## **Boys and Circumcision**

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Chapter 1.
Introduction

The cocks of many boys you see are just the way their Creator made them. But those of other boys are missing the skin which was designed to cover the glans ("cock-head"), so that it is always visible, whether the penis is stiff or not.

Anyone who has picked up this book will surely know what has happened to the boys in this second group: they have been circumcised ("cut"). Circumcision is a surgical procedure done on the male penis in which the part of the skin covering the glans, the so-called "foreskin", is removed by one of a number of methods. (A few peoples do something similar to females, but that won't be an issue here.)

You might wonder what countries you would want to go if you wanted see circumcised boys - or uncircumcised ones. But the issue is not so much a question of what country to go to as what culture and religion the country has.

A surprising number of the peoples on earth have performed this operation on their boys - at least at some time in their history - and most who have tried it have apparently liked the results and are still doing it today. The peoples who have never done circumcision are: the Indoeuropeans (the ancestors of most Europeans, Americans of European extraction, and East Indians), the Finns and Hungarians, and the Mongolian peoples (e.g. the Chinese and Japanese). These ethnic groups of course represent a considerable percentage of the world's population. But most other peoples practice or have practiced circumcision in some form or other, so that it is estimated at present that 1/7th of the world's males are without their foreskins.

The vast majority of boys are circumcised in: Indonesia, the South Pacific, the Near East, and in the United States. Many tribes in Africa circumcise their boys as well (sometimes even waiting with the operation until their sexual development is completed!). The operation is many

thousands of years old, and even today it traditionally is done without any attempt to kill the pain, whether it is performed on infants or bridegrooms, or on boys at any age or stage in between. And it hurts like hell! Even today an anesthetic is used only when it is done in a hospital on children more than a week or ten days old. Only very recently have doctors and nurses started to discuss whether infants should be anesthetized before the procedure, and most of them are still of the opinion that it is unnecessary in the first weeks of life.

If you're a foreskin fan, go to China and Japan, the countries where Slavic languages are spoken, or Scandinavia. The farther West you go in Europe the more circumcised cocks you see, the largest number being in France. The Latin countries, including Central and South America, have a low circumcision rate (although I have seen a surprising number of cut adults in Spain and Portugal, mostly soldiers or ex-soldiers).

Circumcision is universal among peoples whose religion is either Islam or Judaism.

All the Moslem Africans circumcise, as do most of the tribes to the South of them in a wide band across Central Africa, as well as scattered peoples in South Africa. The African tribes that do not circumcise are primarily the Nilotics of the Upper Nile, such as the Nuba (whose males have penises, by the way, that appear to be the longest in the world.) But in the Southern "shank" of Africa the occurrence of circumcision is spotty, and due to the collapse of the traditional cultures there we are no longer sure exactly what is being done to whom or where or at what age. Finally, a particularly elaborate and bloody version of circumcision is performed by the Aborigines of Australia.

Many places where there has been a lot of European influence, for example where Christian missionaries have been at work (i.e. many parts of Africa) circumcision is no longer done, or at least no longer has the same status. Missionaries were often successful in stamping out the practice on the grounds that it was cruel and against Christian principles. (St. Paul decided that it was not necessary for someone to become a Jew before becoming a Christian, thus saving a lot of foreskins.)

Circumcision of newborns has been routinely done in the United States since about the 1890s, usually on the grounds of "hygiene", and under the assumption that it would make masturbation impossible(!). Until recently this was true of Canada, too. But for some years now the Canadians have been less enthusiastic about the operation. This is also the case in Australia, where a medical commission has spoken out strongly against circumcision of newborns.

In Great Britain the circumcision of newborns - and thus of males in general - has almost died out. Up until ten or fifteen years ago, when you saw an English boy who had been circumcised it usually meant that he was a member of the upper classes. But when it was made public, for example, that Prince Charles had been circumcised, a lot of people followed his example, and there was a brief but considerable upsurge of

cutting in all social classes (which has since completely ebbed away).

Although the operation is seldom carried out on newborns on the Continent, my observations in several European countries indicate that more and more young men are getting circumcised in their late teens. According to figures from about ten years ago, up to 5% of the young soldiers in the Federal German Army underwent the operation during their tour of duty. Further observations in German gymnasiums, locker rooms, and saunas show that around 17% have been cut, but in the sample of men observed there was probably a certain percentage of foreign - and often Moslem - schoolboys and students. I have also heard that the East German People's Police highly recommends to its personnel that they get circumcised, giving them time off until healing is complete. Like all surgical operations, circumcision is performed in the GDR on all comers without charge, incidentally, and it is said to be relatively widespread there. But no figures are yet available.

Generally speaking, Europeans don't know much about circumcision, but I have been in situations where they sure reacted to the results! Recently, in fact, I get the impression that a lot of interest in the subject has developed. A few years ago I had the chance to observe a quite amusing incident while I was teaching at a boys' boarding school in Belgium: my group of 13 to 14-year-old Belgian school-boys was confronted in the showers with a swimming team of the same age from the U.S., which had been flown over to Europe for a meet. It was clear from the moment they entered the showers that the boys couldn't keep their eyes off one anothers' cocks. The Belgians couldn't get over the cut cocks of the American boys, with their cock-heads all exposed and unprotected-looking. After a while it was clear that the boys were openly comparing their own cocks, which had been left in their natural state (and most of them had considerable overhang) with the American boys' ones, many of which had been skinned pretty far back. "I never saw anything so completely naked!" one of the Belgian boys told me afterwards. "It was kind of exciting, for some reason, too", he added, with some puzzlement.

For their part, the Americans in the showers were just as fascinated when the Belgian boys demonstrated that if they pulled their foreskins out, they could stretch them out over the glans to almost the length of the shaft. And it was obviously even more fascinating to see the Belgian boys pull the skin back toward the root of the penis to wash the glans.

In Africa for many tribes circumcision is part of the initiation process, the introduction into life as an adult, and as preparation for the sex act. Many of these peoples circumcise them as children of four or five, but as we have indicated, some wait until the boys are fifteen or sixteen, and in some cases even older. As we will see below, waiting beyond the age of puberty ("coming of age" sexually) has certain disadvantages, such as considerable loss of blood after the operation, and serious discomfort, particularly due to erections during the healing process.

Even though there has been considerable argument both pro and con in the

public press about circumcision in the U.S., most males in America are still circumcised shortly after birth. The typical uncircumcised male in the U.S. is a Mexican- or Puerto Rican American (Latin-Americans don't circumcise on principle) or a Black male who has been born out in the country, often at home. Many such people live close to the poverty level and they often don't carry health insurance that covers this kind of minor surgery. Although the little operation on newborns is often a welcome source of extra income for American doctors, they often don't like to perform it when they are not sure in advance where the money is coming from (no matter how good the medical arguments are that they advance for doing it).

When I was studying at a big American university years ago I got a job handing out towels in the men's side of the gym in the shower room. It was a great job! For my last two years there I was at a table in front of the shower-room every week-day, about 250 days a year. I got a good close-up look at every guy on his way to take a shower. The guys had to pass my table, where I took their used towel from last time and replaced it with a fresh one. Since even the guys who walked around the locker room with a towel around their waists had to take it off to exchange it, I got to collect pretty accurate statistics on who was cut and who wasn't. (In those days it was very unusual for uncircumcised guys to wear their skin pulled back. Nowadays it would be harder to get an clear reading at a distance or at a glance. But in almost all cases there was no question as to the status of their cocks, which were dangling only inches from my nose: you could see every detail.)

