even at this time I did not experience any significant pain with my limp penis soaking in the bath water. As I came out of the bath I had my first real erection since the operation. It was not painful and my penis tingled more than anything else as the cut area and stitches came under strain by my erecting penis. I think I can say the experience was 'pleasurably painful'. The skin on the shaft was very taut and I was hardly able to get any movement of the skin. The skin on my glans was also tight and was drawn back towards the cut and stitched area. The stitches were dissolvable and with a little help from me all disappeared within a week or so. The wound healed up fairly quickly (within a few weeks) and I was and still am left with a circular scar round my penis. The skin on my shaft appeared to slacken a little and I had considerably more movement than immediately after the operation. It may be that this movement was always there but I was rather hesitant at putting pressure on the cut when it was still open.

Since my circumcision my sex life has been great and my wife became more willing to engage in other forms of sexual stimulation. My wife certainly likes my penis fully circumcised. We are both naturists and my wife has often said that she finds the look of some of the uncircumcised penises (not all, but those with particularly long foreskins) one sees on the beach quite 'off putting'.

I have never regretted being circumcised and to some extent wish I had taken the decision earlier. I do however consider that the decision to be circumcised or not should be taken by the individual and not for them by parents unless there is a real medical need or religious requirement. To my knowledge my son, now over 20, still has his foreskin and it would have to be his decision to get circumcised.

C.B.

In Answer To Revision (1/2000)

In answer to the revision question (Issue 1/2000) perhaps my story may be helpful.

I'm 41 and was always fascinated by the sight of a circumcised penis. When I was a kid I used to pull my foreskin back in the vain hope that it would stay there and I would be 'circumcised'!

When I was 21 I went to my local GP and to my surprise, he referred me to the local hospital even though there was no medical reason for the operation. I saw a consultant and 6 weeks later I got a letter calling me to go into hospital the following week. Great! my dreams had come true. Not so!

Whoever did the operation didn't know what he was doing because it ended up a right mess. Very loose, an extremely jagged scar line and a 'blob' of skin (I can't think of any other way to describe it) on the underside. When hard, most of these defects weren't that noticeable but when soft, not a pleasing sight.

A few years later I started to notice adverts for circumcision in the *London Evening Standard* and I decided to book an appointment with the Surgical Advisory Service. The Doctor there was so horrified at what he saw he wanted to sort it out there and then. I wasn't ready to go ahead that day but went back a week later for a revision.

He removed the blob of skin on the underside, tidied up the scar and all in all, did quite a good job, but it still was fairly loose. Although because of my first op I'd never have the 'high and tight' I'd always wanted, I did want it tighter.

About 6 months ago I heard about Dr Sifman through a guy I spoke to on the net. After some initial hesitation, I went to see him. I wanted to find out whether two things could be done: to be tightened up and have my frenulum removed. Why I decided I wanted my frenulum removed is difficult to answer but that's what I wanted.

He didn't give me an easy time. I was a bit nervous and he was of the view that there was nothing wrong with the circumcision I had. He was cautious about doing anything but said if that is what I wanted, he'd do it for me. So, after thinking about it for a week. I arranged to have my final revision!

He tightened me up, removed my frenulum and did an excellent job. The main difference in his technique which he sometimes uses and which I had is not to use any stitches. On adults this, I think, is unique. Given my previous circumcisions, I had a pretty good idea as to what I'd expect to see and how the healing process would progress. By not using stitches it was all very different.

When I first took the dressing off I was horrified. I thought he'd made the most horrendous job of it and I went into a blind panic. Fortunately, Dr

Sifman had contacted someone else on whom he had performed a similar operation. This guy rang me and after I had told him my fears reassured me that everything was ok. And it was. I was warned that the healing process could be at least six weeks. After 4 weeks I had my first careful wank. After six weeks, I was back in action.

When soft, the skin lies nicely on the shaft without any bunching near the head. When hard, there's almost no skin movement at all. Sex is fantastic and all for only £300.

I would certainly recommend Dr Sifman. Although any revision is always restricted by how the original circumcision was done, from my experience and others I have spoken to who have also been circumcised by him, he will try to give you the circumcision you want. Some, I believe, have taken pictures from magazines along to him of the sort of circumcision they wish him to emulate.

R. – London

Re 'Replies To Dan, Anon And RFW' In 2/2000

I do not believe the comment made by Tony Acorn in the article is quite correct. His concerns about a medic stimulating a penis to erection are noted but I watched a programme on Channel 4 TV – Under the Knife – which took us through the operation on a penis for Peyronie's disease. The whole operation was undertaken on an erect penis and the surgeon injected the penis to make it erect and pumped a fluid into it during the operation to maintain an erection.

If this procedure is acceptable for this operation and if the patient consents to his penis being erect for the operation of circumcision I fail to see why there should be any problem. May be Tony Acorn or anyone else could comment further. If by making my penis erect was the only way I could get a tight result I would have no difficulty in consenting to this procedure.