Over the whole two years the average varied very little: almost exactly eleven out of twelve guys were circumcised (more than 91%). The actual figure for American-born men might even be a little higher, because there was a certain small percentage of uncircumcised Europeans. There was also a very small number where I was never able to tell. These were guys who were so extremely shy that they bought a third towel so as never to be completely exposed. I managed to eliminate even most of these after a while, by following them into the showers and showering next to them. Of the thousands of guys I observed there were also a small number where I couldn't tell even at close range whether they were circumcised or only had a short foreskin.

One of the most interesting things I observed in that job was the case of the twins. Almost every day these two young guys came in to play tennis or squash or to work out. They were identical twins, both well-built and with really nice bodies. The funny thing was, one of them was circumcised - pretty radically, in fact - and the other wasn't. The only way you could tell them apart was to see them in the buff, e.g. in the shower room.

After a while I made friends with them, and over a beer one night, with my heart in my mouth, I asked them point blank what the story was. They explained that the circumcised one had done a notably unsuccessful masturbation experiment using a vacuum cleaner. (It is now well known that it is not a good idea to fuck around with vacuum cleaners.) The suction had ripped off a major portion of his foreskin, they told me,

and the remaining fringes had had to be removed surgically in the nearest accident ward. Considering how bad the accident had been, the cosmetic result wasn't bad. In the months since the operation the twins had had lots of opportunity to compare themselves with one another, and before they graduated, the uncircumcised twin had himself done, too, so they would look the same again.

An investigation done in Illinois in 1975 later substantiated my results: 92% of the guys examined by doctors in the study were noted as being circumcised. This figure is probably about correct for the rest of the U.S. at the time, too. But in 1982 the figure had sunk to 88%. A more recent study from the year 1984 came up with the same result. And now the circumcision rate appears to be going up again. So you can proceed from the assumption that in any case less than 12% of American males get through life without making the acquaintance of the circumciser's scalpel.

At the moment perhaps a few less newborns are being circumcised, for one thing because it has been published that in around one out of fifteen or twenty cases there are "complications". But since somewhat fewer guys are being circumcised as infants, an increasing number is running into trouble in and after puberty. Doctors have been reporting in the professional magazines that more and more boys and young men have been consulting them with foreskin problems and asking (begging in some cases!) to have it done. ("When can we do it? This morning, maybe? My girlfriend...")

So in general to be an American boy means to have a circumcised penis. And any boy who isn't cut has to be prepared to take a certain amount of shit from his friends and classmates when he turns up in the shower with a tube of "superfluous" wrinkly skin at the end of his cock.

Nobody seems to be clear about why so many peoples on the earth decided to mutilate their males in this way, but the historical record makes it clear that it has been going on since before the dawn of history. There are documents from ancient Egypt telling us that circumcision was performed on the boys of the priestly caste (including the Pharaohs): many of the mummies in museums have proved to be cut, where the state of their preservation made it possible to make any judgment at all. According to the accepted theory, the Egyptians considered the erect penis (the phallus) something holy. It was considered a sacrilege to approach the altar in any way unclean, and an uncircumcised cock was apparently considered dirty in principle. It seems likely that all the people who accepted circumcision took the custom over directly or indirectly from the ancient Egyptians. Even the Jews learned about circumcision from the Egyptians during their period of captivity.

Among the Jews there are virtually no exceptions. To refuse to have your child circumcised is to leave the community. All male children are cut - on the eighth day of their lives if at all possible. In former years even the non-Jewish servant boys in Jewish households had to be cut. Any Jew is permitted to perform the operation, whether he has been trained to do it or not. In an "emergency" even Jewish women are allowed to do

it. But normally it is performed by the so-called "mohel" in a special ceremony. If a male Jewish child dies during birth or in the first week of his life, he is circumcised before being buried.

In one particular phase of their history (under the influence of the nude and uncut Greeks in their sports events) teenage Jews often tried to undo their circumcision by using various techniques and devices to stretch the remaining foreskin until it came down partially over the glans. When the rabbis got wind of this, they determined to change the form of the operation to make it impossible to reverse. From that time on right up to today, after the outer skin layer has been sliced off, the inner layer is split right up to the crown of the glans and removed. Originally the mohel used his fingernails for that part. The cosmetic results of this rip-off are sometimes horrifying, particularly after puberty, when the sudden growth of the young Jewish boy's penis has stretched and broadened the scar.

A certain number of Jews in the Old Testament (seventeen, in fact) were born without foreskins, according to the Scriptures - obviously a sign of particular grace! Among these was David. But Michelangelo obviously hadn't heard about this, since he provided his famous statue of David with a particularly pretty foreskin, something that the historical David could never have had. (Actually art historians now think the statue is an allegorical figure representing the city of Florence, and not the biblical David at all.)

As we have said, the Moslems, a very large group of people settled all over the area between the Soviet Union and West Africa, circumcise their males, although it is only recommended - rather than required - by the Koran. The age at which the operation takes places varies intriguingly from locality to locality. Some Moslems remove the foreskin shortly after birth, like the Jews. Others wait until the boys are five or seven years old. Still others (e.g. the Turks) generally do it between the ages of seven and thirteen, which is very late. The reason is probably that Ishmael, whom they revere, was made to suffer the operation at age thirteen, according to the Bible. The Egyptian peasants also commonly wait until this age too, although in the cities the tendency is to do it fairly early. I have also seen a documentary film including the circumcision of a half-dozen Turkish boys in the uplands of Anatolia, where the boys appear to be around fourteen. There is a brief close-up of the operation on one boy. In the few seconds where the operation field is visible, you can see real hair at the base of the boy's cock as the razor descends. Unfortunately the sequence breaks off when he starts to cry out in pain.

Where circumcision is done in the "developed" world, it is done in the first days of life, and various techniques are used, as we shall see below.

------Chapter 2.

## The Wonderful Organ of Generation

And now a few things about that most wonderful organ - the penis.

The penis is one of the most wonderfully designed organs in the body. When it stiffens and gets ready to perform, it gains about 20% in circumference, about 30% in weight, and around 80% in volume - not to mention about 500% in effectiveness. You may wonder whether yours is of at least average size (and everybody wonders about this at some time or other), so perhaps the following facts will be of interest:

The flaccid (non-erect) penis shows a large breath of variation between one person and another. It may be almost invisible, hidden behind a thick bush of hair, or even when not stiff it can appear as long as though it were fully erect. Most penises in their relaxed state are somewhere in between. But nobody should worry about the apparent size of his penis. (In fact you should worry about it less than about any other organ in your body: nothing you own has been built for such a long period of trouble-free heavy-duty use.) To be frank, you might consider yourself lucky if your penis is small and compact in its non-erect state. If you run, for instance, wearing only a jogging suit, at least it doesn't flop around and bang against your thighs or smack you in the nuts at every other step. And I have known a few guys that had such a long cock that they had to go to some trouble to pack it up after urinating in such a way that it would be comfortable.

I don't know any figures on the average size of the non-erect penis. In fact there is no good way to measure it, because it is such a dynamic organ, changing its size depending on the temperature and the state of the owner's mind. Sometimes when you have been swimming in cold water it is shrunken up to the minimum, but if we're talking about a boy in his teens it is often pretty large, because his thoughts revolve around sex most of the time, which keeps it half stiff.

This is the important thing: when erect, all penises are close to the same size, within fairly narrow limits. According to a recent research report the erect penis of the adult male measures on the average between 6"- 6 3/4". If your erect penis is longer than 6 3/4" you are in the upper 15%. (For maximum results you should measure it just before orgasm, or right after you get up in the morning before urinating, when you have a good stiff "piss erection".)

The maximum measurements are known, and they illustrate that most of the gigantic cocks you read about in pornographic literature are the result of wishful thinking. Over the years there have been scientific investigations of the erect penis, and some of the results are as follows: in 1935 a certain Dr. Jacobus located a Black man in the Sudan with a giant of over 12". (The Sudan is the place to go to see big uncut ones, in any case.)

A study published by the American magazine "Forum" reports about an American with a penis 9 3/4" long, and I have in my possession a picture of a young man from the Caribbean who obviously gets first prize among

those alive today. I don't have his measurements, but his penis literally hangs down to his knees! It is so long that he is able to tie an overhand knot in it. I at first thought it must be some kind of photo-montage, but I have since seen the negative, and it has not been manipulated.

The largest erect penis noted in the famous Kinsey study was a little over 9 3/4" long. Dr. Reuben, the author of a famous book on sexual information, claims to have heard of a penis nearly 14" long, but according to the laws of statistics this could only occur once in a billion cases, so there could at the most be two or three such titanic organs in the total male population of the world.

A further, international, study produced the following maximum figures sorted in the following table according to nationality:

Nationality cm inches English 26.6 10.47" German 21.6 8.50" Danish 20 7.87" Swedish 19.7 7.76" American 19.7 7.76" French 19.7 7.76"

This study also included the figure of 7 1/2" for an American Black man, but I am sure - on the grounds of personal experience - that it would not take me long to find one who would be able to hang more than that next to the yardstick!

In my days as a male nurse in the Navy I interviewed men who had a penis only 3" - 3 1/2" long, who reported that they experienced unbelievable pleasure during the sex act, so much so that they lost control and cried out with lust. They were also capable of producing the same effect in their partners. On the other hand I treated guys with very large ones whose reports made me think they were not so much to be envied. They said they had trouble finding partners who were willing and able to let themselves penetrated up to the hilt. Often their partners found having sex with them painful, and only allowed them to come in half-way. And that's no fun.

Generally speaking we can say that the penis in its erect state more than doubles in size and that it increases in girth by about a, as the figures at the beginning of this chapter indicate

But now let us turn to consideration of the development of most wonderful organ.

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Chapter 3.

Boys and their Sexual Development

When boys get into puberty, unbelievable changes start to take place in their bodies. Some of the most important ones are the changes in their penises and testicles ("balls"). Doctors who specialize in sexual development distinguish five stages:

In Stage 1, even though the boy may be quite good-sized already, the penis and the testicles are still only about as large as they were when he was a little boy.

In Stage 2 the testicles and the scrotum ("bag" or "sack") start to grow. The penis itself often stays quite small for the time being. Stage 2 normally begins when the boy is between eleven and thirteen years old. The growth in the size of the scrotum is sometimes quite dramatic, and you can see kids that have a bag almost the size of their fist hanging down heavily below a really insignificant little dink.

Stage 3. About a year after the testicles have started to grow, the penis starts to grow. These changes often start with dramatic suddenness. Usually it starts by increasing in length; breadth and circumference are still to come. With a little experience it is not hard to recognize the typical longish, thin penis of the Stage 3 boy. The testicles continue to grow during this stage.

Stage 4. The boy is now usually between thirteen and fifteen. This is the stage in which he starts to lose his little-boy fat and he starts to develop muscle. The testicles and the scrotum now approach adult size. The penis starts to gain dramatically in size, both in length and girth. The glans begins to swell, and where up to now the penis has been smooth and funnel shaped, the rim of the glans becomes visible under the foreskin, when it is present, giving the organ a more business-like contour.

By the beginning of Stage 4 almost every boy has already been having "dry orgasms", i.e. ones where he has come without producing any seminal fluid ("cum"), but usually before he is very far into Stage 4 he starts to squirt when he has an orgasm. The feeling of the seminal fluid coming in, coursing through the penis, and shooting out represents a considerable gain in pleasure over "coming dry", and this is the stage when most boys really get into the pleasures of masturbation. By now the boy has discovered sex in earnest, and since he finds himself thinking about it most of the time, in Stage 4 he often has at least a partial erection.

According to the observations of one specialist in boys' sexual development, the ability to produce seminal fluid is keyed to the appearance of adult-type pubic hair. This was certainly the case with two boys I knew well: they started to produce a small amount of clear fluid during orgasm just about the time when the first straight dark hairs appeared at the base of the penis. But it was only after the appearance of curly, adult-type hairs that they started to produce very

much in quantity, and it was at this time that it became thick and grey.

It is wonderful to watch boys at Stage 4 in the nude. The penis often looks larger at this stage than it will when they are fully grown. And while the boys are almost men on the one hand, on the other they haven't yet lost their built-in boy charm.

Boys in this stage usually won't admit it, but they are usually very interested in the genitals of other boys and men (and of course, those of girls, too). They often go to considerable trouble to be where other guys are getting dressed and undressed and showering, for instance in the gym or at the swimming club.

Stage 5 is the final stage of genital development, when everything has reached adult size.

It usually takes about two years to get from Stage 2 to Stage 4, and another two years to arrive at Stage 5. A boy can start into puberty quite early, at age ten, or very late, at fifteen, and still be considered entirely normal. He may arrive at Stage 5 anywhere between fifteen and twenty without being statistically unusual.

There is a similar scale for public hair, the development of which follows a schedule of its own, and may be out of phase with the size development of the genitals. (It comes in late rather than early, so you sometimes see boys who already have large organs, but almost no hair yet.)

Before we go on, let's take a look at the (schematic) anatomy of the penis:

It consists first of all of a shaft. The shaft is made up mainly of two organs called the corpora cavernosae. The Latin words reflect the fact that if you open them up surgically, they have a structure inside that looks a little like Carlsbad Caverns. When the penis gets erect, the "caverns" fill with blood, and the blood pressure causes them to expand, and their walls to become smooth. The two bodies can become as hard as wood. They don't join at the bottom, but leave room for the urethra, the tube through which urine and semen leave the body. Seen in cross-section, the penis is roughly triangular, the two upper points being formed by the edges of the two corpora, and the third point being the lower edge of the tube.

At the outer end of the shaft is the soft, velvety cushion of the glans, which also swells when the owner has an erection. It is full of nerve endings and therefore exquisitely sensitive.

!Behind the glans is a furrow which is called in medical terms the sulcus. At the bottom of the glans, underneath where the two sides join, there is a seam, often in the form of a bridge of skin. This is called the frellum or frenulum, both Latin words for "brake" or "bridle", since the glans looks something like a horse's head, which is pulled down and back (stopping the horse) when you pull on the reins. If the frenulum is too short, it causes pain during the sex act. For this reason a doctor

doing a circumcision usually cuts it - as a sort of free extra - to make the owner more comfortable when having sex. At the tip of the glans is the meatus, the hole provided for urine and seminal fluid to emerge.

In uncircumcised boys the glans is covered by a double layer of skin called the foreskin (or prepuce). Even fairly serious books on circumcision fail to mention the double nature of this layer, which as we will see, is very important to understanding circumcision. The foreskin usually sticks to the surface of the glans in newborns and young children, but at the latest by the time the owner has gotten in to puberty it should be possible to pull it back completely behind the rim of the glans.