I was quite impressed by the surgeon's (a woman) performance as she made every attempt to make the penis aesthetically pleasant and this involved cutting round the old circumcision scar and skinning the penis down to below the area where the disease was. On completion she sewed the skin up more or less along the same line. It would seem a relatively simple procedure to the competent surgeon to make two cuts and remove the small amount of skin between and sew up the result. This would certainly give a tight result. The only down side I would assume would be the cost. If a surgeon was prepared to undertake the procedure for a reasonable price I would suggest he/she would be on to a winner.

C.B. – Cornwall

ACORN

Issue
N^o 4 2000
Editor
Steve Acorn

Editorial

As another year draws to a close, I guess its time to take stock of where we are. A few members have left during the year, and unfortunately a few have died, however we have welcomed several new members and the membership remains slightly up at just over 180. We have recently had a successful Autumn meeting, though due to the problems on the railways, several members were unable to attend. We are solvent and although we have gone down to having only four issues of the newsletter per year, I think that the majority of the contributions remain interesting.

A membership renewal form is enclosed, together with a proposal for a gathering in March next year. If we are to go ahead and arrange this meeting, we will need to confirm it by mid January, so if you would like to come, please reply a.s.a.p. I think that the meetings are one of the real bonuses of this group. To be able to meet people with similar or related interests and talk freely and openly has certainly helped me to a better understanding of my feelings towards circumcision.

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Letters for forwarding should be marked with the recipient's identifier in pencil. They should be stamped 1st class and enclosed in an envelope addressed as above.

E-Mail may be sent to: acrnsoc@aol.com

I am looking forward to the year ahead and wish all of the members a happy and prosperous new year.

Steve Acorn

The October Meeting

A meeting of the *Acorn Society* took place in Hemel Hempstead during the weekend of the 27/28th October. Members from Cornwall, Dorset, Somerset, Surrey, Essex, Greater London, Suffolk, Norfolk, Cambridgeshire and Merseyside made it to the hotel by road, rail and air during a weekend when travel was made difficult by Railtrack's massive action on the railway service following derailments and serious flooding which occurred in some parts of the country. We numbered twenty-one in total and we were pleased to welcome Peter to his first meeting and to see again Don and Edward. A further three members were expected from Sussex and Lancashire.

Having done some 'market research' about a date and possible location for a meeting we hit difficulties in finding a hotel to accommodate us. Eventually, and though the suggestion of Ian, a long time member of *Acorn*, I contacted a Conference Organiser who proved most helpful, found us a suitable hotel and negotiated favourable terms for our stay. For the first time we found ourselves in a hotel with sauna, steam room and swimming pool.

During a short business meeting members exercised their minds on three particular topics, the magazine, the accounts and the question of future meetings.

The Magazine: Our Editor, Steve, explained that there had been some difficulty in obtaining copy for the six magazines issued in the last year. After some discussion it was agreed that a target of four editions of the magazines, with a possible bonus of a fifth edition, would be the intention for the year 2001. It is a pity that we are reduced to this, we know that all our members have a story to tell or opinion to express and wonder why they are so reluctant to share their story or opinion. Without contributions the magazine will fold and with it the *Acorn Society*.

The Accounts: Douglas, our Treasurer, presented a financial statement for the period Jan 1999 – Sept 2000. We are financially secure. Recognising the objective of four or five editions of the magazine in the year commencing January 2001 a subscription of £5 plus the additional cost of postage for our overseas members was proposed and agreed.

Future Meetings: At breakfast on Sunday morning, that time when telephone numbers and e-mail addresses are exchanged, there was general agreement that the meeting had been a success. However, twenty members staying at least one night in the hotel is about the lowest number for which reduced terms can be negotiated. Meetings held in Leicester have attracted

the largest number of members, is this location the most convenient to our members? Our Conference Organiser has suggested that a lower cost event could be negotiated if members were willing to meet in a hotel between, say, Brighton and Bournemouth rather than within ten miles of the M25. We would like to know your opinions.

Douglas

Reply To: A Well Cut Cock

In reply to I.S. of Guernsey (3/2000 – A Well Cut Cock), I am the proud possessor of a ‘Muslim cut’ as J.S. describes it, or ‘high and tight’ as it is often described in the U.S. In my case, this was the result of a forceps-guided circumcision by the skilled hands of Dr Sifman, with an additional half-inch of shaft skin removed all round at the same time.