As we have noted, the uncircumcised foreskin has an inner and an outer layer. The outer skin is just a continuation of the skin of the shaft, and is quite elastic, but the inner (or mucosa) layer is thin and resembles the inside skin of your cheeks. It can't be stretched very much at all without causing discomfort. It is important that the doctor understand this when he makes the decision as to how much of each of the two layers he should cut off.

The foreskin of the normal uncircumcised boy is usually a little longer than it needs to be to cover the glans when the penis is relaxed. Some boys have a foreskin which is so short that the tip of the glans is always visible, but most boys of European extraction have one long enough to cover the glans completely, typically ending in a "rosette", which in many boys overhangs the tip of the glans by a half-inch or more. If a boy has arrived at Stage 4 and still has this much overhang, he is likely to get into difficulties in his sex life: the foreskin forms a thick ring which may fold back and forth over itself several times at the edge of the glans. This can cause quite a little discomfort during the sex act, and most of these boys will find themselves having to pull back the skin with their fingers even when it is inside their partner to achieve orgasm. If you see boys with so much overhang, you might consider advising them to consult a specialist in these matters.

Is it always possible to tell a circumcised boy from an uncircumcised one? Well, the answer is - almost always. If you see a boy in good light, you can usually be 100% sure. If the skin hangs down over the edge of the glans more than a 1/4" (hiding part of it), your boy has almost certainly not been cut yet. But in the circumcised penis the skin usually ends well behind the edge of the glans. The remains of the inner layer usually have a more or less wrinkled appearance between the glans and the seam between it and the shaft skin.

It is difficult to tell, when an uncircumcised boy has pulled back his skin and not pulled it forward again yet. Most uncut boys are reluctant to let themselves be seen with their foreskin pulled back, though, but sometimes you see this. Most boys for instance pull the skin back to urinate, and of course they have to pull it back to wash the glans or the inner part of the foreskin.

It is often hard to determine if you only have a photo. particularly

when the subject has a partial or full erection. That is because the cut penis resembles an erect uncut one. Some people think, by the way, that that is the reason who so many peoples have been circumcising their boys for thousands of years.

Usually you can base your decision on the presence or absence of a scar. However carefully the doctor may have performed the operation, their is in most cases a clearly visible scar. Also, the outer shaft skin tends to darken during puberty and form a ring of somewhat darker skin around the penis just behind the scar. The shaft skin which is left after cutting is looser in the cut boy (because it has to be left long enough to provide room for erection) and this loose skin usually forms more or less noticeable folds when the organ is relaxed. The scar can be an almost unnoticeable thin white line - or a broad, irregular cuff up to a 1/2" broad, or any of the possibilities in between. The result depends on whether and in what way the scar is stretched by growth of the shaft and erections. Another very important factor is the operative technique of the surgeon. Sometimes you see kids with circumcision scars so obvious that it is almost a disfigurement. These are usually the result of circumcisions carried out shortly after birth, when the doctor couldn't possibly have had any idea of the size or shape the organ was going to have, at or after puberty. When the scar is pretty broad and irregular to begin with, and the shaft skin has been cut very short, it gets stretched even more by the inevitable full erections the boy has when he gets into puberty. Some boys have almost nothing left of the shaft skin, so that the scar ends up half-way back on the shaft. In these cases you sometimes say they have been "cut half-way back to the balls".

There is one other interesting thing about cut penises with obvious scars. The darkness of the scar and the folds of skin behind it depend mostly on the boy's complexion. Boys with blond hair on the heads but dark hair in their armpits and groin often have very dark circumcision scars. Boys who have this kind of coloration often have dark eyebrows as well, so you can sometimes tell a little about what a boy's circumcision will look like even when all you can see of him is his face.

Sometimes you can guess whether a boy is circumcised or not just by seeing him in a thin swimsuit such as a speedy If you're lucky you can make out the edge of the circumcised boy's glans under the material. And in my experience only uncut boys wear their penis horizontally off to the side inside their swimsuit (they almost always wear it pointing to the left, too). I have never known a circumcised boy who wore it pointed anywhere but straight down inside his trunks.

Chapter 4.
Operation techniques

The basic procedure for a circumcision has been the same since

prehistoric times. It consists basically of two steps: first the foreskin is pulled out (or down) as far as it will go, then the part that is in front of the tip of the glans is cut off (ablated). The second step, the real circumcision (from Latin circum = around + cidere = cut), consists of cutting off circularly a greater or lesser amount of the inner skin that covers the glans as well.

Among various peoples the operation consists of only the first of these steps. With many African peoples, for example, it is done without any formalities or religious rites. Among some peoples friends in their teens just go off somewhere into the bush and circumcise one another. Under circumstances like this the circumcision of course has to be quick and uncomplicated, and it consists of only the first step mentioned above (which it is painful enough as it is). This first step exposes the glans, more or less, but technically speaking it is only an "ablation", a simple removal of the foreskin, and not a true (i.e. circular) circumcision. It has a certain disadvantage: if only the ablation procedure is done, the inner layer, which is at least as long as the glans, and thus in some boys can be as long as I/2", can in the course of time work its way down over the edge of the glans again and cover it partly, which is not what you want to accomplish with a circumcision. And the result is often rather ugly.

Some circumcisers in primitive cultures do it by eye and try to place the cut as well as they can right behind the edge of the glans. In most cases the foreskin is grasped between the operator's thumb and index finger, in order to make sure that the glans itself will not be cut into.

Other peoples, for example the Jews, pull the foreskin through a slit in a metal plate, and cut off only the portion outside the slit. The plate protects the glans and provides a guide for the knife as well.

It makes quite a difference to the final appearance of the circumcised penis how much of the inner and outer skin layer are removed, and in particular how much relative to one another. In some forms of the operation, as we have described, almost all of the inner layer is left. With more advanced techniques a corresponding amount of the inner layer is removed, i.e. it is cut back quite far. However questionable the cosmetic results may be, there is at least the advantage that a great deal of the sensitive inner layer is preserved, greatly enhancing the pleasure of the sex act. The cosmetic disadvantage comes from the fact that when the penis is relaxed, there is often an unsightly collar of skin behind the glans. We have all seen the results of this kind of operation in the showers. It is a very common sequel to the techniques favored in America for infants, featuring the various clamps and plastic bells that enable a circumcision to be performed by doctors who have had little experience judging how much skin to leave.

The free-hand surgical techniques preferred by most surgeons for use with teenagers and adults usually leave only a minimum (1/4" or so) of the inner layer. This usually produces very good clean-cut") cosmetic results with respect to both the erect and the flaccid penis. It seems

clear that a certain amount of sensitivity is lost, but I myself was circumcised by this technique at age nineteen, and I am entirely happy with the results.

Conservative surgeons still use a technique basically very similar to that used in primitive, i.e. African cultures. The main difference lies in the sterile conditions and the use of an anesthetic (the lack of which is the one thing that makes African tribal circumcisions at the same time fascinating and horrible to watch).

First a line is drawn on the foreskin with a marker of some sort at about the spot where the doctor can feel the edge of the glans through the foreskin. The foreskin is pulled as far forward as it will go and pinched in a clamp along this line, protecting the glans behind it (Fig. 1.1). The portion of the foreskin outside the clamp is then cut off (Fig. 1.2). Then the clamp is removed and the stump of the foreskin, which is now bleeding freely, is pushed back until is rests behind the edge of the glans. The thin, inelastic, inner or mucosa layer is still surrounding the glans at this point. This inner layer is now cut along a vertical line until just before it ends at the edge of the glans (Fig. 1.3).

Now the real circumcision in the sense of "cutting around" takes place: this inner layer has been slit up the middle to make it more convenient to do this. It is now separated from the penis by trimming it off, first on one side and then on the other (Fig. 1.4). As we have mentioned, in this step various surgeons leave varying amounts of the inner layer. Sometimes only a 1/4" or so, but sometimes as much as 1-1/2" or more. The edge of the remaining outer skin is then sutured ("sewn") to the strip of the inner layer that has been left (Fig. 1.5).

Most primitive peoples don't bother with any sort of suturing (although I know of one group in the Sudan that holds the incision together with two thorns pushed through the skin, one on either side of the penis). The usual thing under primitive conditions is to let the two wounded edges grow together any way they want to, which usually results in very irregular, often thick and granular-looking scars.

In the case of a surgical circumcision, though, after a couple of weeks or months the scar is usually not very conspicuous. The remains of the inner layer are usually fairly neat, and where rather more has been left, the skin rests in small folds just behind the glans. Often the outer skin darkens noticeably behind the scar. Fig. 1.6 shows a typical post-operative result.

Another common way of doing a circumcision is to use the so-called "cuffs, "sleeve" or "double circular incision" technique often preferred by many surgeons today. It is particularly often used with adults and usually yields agreeable cosmetic results: the shaft skin is first pulled back somewhat in the direction of the body and marked just in back of the place where the glans can be felt. How much of the skin is pushed back (and thus preserved) depends on the size of the penis, according to one doctor I have interviewed. He said it was important to

him to be able to work in accordance with the difference between the relaxed and the erect penis. For that reason he routinely asked his patients to produce an erection for him in the course of the pre-operative examination.

The next step is to make a long cut around the outside of the penis along the mark which has been made. The entire outer skin between this mark and the tip of the foreskin is thus removed (Fig. 2.1). Then the inner layer is removed as well (Fig. 2.2). The "cuff" that now remains between the two incisions is split along the back of the penis and peeled off, exposing the underlying tissue of the shaft (Figs. 2.3 and 2.4). The bleeding blood vessels are tied off or cauterized, and the two edges pulled together and sutured (Fig. 2.5).

This technique involves quite a little injury, due to the exposure of the underlying shaft. For that reason the patient often has to contend with quite a lot of swelling for a day or two, and may be shocked by the black and blue appearance of his beloved cock when he sees it after the operation.

And now we have to discuss circumcision using the various "helpful" patented devices, for example the technique with the plastic circumcision bell. All doctors agree that these devices should only be used with infants and small children. Beware of anyone who wants to use one on you if you are over ten years old. First the foreskin is pulled back completely behind the glans. Usually this is not possible because of "phimosis", and it is split first with scissors.

(I say "phimosis" in quotes, because virtually every small boy has what you would have to describe as a physiological phimosis. The inner layer is stuck to the glans, and if left in its natural state will become unstuck in the course of maturation. In the very few cases where it does not separate spontaneously, the boy separates it in his first attempts at masturbation, correctly sensing that the small amount of pain he feels is a small price to pay for the pleasure that will ensue.)

But let us return to the plastic bell. Now that the foreskin has been retracted or split, a bell-shaped piece of plastic is now placed over the glans. The foreskin is then pulled forward over it (Fig. 3.1). At the lower edge of the bell there is a ring-shaped ridge (Fig.3.1, a). A thin, strong thread is tied around the foreskin and pulled tightly into the ridge on the ring so that the thread squeezes the skin between itself and the ridge underneath, cutting off the circulation (Fig. 3.2).

The upper part of the bell and the handle which is provided to make it easier to manipulate is broken off. Only the ring itself remains, along with the portion of the foreskin which has been tied off.

After a few minutes this portion, cut off from its blood supply, grows dusky, and is cut off, thus removing both layers at the same place (Fig. 3.3). After about ten days both the ring and the thread fall off spontaneously, usually while the infant is being bathed.

The advantage of the procedure to the surgeon is obvious. This form of operation can be performed quite quickly. One noticeable feature is that it usually leaves a generous amount of skin, and this means that you often see boys as old as ten or eleven who have noticeable collars of skin, often like miniature automobile tires, in back of the crown of their glans. As the penis grows during puberty these collars usually disappear, though, since the excess skin is taken up by the increase in length.

With this technique the two layers of skin remain tightly bound together for ten days or so, and a good feature is that the resulting scar is usually a very inconspicuous fine white line.

I have seen a lot of boys who have had circumcisions with plastic bells, and the appearance during and after puberty depends a lot on how much growth took place. Some of the more interesting results I have seen are as in Fig. 3.4.

Finally there is circumcision with various forms of squeeze clamp. The most common form of these has a metal glans-shaped bell (Fig. 4.1, part a). After the foreskin has been pulled back or split, it is placed over the glans, covering and protecting it. Then the foreskin is pulled out over the glans and stretched out as far as it will go, and is tied off there with a strong thread (Fig. 4.2). Then the rest of the clamp is assembled. Part b in Fig. 4.3 is attached to the handle portion of the bell. At its back end it has a screw arrangement which causes the plate c to exert pressure circularly on the foreskin. Screwing it up tight squeezes the foreskin along a circular line located at (e), cutting off the circulation. After the "superfluous" portion of the foreskin has been without blood supply for a few minutes, the surgeon cuts it off, trimming both layers at the same point, as in the plastic bell technique.

Hospitals often entrust circumcision by the two techniques I have just described to inexperienced young interns and it is entirely possible to remove too much or too little skin. Sometimes the ring goes crooked at some point, resulting in a diagonal scar. I find scars like that kind of interesting, but it is a matter of taste.

Last summer I ran into a kid of fifteen with a scar like that at a nudist beach in France. I had noticed that he was reluctant to expose his penis, and talked to him about it. He had more or less been dragged to the nudist camp by his parents, and only after I had talked to him for a while, and told him how interesting I thought he looked, did he relax. By the end of the week he was running around stark naked with a girl-friend of the same age, and they both looked pretty contented.

These two methods, as I have said, usually leave more of the inner layer than the free-hand technique, and the final appearance of the circumcised penis is often a matter of chance.

Most American kids you see up to the age of 20 or so have been circumcised by one of these methods. Occasionally even these nearly

bloodless techniques leave a boy with a broad and dark scar.

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Chapter 5.

The Boys' Circumcision Clinic

In the first years of this century an American philanthropist created a foundation for the founding and support of a hospital for boys in a large Eastern city. It was specified that only boys up to the age of sixteen were to be accepted as patients. I had been a medic in Vietnam, and when I came home from the Far East I applied for a job at that hospital, because I liked to work with kids.

For two years I worked as a male nurse in the urology department. Among the patients were a group of essentially healthy boys that I particularly enjoyed working with -those who were sent to us to be circumcised.

The children of that city were examined twice annually by school physicians. And a number of the doctors turned out to be circumcision fanatics. Every time they discovered a boy who had not been circumcised they diagnosed "redundant foreskin", "phimosis with inflammation", "threat of balanitis", and the like, and sent the boys to our clinic.