As in a muslim circumcision, the foreskin and shaft skin were pulled hard forwards beyond the glans and clamped. This resulted in almost all the inner foreskin remaining behind the forceps and still covering the glans, and all the outer foreskin and about a third of the shaft skin being clamped off beyond the forceps and removed on circumcision. In order to ensure a suitable degree of tightness an additional half-inch of shaft skin was then removed, which allows the skin to stretch smoothly over the shaft when erect and avoids covering the corona when soft. This has resulted in a circumcision scar which lies about halfway along the shaft between the corona and the base of the penis. The scar itself is quite pale in colour and is a ‘Q’ shape (rather than an ‘O’) as it continues towards the glans with a ‘T-junction’ on the underside, resulting from the removal of the lower part the frenulum. About an inch of the frenulum remains by the glans. There is a distinct colour change between the darker skin of the shaft and the pale pinkish inner foreskin. I think that the corona of the glans has expanded to some extent since circumcision, giving a more mushroom-shaped appearance rather than the more bullet-headed appearance when it was regularly covered by foreskin. This may, however, be due in part to the skin on the shaft no longer bunching behind the glans, and the sleek shaft emphasizing the true helmet shape of the glans. In any case, it is quite clear to any observer that I am tightly circumcised, and the clear contrast in skin colour across the scar shows that I was cut as an adult. This has resulted in several interesting discussions after the showers!

On every occasion the topic of sensitivity has always come up (as does: “was it painful”, and “how long did it take to return to normal?”!). Having been circumcised well into adulthood, I feel I can comment on this, having had experience of both states.

One of the main concerns of those who were uncircumcised, but felt that they might like to be, was the alleged resulting ‘loss of sensitivity’. From my experience with my style of circumcision, there is no loss of sensitivity, rather

there is a *change* in sensitivity. My uncircumcised glans freshly uncovered from beneath the foreskin was certainly sensitive: a sort of raw, sharp, prickly sensitivity, rather like touching your eyeball. If touched, even very lightly, it would make me jump – obviously not the best of reactions in the sexual situation! – and would require a bit of drying-off time before getting too far. My circumcised glans is still equally as sensitive, with what I can only describe as a smooth, mellow, velvety feeling (but still with some sharper feeling), which will withstand a lot more stimulation, making the final orgasm deeply satisfying. The tight shaft skin and the prominent coronal ridge keeps me much more 'in touch' with my partner (and the feeling is reciprocated!). Before circumcision, the glans often seemed to slip back into the foreskin on the outstroke, so that the sensation was little different from masturbation. Any dryness of the glans is soon rectified with a little lubrication (from whatever source!) – rather like licking your lips – giving the full range of feeling. The remaining length of the frenulum also adds to this.

Moving up from the glans, the almost complete inner foreskin, now turned inside-out and covering half the shaft, provides a further sensitive area. Before circumcision I had always found the inside layer of the foreskin to be much more sensitive than the outer shaft skin, and enjoyed the feeling when the foreskin was pulled well back, unrolling the inner skin along the shaft, but regretting not being able to keep it that way permanently. Circumcision made it permanent. I really enjoy the continuum of sensitivity of the glans and the inner foreskin now stretched halfway up the shaft. The stretch and tightness of the skin is also enjoyable in itself, together with a slight lifting of the scrotum.

An unexpected, but entirely enjoyable result of my style of circumcision occurs at the scar. The sudden *transition* from sensitive inner skin to the less sensitive (but by no means un-sensitive) shaft skin halfway along the shaft provides a surprising sensation almost entirely absent in the uncircumcised state. Caressing across the scar line, and also on the 'T-junction' with the frenulum scar and up towards the frenulum, can be enough to bring me to orgasm, even without touching the glans! This is something I never found with a foreskin, even at the frenar band (the crinkly bit at the tip of the foreskin where it turns inside) either with the glans covered, or with the foreskin pulled hard back. The scar itself, on stimulation, also gives a slightly tingly, itchy sensation which is also rather interesting.

Is there, then, anything I now miss without a full foreskin? Well, yes. It has to be said that some of the sexual nuances involving a covered glans cannot now be achieved. Masturbation is certainly different, and a 'quickie' involving a vigorous romp with the foreskin is no longer possible. However, provided there is some lubrication available, quite a quick one is still possible.

As with so many things, circumcision (or not) and circumcision style is (or should be) very much a matter of personal preference. It really is a pity that teenagers and adults find it so difficult to obtain a well balanced view of

circumcision (if they can find any information at all!). From my point of view, had I known all the advantages of circumcision which I now enjoy, I would not have waited so long. However, I did want to ensure that I obtained the style to suit me.

I certainly feel that my high and tight 'muslim' style of circumcision, which retains almost all of the sensitive inner foreskin, provides the ideal style of circumcision, providing the maximum benefits with the minimum disadvantages. The maximum area of sensitive skin is retained, whilst providing the additional stimulation of a tight shaft and prominent glans, together with the unexpected extra of the scar line sensitivity. Not only does it feel good, but (I think – as do others) it also looks good. It is comfortable, convenient, and (of course, that old excuse) clean. The three 'Cs' of CirCumCision!

P.T. – Sussex

Cavalier Reasoning

First, some background: I am 56, 5'8", weigh approx 150lbs; Cavalier cock 5" long when hard, approx 4.3" circumference, bends slightly upwards (an advantage, I think when fucking), angle when hard about 45 degrees; long overhang foreskin, which is very loose; if foreskin in full extended length, then it does not retract over helmet when hard – if lubricated, will slip back over most of helmet of its own accord. A sprinkle of hair on chest!

My interest in circumcision stems from schooldays when I was in the minority and wanted to be like all my roundhead friends; since then, I have had a few bouts of balanitis (am going through one now) and this also made me consider the cut. In 1984 I was advised by the doctor to have it done and stop messing about, but I was worried about the result, so persevered and the infection cleared up.

I joined *Acorn* in the late 80s to find out more about circumcision and have learned a lot – that it's not just a matter of cutting off the foreskin. I have made contact with a few members circumcised as adults to find out their pre and post experiences – but not very successful; a couple were gay and so could not report on heterosexual sex before and after. What I also noticed was that the cuts were not very clean and stitch marks were left. I prefer the look of a tight cut, but I think this is more US style and most UK roundheads seem to have some skin bunched up behind the helmet.

So, I've decided to stay a cavalier, unless, of course, the balanitis can't be cured – quite apart from the pain and hassle, the unknown sexual result, I'd go through hell being mocked by my mates at my sports club. (As one of our members was a few years ago, but I've never had the courage to ask him why he had the cut!)

Although I still think a circumcised cock looks better, I think that cavaliers have it better sexually – I’ve proved this to myself by wanking with the foreskin held back as far as possible, leaving the shaft skin taut and the helmet totally exposed – there is a definite reduction in sensation without the extra skin movement.

My reasons for keeping my foreskin rolled under itself to expose some of the helmet are – I have slight hypospadias so that my pee-hole is almost split in two and very tender. I always used to pee with the skin forwards, but then experimented with the roll-under – this helped to toughen the end and I now pee almost straight rather than in two differently angled streams! I notice my helmet skin has a slightly different texture where it’s been exposed. This also means that I can pee without pulling the complete foreskin back.

The other reason is appearance – I’m very aware of my small cock – not only length but more importantly, girth – it’s strange that when talking about cock size, it is only length that is referred to. With my foreskin fully forwards, tapering to a point, my cock looks so infantile and pathetic! At least with the skin rolled under it looks slightly thicker and stubbier and with a bit of helmet showing through, a little more aggressive! I also now find this most comfortable to wear – nice to feel the end of the helmet against one’s underwear and I find the fully extended foreskin OK for a while, but then uncomfortable and I’m always aware of this bit of extra skin hanging off the end of my cock! I always wank with the foreskin fully retracted and use lubrication over the bare knob.

When fucking, I find there are various different sensations to be had depending on the angle one goes in at-

- tip of helmet and frenulum area underside
- top of helmet
- base of cock

these give very different orgasms.

I’ve also been experimenting with different lubricants, apart from the standard KY jelly

- Wet or Wet light (from sex shops)
- Liquid silk

I think both have some ingredient which slightly irritates the end of the pee-hole and causes a better orgasm (I think this is the origin of the Spanish Fly claims!)

I think I am probably obsessed with my cock! I don’t know if other guys are, but I have a sneaking suspicion that everyone is, but most are too shy to talk about it! There is no doubt that cocks are observed in showers and changing rooms (I find that I’ll notice someone the first time, but then, unless it is a

particularly huge specimen, take no notice thereafter) – as I do a lot of sport, I'm always in and out of changing rooms and showers.

As I said in my article in *Acorn*, I'm sure many guys would like to discuss this subject more openly, but feel inhibited and that they would be regarded as gay if they did. I think also we all have that desire to exhibit our cocks and show the world what we have!

Anon

Response To Issue 3/2000

Whilst those members opposed to circumcision are entitled to their views, I really must take issue with some of the items in Issue 3/2000.

The attitude of Drs Lane and South towards some of their patients with phimosis is nothing short of deplorable. To turn away patients with phimosis, but no other current symptoms, is to condemn them to a life of sub-standard sex to say nothing of the high risk of balanitis or worse later on. The foreskin is supposed to be easily retractable when both flaccid and erect. Anything less inhibits both cleanliness and proper stimulation of the penis and vagina during sex.

David's comments regarding circumcision and AIDS must surely have been made solely to stimulate discussion. Whilst some early studies in Africa failed to take other cultural matters into account, more recent studies have compared neighbouring groups with almost identical lifestyles and geographical locations. These studies have confirmed the benefit of circumcision in the fight against (heterosexual) AIDS. Comparison of Africa with China (say) really would fail to take cultural and other factors into account and lead to false conclusions.

That AIDS ravaged the homosexual population of the USA long before it was established in Europe is due mainly to the repression of gays in much of Europe compared with the USA. By the time AIDS started to take hold in Europe the need for protected sex was well established.