Often the boys were "discovered" when they were between twelve and sixteen years old, when they moved to the city from the surrounding countryside. Usually they had been born somewhere out in the country, often at home, and had thus been spared the scalpel, otherwise practically inevitable in America, up to that point. Very often they were Black and the children of indigent parents.

In the two years I was there we were sent a surprising number of boys for this procedure. Sometimes one of their parents brought them. In pre-operative interviews it often turned out that the father was not circumcised himself, but wanted his sons done so that they would "look like their classmates". One father, on the school doctor's recommendation, brought in four of his sons, between ten and sixteen, and had them all done the same day (I remember he asked for a quantity discount).

Clearly these school doctors were functioning pretty efficiently, because in one year we did 270 circumcisions. The foundation I referred to above paid for the operations from a special fund in cases where the parents couldn't handle the expense themselves.

Often the kids were brought to us with no idea of what was going to be done to them. When they realized that a part of the skin of their dick was going to be cut off, they often panicked. But there was also a good proportion of older kids among them who came without asking their parents first - and asked us to do them on the spot.

The doctor responsible for circumcisions was pretty overworked. This

meant that he usually conducted an examination and interview with the boys, but the next time they saw him was when he appeared in his green O.R. clothes to actually do the operation.

It fell to me to do the preparatory work with the boys, and to make something which they usually dreaded a little more bearable for them.

I guess I was the right person for this job, because - as I have said - I myself had been circumcised as a young adult, not very long before, at age 19, as part of my "military experience".

When the war in Vietnam broke out I dragged out being drafted as long as possible, but shortly after my nineteenth birthday it was either show up for induction or get a visit from the police.

I had had no particular feelings one way or the other about circumcision. My parents had immigrated to America from Holland, and since circumcision is not very widespread in Holland, I had not been done. In the U.S., I grew up in the country, and apart from secretly skinny-dipping once or twice with young kids my age, I had rarely seen anybody in the nude when I entered the military. I don't think I had really noticed whether any of my young friends were circumcised or not, and apart from the rare swimming episodes I myself had never been naked among other people apart from members of my own family during the Saturday night bath.

But it became clear during the induction physical that the question "Circumcision - Yes or No?" was important to the Army doctors I was confronted with. That day 60 or 70 guys in their late teens were standing lined up against a wall on a broilingly hot, humid day in the middle of a New Jersey summer. It was at this moment that I realized, looking around me, that I was the only uncircumcised guy in sight. And the boys around me apparently hadn't seen an uncircumcised cock before, either. They craned their necks and stared at me unashamedly, some of them breaking out of line to get a better look. One of them asked me what was the matter with my dick, I can remember.

The examining doctor appeared and marched along the row. He came to a sudden halt when he saw me, and in front of all the others he said, "Nobody has gotten by me yet with an intact foreskin, and I don't intend for you to be the first!" He painted in vivid colors what it would look like under my foreskin after six weeks in a tropical climate under battle conditions. He then moved on and started to examine the line of young men. When it was my turn to have my genital area examined, he said "Ah, yes, this is the one with the long foreskin. Come over and look at this, George." He grasped the tip of my foreskin with a "mosquito" clamp, pulled it back, and examined the glans with an expression of frank distaste on his face. Then he pulled the skin forward again, sharply enough so that the pain made me draw in my breath sharply, and I almost cried out. He laughed a dirty laugh and told me a had an appointment for a little operation for that afternoon that would "straighten me out" and "make a man of me."

Later on that day I found myself in a room with seven or eight other unfortunate foreskin owners, all of us waiting for our circumcisions. One or two of the guys weren't too clear about what was coming off, as it turned out. They had heard what they were there for, but didn't know what the word "circumcision" meant. I wasn't too clear myself, as a matter of fact. One of the guys, a doctor's son, filled us in, though, and when they realized what was up, two or three of them started to discuss what they could do to get out of it, and consider whether there was some way to escape from the place. But I had seen that there were guards, and the whole compound was surrounded by a high chain-link fence.

The actual operations took place on a kind of assembly line. The guys who were about to be cut stood in a line, the first of them only seven or eight paces away from the table where the guy ahead of him was being cut. You could see everything. A lot of blood flowed, and one or two guys looked as though they were about to pass out.

When it was my turn, the local anesthetic wasn't exactly 100%, particularly toward the end, and in spite of myself I must have caused the guys in back of me some anxiety, because three or four times I cried out "OWW!" in spite of myself, whereupon the doctor snarled at me not to be such a baby. In particular my frenulum didn't get anesthetized very well. It was necessary to cut it, and when they did, I almost hit the ceiling. I must have squirmed too, because the scar is pretty crooked at that spot.

The operative technique went something like this: after what passed for an anesthetic the doctor first made a cut up the middle line of the foreskin up to the edge of the glans. Then he peeled everything back and cut off almost all of the inner layer leaving only a couple of millimeters just behind the crown of the glans (I now know that I probably would be happier if he had left a little more.) The he severed the outer skin with a long, circular cut, which at least was well placed. I started to bleed pretty badly. He sewed up the bleeding vessels, sewed the seam between the two wound edges with eight or ten stitches, and provided me with a bandage covered with Vaseline.

I limped out of the place (kind of broad-legged) and waited for the anesthetic to wear off completely. I didn't have to wait very long, as it turned out, and I have to confess that the rest of that day and the night that followed were not particularly pleasant. The second day I had even more pain and swelling, but some time during the third day I decided that I was probably going to live after all. At least I didn't bleed after the operation like some of the others.

The main problem was one I have since become familiar with: post-operative erections. They went on for a week and got increasing harder - and harder to take. But by the end of the week at least I didn't hurt as much. Finally I snuck into the john and very, very carefully started to tickle the underside of my cock-head. Within seconds I was twisting and groaning as a giant load of jissom shot out of me, hit the metal wall of the can and dripped down it.

Some of the other guys were really well hung. One had a cock like a regular pony. The rest of the others were variously endowed. There was lots of variation, and I found myself very interested in the different cock sizes and shapes that I saw there. As it turned out, there was no relation between the size of the guys' dicks and the amount of pain they experienced. Some of the guys with the most modest little puds were the ones that complained the most. A couple of the boys with the big, pendulous, thick ones were showing them hard already on the second day after their operation. I think I know why, now: doctors who are inexperienced in circumcising adults often take too much skin off a small cock, which leads to painful pulling on the suture line when the cock get stiff.

After a couple of days we were told we could take a shower. There were almost enough showers for all the guys in the ward at once, so we all got a good look at each other on that morning.

The young doctor who had done us had most probably not been with the Army very long. There were rumors that he was a gynecologist, which means that up to then he had probably only done infants. The results he had gotten with some of the guys were pretty crooked - but as I have said, that only made them more interesting.

I guess my interest in the human cock and in circumcision dates from that experience.

After ten days we were all sent to Vietnam. I managed to draw fairly peaceful duty in a hospital well behind the lines and didn't have much to do with circumcision until I was mustered out. But while I was there I heard about a doctor who reportedly circumcised all the prisoners he could get his hands on in his area. They said he hated Asians and did them without any anesthesia.

But let's get back to the clinic.

Fortunately the doctors of our division regarded me as competent and trustworthy, and there was quite a lot I had to do.