Why is AIDS still such a problem in circumcised America? Whereas AIDS in Africa is primarily a heterosexual disease; in the USA it is still primarily a homosexual one, and the partner at greatest risk is the 'passive' one receiving anal sex. Clearly it makes no difference whether the recipient of anal sex is circumcised or not as *his* penis is not involved. If one were to look at the AIDS rate amongst the 'active' partners alone the correlation with circumcision status would be more obvious. The other large 'at risk' group in the USA are intravenous drug users where again circumcision status is totally irrelevant.

Anti-circumcisionists repeatedly try to redefine standard medical terms to their advantage. What do they think phimosis is if it is not a tight foreskin?

Phimosis is defined simply as 'a foreskin which is too tight' – no more, no less. In the infant the foreskin is too tight if he has difficulty urinating because of the very small opening (note nothing to do with retractability whilst adhesions are normal). By the onset of puberty all adhesions should have gone and any which remain can usually be broken down by the doctor with a blunt probe. At this point the foreskin should be freely and painlessly totally retractable both flaccid and erect. If, in the absence of adhesions, the foreskin is unable to expand enough to be retracted over the corona then phimosis exists. Phimosis at and beyond puberty is a developmental abnormality and a phimotic foreskin cannot be described as 'healthy'.

Where the phimosis is only very slight it is quite possible that gentle stretching might just allow it to expand enough to uncover the glans properly. However, as the specialist no doubt knew, it is very easy for the foreskin to develop minute tears during stretching. These heal with scar tissue which is even less elastic than the original phimotic ring and only make matters worse. Additionally, where the phimotic area is in the form of a considerable overhang beyond the glans there is every probability that it will tighten up again if the stretching exercises are not maintained.

Stretching the foreskin lengthways will do nothing to add to the number of nerve endings it has, and hence it is hard to see how it could add to pleasurable sensations. Indeed, stretching it out significantly beyond the tip of the glans is more likely to cause it to narrow to provide for the extra length, thus creating a new phimosis. It is also very doubtful whether the primary sexual stimulus actually comes from the foreskin at all. The glans is much more highly enervated and it is the stimulation of the glans, through the foreskin, which is significant. Remember also that some 80% or more of sex is in the mind and not in the penis at all!

Acorn started life as an entirely pro-circumcision forum. Issue 4 carried the first anti-circumcision piece – culled from *INTACT* in the USA it was clearly offered simply as information on the activities of the fledgling anti-circumcision groups there.

Since *Acorn* has no official position for or against circumcision it is very different from activist groups like *NORM-UK*. For activist groups to function they must have impressive looking publications and, usually, a permanent staff to deal with the hoped for flood of enquiries and to generate political pressures. *Acorn* does not attempt to pressure anyone. It has no need of flashy publications, articles concocted by 'experts', or rigged 'International Symposia'. It relies entirely on members' contributions (which are unfortunately often thin on the ground) and is doing quite nicely with its volunteer magazine production staff. Funds are currently quite adequate to meet expected needs even if we had enough suitable and balanced material to produce 8 issues a year again.

Finally, with reference to the Prince Albert article culled from Kentucky: *Acorn* Issue 4 (originally labelled 'D') carried an article from John McC. about the origins of the Prince Albert piercing which is probably more accurate.

Vernon – London

Observations In China

A colleague and I have recently returned from working in China where we had few experiences which may be of interest.

Using the communal showering and changing facilities at the factory, which have never been available on previous visits, we quickly gained an audience, which stood and stared at us. This was rather embarrassing and they were told to 'shove off', but it also gave me an opportunity to make some observations. All of the Chinese had short foreskins some of which were worn retracted behind the glans. In conversation with our company agent, who is Chinese but lives in New York, we told him about our experience, his reply was that western men are reputed to have big dicks and we were being checked out to see if it was true.

The Chinese people are polite and well mannered, but are also very curious and at times their curiosity can get the better of them. In general conversation it is normal to be asked about life in the west, also why, both of us being English, we look so different me being blond haired, fair skinned and green eyed, my colleague being dark haired, sallow skinned and brown eyed. Eventually one of the men who I was working with had been set up (you can always tell when they have been told to ask something), to ask why our penises were so different that I looked similar to them, but my colleague, with an ample foreskin looked so different. I explained, with the aid of a dictionary, that I had been circumcised but he hadn't. The impression I perceived was that he knew the word circumcision but didn't know what it actually was (neither did I until I was circ'd). That night he must have done some research as the next day he asked, 'Did a Dr cut off part of your penis', he looked flabbergasted when I said yes, I also replied that some of his colleagues were circumcised. He said they weren't but that at puberty some men's foreskins retracted and stayed retracted.

That evening I told my colleague about this conversation. He asked me how I felt about being circumcised, that twice 'His banjo string had split and had to be stitched' and the Dr. had recommended that he be circumcised, but that he had refused on both occasions. I told him that I had been cut for medical reasons and had no problems and that if the Dr.'s were recommending it that he should take their advice.

A number of Japanese were working in the locality and resident at the same hotel as we were. Using the changing rooms at the leisure facilities I was able to make some discrete observations. They all had bared glans, most with

foreskin bunched behind the glans, but some, mostly younger men, had no bunching and appeared too tight to just have a retracted foreskin and looked 'obviously' circumcised although there did not appear to be any change in skin colour on their shafts. My understanding had been that Japanese men wore their foreskin retracted and that circumcision was rare. Does anyone know if circumcision is becoming more common in Japan or are some foreskins so short that their owner appears to have quite a tight circumcision?

Tony

Sightings And Thoughts

I have just read and enjoyed Issue no 3 and thought I would mention a recent sighting – a convert to roundhead status. The chap in question used to be at the local swimming baths when I was there: he was obviously well endowed with a long foreskin. Then one day he mentioned that he was changing jobs in the near future. I didn't see him for a while and then one day he re-appeared, but this time he was circumcised! Unfortunately I never got the opportunity of commenting on this change in his status to him, and he has not been back as he then started at the new firm.

J.S. – Guernsey: comments in his article on a 'well cut cock'. I do agree with him that those left with a slack circumcision are never satisfied as it is neither one state or the other, and this surplus skin bunching behind or even lapping the glans is extremely irritating. I know as my first DIY job left me with a lot of surplus skin and I used to look in envy at a 'well cut cock'. I put up with it for ten years before doing my revision which has given me a cock admired by all with a smooth unwrinkled shaft skin even when flaccid. My one regret is that the scar line is only about $\frac{3}{4}$ " from the corona. I firmly believe that the muslims have got it right by leaving all the inner skin and a scar well back on the shaft.

Finally R. – London comments on his stitchless circumcision. I did both my DIY circumcisions without stitching – too painful without anaesthetic – but both left a barely noticeable scar. Far better aesthetically than the nobbly-puckered effect stitching gives. I had to use surgical plaster to drag shaft skin down to allow a loose join to the inner skin at the cut line. I assume R. – London was treated similarly: it's a pity he didn't go into any details as it would have been interesting.

Finally re. Membership: have you advertised in *H & E* etc? I'm sure there are lots of people dying to know about *Acorn!*

R.F.W.

Piercing As Adornment

Circumcision: not for me. And that's for 2 reasons: the skin involved is so sensitive, that I never want to miss it. The other thing is: I have a piercing right through the glans and without the foreskin I would not be able to cover it when I'm naked and I don't want to show it (for instance in a sauna).

The piercing is called 'ampallang' and it goes from side to side through the head (acorn) of my penis: so you see only a 6 mm steel ball on each side halfway down the glans. My decision came after considering it for more than half a year, so it was really no impulse deed. I moved from my original country Holland to Ireland and, as I wanted it to be done in Amsterdam, I just had to wait this six month, before I returned for two weeks. So plenty of time to think about it, during which I often switched from 'I do it' to 'forget it' and back. It could be too much a sort of mutilation, or it could be too obvious, or it might be too painful (I hate dentists, so...).

But at last in Holland it was: don't think any more, just do it NOW! I went to Body Manipulations, going through the usual procedure of signing a form and having some food first (no empty stomach recommended). I asked for a male piercer (no woman please for such a delicate treatment!) and after some time waiting I was called in a cubicle. During a reassurance talk - 'are' you nervous, 'will it bleed' (probably only the first few days during nightly erections), 'how painful' (different for everyone, but it is really not too bad), advise about not to swim during the first month and how to clean it, and don't use alcohol the first day: it makes the blood thinner and this can cause complications by easily bleeding - he prepared the 'operation': cork, needle, gloves, forceps, 4 different lengths of bars, white paper on the treatment table, etc.

Then he asked me to lower my trousers and to lie down. He put a green sheet with a hole over my genitals and let the penis through this hole on top of it. After disinfecting the area he began marking the two spots, where the needle should go in and out again. This took quite some time: to low, to near, not in line. At last we agreed about the pen markings and I asked if the steel would go through the urethra. "I'm not sure now, but if you want it...". It didn't matter for me, only if it did the healing would be quicker: 2 smaller piercings instead of 1 big one in fact. He still made another correction, handling the glans very carefully: 'the needle will go crooked, if I squeeze your penis the tiniest bit.'

The piercing itself would take only one second, the quicker the least painful. He had a apadravia piercing (a vertical bar from next to the frenum to up in the middle of the head) done himself a few months ago and he experienced it as: 'Is that all?'. Now the length of the bar to be used was measured and estimated: oversized, to allow for erections (rather important) and proper cleaning. (Some shops let you measure this when in fact erect.) After a month I had to come back for a size-down, then having the right size taken during a

hard-on. First the clamp was put into place, exactly over the markings: this numbs the penis a bit (well: a bit only it appeared), as there was no anaesthetics used (it mostly gives deformation and so no straight piercing). My glans was strangely flattened now. In the one hand he took the hollow needle, in the other a cork. I thought for one short moment: "Stop here, I can't stand it", but I persevered. After some checking for the right place and angle, he told me to take deep breathings and at an 'out' he pushed it through in one go. I saw it coming out on the other side and then the pain came in: I felt being against the ceiling!! But it lasted only about 30 seconds: it eased off then and after another minute or so the pain was completely gone (a normal chemical reaction causes this).