Sometimes there were five or six boys to be circumcised on a particular day. The doctor on duty and I first had them strip down to their undershorts and we did a general physical exam. The doctor looked into their ears and their mouths, listened to their chests and hearts, took their temperatures, pulse, blood pressure, etc. Then came the moment when they had to drop their shorts, and he did a thorough examination of their genitals, first by eye, and then manually. He felt the size and shape of their testicles and felt the shaft of the penis to detect any lumps or irregularities, then, grasping the foreskin behind the head, pulled the shaft out to maximum length. Even though he did this fairly carefully, of course most of the boys got an erection - and that was part of the plan. That way he was able to form a clear picture of the size of the organ when erect.

Then the boys had to give us a urine sample. We had them pee into a jar standing in front of us to check the size and amount of the stream. Of course all this had to be done with a certain amount of psychology. I usually assumed the role of the "older brother", and it usually worked pretty well. (If I built up a relation of trust with the boys it was even often possible to get them to go into the adjoining john later and give us a nice fresh sample of semen as well.)

At that point we let the boys get dressed again, and the doctor left to do paper work and get ready for the rest of the day's work.

I explained the operation to the group of boys at that point and did what I could to prepare them for it psychologically. In my "big brother" role I could tell them things in an idiom that they could understand. I talked with them a lot about the operation, if there was time, and they usually were a lot calmer by the time I was through than when we had started. I showed them some of our best "before" and "after" pictures and told them how pretty their dicks would look after the operation had healed up, I told them that from now on they would look like all the other boys in their class, something which is important to kids in their teens. The one thing they were not to find out was that there was no way I was going to let them get out of having the operation. Our division of the clinic was pretty dependent financially on the fees.

When the operation was to take place immediately, which was usually the case, I had the boys get undressed again at this point and had them get into the typical hospital garment called a "Johnny", the kind that has ties up the back. Then I decided who was going to be first and took him in to "prep" him, i.e. get him ready for the operation.

The boy in question now had to get up on the operating table and assume a position where his penis was about where the doctor's eye level would be when he was seated, and spread his legs. Then I carefully washed the whole area of the penis and the scrotum, pulled the foreskin back and washed the head and the skin underneath. Then, if there was already any amount of pubic hair, I shaved it off and painted the whole area with disinfectant. Finally I draped everything with sterile towels, one of which had a circular opening large enough to expose the penis.

Then it was time to call in the doctor. If I was pretty sure the boys were mature enough so they wouldn't make a fuss, we went right ahead and gave them a local anesthetic at this point, an injection at either side of the base of the penis - and one in the frenulum, the nerves of which run deeper, and don't always get reached by the injections as the base.

With most of the kids that was all that was necessary, but sometimes a kid would start to panic when he saw the needle or felt it going in, and sometimes we had to call in a couple of orderlies to hold him down.

Sometimes a boy would scream bloody murder, and we ended up doing the operation under a general anesthetic. The doctors preferred a local, though, because it was less dangerous.

By now I had brought the doctor the pack of sterile instruments from the

autoclave. When he unwrapped it the boys could see various clamps, scalpels, two pair of scissors, needles and suture material, and various other stuff. Almost all of them looked scared at this point and had to be reassured. The younger ones sometimes started to cry, and even the older ones usually had to be comforted. But I pointed out that apart from a few pin-pricks they wouldn't feel anything, and as soon as the penis was anesthetized, I could demonstrate to them that they couldn't feel anything. At any rate we made sure that the parents, if they were along, were waiting in another section of the hospital, where they wouldn't hear anything.

The boys didn't see much from here on in, because by now we had them lying down.

In rare cases one of the boys would have a real phimosis, and in that case we first had to pass a sound in under the foreskin to break up the adhesions, or if that was impossible, slit it up the front with scissors. Our doctors preferred the "cuff" technique. Under the strong light over the operating table the doctor pulled the foreskin back all the way and used a blue marker to make a line on the inner skin layer about 1H2" behind the edge of the glans, and almost vertically, although the skin at that point has diagonal folds down to the frenulum. Then he pulled the foreskin forward again and made another mark, this time on the outer skin, considerably farther back on the shaft.

If we were sure that the anesthetic had worked, he then quickly but carefully made a circular incision into the outer skin and took care of the bleeders. Then he pulled the partially severed foreskin back again and cut along the other mark on the inner layer. Then he opened the "cuff" formed by the two incisions along the back of the penis and carefully removed it from the shaft.

Then he pulled the two edges together and sewed them together with a kind of catgut that is slowly absorbed by the body, on the theory that that produces a better scar, and the newly circumcised boy got a bandage treated with vaseline wrapped around his penis.

All of this usually took less than half an hour. The first boy to be operated on spent the next hour in an adjoining room (soon to be joined by number two, and so on) until the anesthetic wore off and we could be sure that he had not started to hemorrhage.

There was a stack of comic books in the recovery room. It was not hard to tell when the anesthetic had worn off: after a while the boy put down his comic and got a sort of strange, concentrated expression on his face - as though he was "listening" to his penis. Then his hands wandered automatically to his crotch, where the bandage was. Not long after this he usually started to complain that he was having pain.

If everything seemed to be OK, we sent them home after a couple of hours with a prescription for a graduated series of pain killers and gave them a number to call if they felt they were in trouble. Often simple buffered aspirin was enough during the daylight hours, but for the first

couple of nights we had to give them something more effective. Particularly the older kids, the ones well into puberty, often reported having a lot of pain, and the most effective thing turned out to be putting an ice-bag on their wounded dick. Particularly with these older ones that also helped reduce the frequency of infection, at least at first. We also told them to watch TV and otherwise try to do things that would keep their minds off their cocks.

After the third day we told them they could take a warm bath twice a day, among other things to soften the tissue and the stitches so as to produce a better scar.

The erections were a problem we never found a good solution to. When boys really had a lot of pain after circumcision, it was usually the fourteen to sixteen-year-olds, who develop powerful erections.

The sexual development of boys of this age is in full swing, and they are accustomed to masturbating at least once a day. But after a circumcision the penis is almost too sore to touch for the first few days - except perhaps for the purpose of peeing. And so it was natural that they got repeated hard and full erections, particularly at night, when the strong signals from their genital area caused their dreams to have a lot of sexual content. No medicine we ever found influenced this in the slightest. (Saltpeter, of prep school commons fame, is of course a myth.)

I also often did the various follow-up exams. We had the boys come back on the third day, when most of the swelling had gone down, and again on the tenth day. By the tenth day the establishment of scar tissue was well along. The first thing most of the boys did, as soon as they were comfortable enough, was to masturbate - very, very gently, of course. One big, handsome boy of fifteen, whose long, wedge-shaped cock I had admired both pre- and post-operatively, told me he had in desperation beat off on the third postoperative day already. Fortunately he hadn't done anything bad to the suture line in the attempt.

After the tenth day the boys' discomfort had usually pretty much disappeared, and had often been replaced by itching. On these follow-up exams I checked them over carefully visually and by hand to see if by any chance too much scar tissue had developed (sometimes this had to be corrected) or if there were any other irregularities. But our doctors had such a good technique that this was almost never the case. I don't know any place in the U.S. that had more experience circumcising this age group than we did.

We checked them out again after a month. (I usually managed to get the really handsome ones, or the ones with particularly interesting penises to come back again a few more times.)

It surprised me at first that on these follow-ups almost none of the boys were backward about producing an erection for me to admire - as long as there were only the two of us in the room. That was the best way for me to check whether the amount of skin left had been correct - the

penis is so variable in appearance that you can't really determine this very well if the penis is relaxed.

If the boys were well enough along in their development to make it make sense, at the one-month follow-up I asked them a number of questions. I asked if they had developed any particular difficulties (the answer was invariably No).