He observed me carefully to see if I was doing well (no fainting or whatever), but all was ok. He then applied some lubricant on the bar and pushed the needle out with it. Only the balls screwed on and sliding it a bit to let the head expand again, and it was over. Indeed: is that all? (the dentist IS really worse in my opinion). I did like how my penis looked now and never regretted it later. Not a single drop of blood; the next night, when I woke up, the tissues around it in the protecting bag, in fact a rubber glove round the penis, were completely soaked with blood due to erections. But as I was warned for this, it did not upset me. It was never painful, only a bit sore sometimes. You had to be careful with cleaning and peeing the first days, but it's not too bad.

All together this ornamental piercing (mine is one and a half year old now) is apart from the very attractive view (not for everyone I have to say) also recommendable, because it feels very good as well: the penis becomes far more sensitive. So who's next??

Kees - Dublin

P.S.: piercing is addictive: you have one, you want more. About 3 years ago I thought of this practice as weird or whatever. Now I have 12 of them!!! Anyone with other experiences, please write or contact me via the Society. Thanks.

Circumcision — My Story

Part 3

In part 1

Itold you about my first self-circumcision attempt and my subsequent trip to the hospital. What I was looking for was a shortening of my foreskin so that when I am flaccid the skin just covered the cock head and as I get harder the skin rolls back by itself. After that experience I was left with a divided frenulum and a loose lowish circumcision that stayed back all the time. I also ended up with a skin tunnel along the top of the scar area where one of the dissolvable stitches did not dissolve and was not taken out. I thought at the

time “oh well, if this is what a circumcision is then that is it and I’ll just have to get used to it”. At that time I did not know that more skin could be taken off as easily as I do now. I thought that if I wanted to have anything else done then I would have to go for plastic surgery, and that I could not afford. So I got used to it.

In part 2

I told you about my experience with the NHS in the UK at trying to clean up the first circumcision. As you will know if you have read both parts I was not too happy with the job, but things are slowly coming together. After some 5 months of healing the nodules that were left after the skin bridges were removed were not really disappearing to my satisfaction.

And Now

Well the frenulum has gone and now the little bumps have to go! I met someone in the UK though a UK group that has members who’s interests cover circumcision, foreskins and other cock modifications. This person, I’ll call him Bob, told me about his self-circumcision and showed the results, which looked good. He told me how he did it, and what he used. It was a bottle top (in the UK there is a drink that comes in a black plastic bottle with a neck that just fits over the head of an average size cock) and this is what I used, once removed from the bottle and polished. The skin can be pulled up over the bottle top and then tied off using some strong but thin string. Once tied off the skin dies and after 8 days or so the skin has shrivelled then the whole thing will come off leaving you circumcised. Leaving one with a bare scabbed area where the skin has been crushed it takes about 2 to 3 months before the skin becomes smooth and normal.

Tying the knot.

Now you have read about the theory, this is my experience. I followed the above almost to the letter but made some mistakes, I hope by reading this you will not make the same mistakes. First it is not an easy job done by yourself unless this is a first circumcision and you do not wish a tight job. The problem is holding the skin over the top and tying the string tight at the same time. At first I thought that I did not get the string tight enough. Luckily I had a good friend living nearby who I know would be OK with this type of thing. (As you can imagine if this is not the case, the exercise would have stopped there and then.) With his help we re-tightened the string enough. I was told that after one hour or so that the skin should turn blue if the string is tight enough. Well my skin was not turning as blue as I thought (in the end I should have had faith that it was tight enough) and therefore thought that it was not as tight as it should have been. So what to do after one hour of pain and it was just going numb I did not want to take the string off as this would have been painful and I am not into pain. So I decided to tie another piece of string over the top of the first piece, OOPS! It slipped in the night and I ended up with two crush lines. (This gives a thicker scar that is slightly puffy and will need

removing. See end result.) Through the first 5 hours PAIN!! It does go but it is most definitely painful getting the string tight enough and the pain builds up for about the first hour or so before it starts to go away. After this the inconvenience and slight discomfort that one has to put up with for 8 days or so, for me it was 7.

7 Days

It is quite strange having a piece of plastic hanging from your cock for 7 days knowing and seeing the skin that is on it dying off. It starts on the first day with some pain. I went out so that I did not have the chance to remove the string, the pain level in the first 5 hours might have convinced you to take off the string but this would have been a bad move. After the first day the skin is quite numb and cold. On the third and fourth days I was quite interested with this thing hanging there and in fact I used it to wank off with using the top, on the morning of the fourth day. By the fifth day I started to notice that parts of the glans was getting sore under the plastic, as most of us know plastic next to skin sweats. I started, as I should have from the start, to be very thorough about making sure that under the bottle top was dry and clean. Wiping down the inside with cotton buds soaked in salt water then drying with cotton buds. I was lucky as I had the week off work and I suggest that if anyone goes down this route that perhaps they have longer. Also on day 5 I noticed that the dead skin has now shrunk to about half its size and is forming into one black scab. This is not a procedure to use if you want to preserve the skin! By the end of day 6 all that is left is a ring of black scab like dead skin. Day 7 and I felt that there was no point in keeping the string on there and off it came and with some gentle manipulation off came the bottle top with the dead skin. What a relief! The feeling is really good after being confined in a plastic top and having a slightly sore cock head. Free at last!

8 Days and more.

So it is off and I have done a little cleaning up. Be gentle, as even though there is a good join it still has to heal quite a bit more. This is where I started to have problems because I put two pieces of string on ONLY EVER USE ONE!! The two crush lines made by the two pieces of string were in places about 1cm apart. This is because when the skin is over the top it is a double layer so all distances are double. Anywhere the crushes were the furthest distance apart, which was on either side of the cock, the skin started to pull apart. I was not ready for this as I should have been. You need to have some Surgical Tape or stitches ready because if the parts stay open for any length of time (2 or 3 days) then they will and did take a long time to heal. In my case they actually turned up at the edges slightly like bacon turning up when fried, leaving about 2mm of the inside surface of the skin on the outside. It is hard to explain as I do not have a pic. After this heals there is a little puffiness there. Luckily it is hardly noticeable unless you know where to look.

The end or is it?!

So after 14 days most of the thing was healed but the two bits on each side took another 5 days to heal up. Is this the end? Maybe, maybe not. The skin on the shaft is still quite loose, I can still wank by moving the skin up and down. I always wanted it tight so I would like more off. But can I find a way to do it myself? I would also like to do a sub-incision but to keep the PA. This is a little harder as most sub-incisions are performed from the slit down. I have seen one keeping the PA so I know it is possible. Finding the practitioner to do it will be a hard task.

Would I do it again YES using the knowledge I now have I think this is an easy way to do a circumcision. BUT do it right and have a friend to help that is what I say.

Steve

steve@topcat.uklinux.net

Penis Puppeteers

On *Channel 4* last night, 15th Sept, in a programme called *Frontal*, a couple of Australians dressed only in brief cloaks made an outstanding contribution to *Ozzy* culture. They style themselves the Penis Puppeteers and went down a bomb with the teeny bobbars at the Edinburgh Fringe. Their party piece is entitled The Eiffel Tower – a mind-blowing exercise in penile manipulation in which one of them, in close up, pulls his foreskin down to knee level and then stretches it out sideways to touch both knees, representing the base of the tower, whilst the other end of his shaft represents the top of the tower disappearing into his bush (the clouds). The female audience went apeshit!

Depending on your attitude to foreskins, you either feel insanely jealous or you email him recommending a good Jewish clip joint. But a thought – surely most Aussies over the age of 10 have been circumcised?

I do wonder what *Channel 4* will do next – a possible ladies' long range pee contest perhaps?

J.F.

Foreskin Thoughts

It is disappointing to read of our declining membership. I agree wholeheartedly with R.B.W. that we need to get away from “an endless diet of revisions and DIY jobs...”

It seems that we have many older members who were born when circumcision was fashionable; but today mercifully, this is no longer the case. To attract new younger members, it might be a good idea to dwell on the pleasures of foreskins, rather than their disadvantages. What are the young reading today? If it is *Forum* for instance, I suggest an advertisement in that magazine offering a back issue of *Acorn* to any new member may be worthwhile.

On the more cheerful side, I very much enjoyed F.S.'s 'A Tight Pullover' piece in 3/2000, leading to several questions, which he would like answered; such as whether there are any others with tight pullovers? and what is the optimum length of a foreskin?

Meanwhile, here are some questions I would like answered by any of our members lucky enough to have retained their foreskin.

- 1) At what age did you first retract your foreskin? Was it easy or painful at first?
- 2) Who told you how to do it? Parents, older boys, or did you just find out for yourself by chance?
- 3) It seems to me that parents have a responsibility to inform their boys at an early age (did F.S.'s parents try and help him with his tight pullover?)
- 4) I am always interested in their first sexual activities. Many boys seem to have started at school. So would you relate any adventures at school.
- 5) At what age did you begin having adventures with girls. Did the girls enjoy playing with your foreskin?
- 6) When having sexual intercourse, do you prefer the foreskin to remain forward or back?

Answers please all you cavaliers!

I.O. – Herts.

*The Committee and Editorial Team wish all our
readers a prosperous New Year 2001*