I then asked if their "new" penis was functioning properly, i.e. as well as it had before. I never had to explain what I meant, either. A surprising number of boys were prepared to jack off for me on the spot. The semen they contributed was not thrown away, but was used for scientific purposes, by the way. Up to that point very little was known about the development of semen and seminal fluid during puberty.)

I also asked the boys if they preferred the way their penis looked after circumcision, and except for around 3% they were. They usually reported being relieved that they now looked like their comrades. They no longer felt embarrassed to shower with the others.

A lot of them said things like "I think it looks great now. Even when I haven't got a hard-on it looks a little bit like I do." One of the reasons for the follow-up exams was in connection with a long-term anthropometric project the hospital had running. We had the boys undress on these occasions and took standardized photographs of them naked against the background of a wall with a normed grid of lines on it. That way, comparing the photos of the kids at various ages, we could make a record of their development. We also took close-ups of their genitals before, and at various intervals after the operation. Unfortunately I was not able to borrow negatives from the archive long enough to copy them, which is too bad. It was a remarkable collection of over three thousand boys in various stages of puberty! There were kids of every description, ranging from little ones with dicks hardly larger than buttons to big muscular fellows, often with large, competent-looking penises with lots of veins visible, indicating that they were already in daily use. And every imaginable variation in between.

-----Chanter 6

Chapter 6. Aki - the Black Boy

Among the many circumcisions we did at the Youth Hospital there were a number of really unusual cases. One of them was the unforgettable Aki, a beautiful big chocolate-colored Black boy who showed up one day with three friends just as dark as himself - and asked to be circumcised. In fact he insisted on it. His friends, he explained, had come along to provide moral support.

He said if we didn't do him here in the hospital he would have one of his friends take care of it - in somebody's garage with a jack knife, if necessary. (A couple of months later we got just such a case to repair.) After a long conversation the doctor he said he would consider it, at least, and we sent Aki home with the standard release form (parent's or guardian's permission to treat) for a signature.

A half hour later he was back again with some kind of signature on the bottom of the form. We gave him the usual physical exam and determined that he had no fever or other counterindications .

When he took off his jeans I could see even through the material of his undershorts that he was pretty well hung. Then he took them off too, and stood naked and proud in front of me, his hands on his hips: his expression, in fact the whole attitude of his body expressed pride - and challenge.

He was a wonderfully well-built, muscular fellow five foot ten inches tall with an unforgettable face: in spite of the aggressive and challenging expression he had assumed for the occasion there was something sweet and almost affecting about him. Unlike his body, his face still had something boyish about it. In particular his dark, shining eyes got to me. His sex organs, as I had already noticed, were well developed (in fact I had initially estimated his age at seventeen). He had broad shoulders, narrow hips, long arms and legs, a flat belly and a behind with round, firm cheeks.

He looked in general probably much as his East African ancestors had looked, who I suspect originally came from the region of the Upper Nile: the long bones of his arms and legs were longed than you usually see on white kids, and he was quite thin, so that the muscles on his body looked a little exaggerated, almost sculpted. He wore an Afro hairdo made of lots of little braids. (At the time Black consciousness was something new in America. Aki was one of the first and best arguments for the idea that "Black is Beautiful".) He had very little pubic hair, just a couple of dozen small, tight curls, but a distinctly long penis, like many Blacks descended from people of the region Nile Valley. I estimated it at almost seven inches nonerect. The impression of length was underscored by the presence (it a long, pointed foreskin shaped like the end of an elephant's trunk (a kind that you also often see on men of noncircumcising Upper Nile tribes like the Nuba).

Upon examination the foreskin proved to be loose, stretchable, and easily retractable - it had obviously been in use for a few years. When I saw how easily it could be slipped back I told him that I could think of no medical reason whatsoever why he should want to have it removed.

But there he stood stark naked in front of me, insisting on being circumcised on the spot. In the strong light from the window I could see every detail of his athletic young body. His hands were on his hips and his pelvis was thrust forward. As he shifted his weight from one leg to the other, his long, sumptuous dick swung heavily back and forth. He said, "Man, we're gonna do this. Either you or somebody else. I wanna join the Black Moslems, and they ain't gonna let me in until I been cut." That made sense, because I knew that he was talking about an

Islamic sect. I explained all this to the doctor on the phone and he finally said OK.

When I started to explain to Aki that we were going to do it under a local anesthesia, he said "No way, man!" He and his friends looked on a circumcision as a kind of test of courage. He had read something about Africa and knew that was how it works there. His friends, who had been watching me examine him silently but with frank interest, nodded in agreement.

So I asked him to put his shorts on again, sat him down, and explained to the four Black teenagers how a circumcision works, and that without an anesthetic it would be really painful. Aki said he could take it. Then we talked about a few important details such as how much of the foreskin should be removed. I drew a few sketches and showed the boys some photos from our files. But Aki got impatient as I talked. He suddenly turned to his friends and said "Hey, take off your pants and show the doctor what I want!" While I tried to explain that I wasn't a doctor, they stripped, and before I could finish, their pants and undershorts were down around their ankles, and three cocks of different shapes, but all size "L", were hanging there for my inspection. All three guys were unmistakably circumcised. It looked as though whoever had done them had used a simpler method than anything I was familiar with. Apparently somebody had simply pulled their foreskins forward and trimmed them off as close as possible. Two of the guys had really irregular scars as a result, but the reason was clear: if you don't use an anesthetic of any kind you have to have a technique that is fast and not very refined. There could be no question of spending ten minutes cutting around in living, sensitive flesh with a scalpel and scissors.

The surgeon was shocked, of course, when he found out what Aki wanted. He asked for time to think about it, and I sat the boys in the waiting room while he did some other procedures and thought about how he was going to proceed. I explained to Aki that it was going to have to be fast, but that the few minutes that the operation would take would probably be the longest minutes of his life to date. And that we couldn't guarantee very much in the way of a cosmetic result.

In the case of two of the friends the operation could indeed have been done in somebody's garage. In both cases too much of the outer skin layer had been left: irregular scraps of skin hung down behind the edge of the crown in various places. But almost all of the inner layer had been sacrificed. I asked them why they hadn't come to us in the first place, but at that they frowned and lapsed into surly silence.

It was also evident that one of the friends had suffered the operation not too long ago: the scar was wide and still very fresh, and head was still bright pink, like the palms of his hands and the soles of his feet. It would probably darken in time. But the boy wouldn't tell me when or where he had been operated on.

When the doctor had arrived and scrubbed, he asked Aki if he really was prepared to have this done without any kind of anesthesia, and when the

boy said yes, he added a note to this effect on the permission form. Aki announced he wanted to go through it standing up.

He planted himself in front of the doctor (who seemed a little unsure of himself in this situation). Aki then asked one of his friends to hold his hands behind his back, in case he should involuntarily struggle or try to get his hands in the way. The other two guys knelt down and held his ankles. They seemed to have a certain routine: I had the feeling they had done this before. Aki refused to put on a hospital johnny or allow us to use sterile drapes. He wouldn't let me shave his pubic hair, either. But he did admit that it would be a good idea to swab the area down with disinfectant. But before we did this, I set to washing the operation area with green soap. When I gently pulled his ample foreskin back and started to wash the head, he got totally stiff. His cock pointed upward at an acute angle and almost instantly expanded to almost nine inches.

I explained that it would be a good idea if he didn't have an erection for as long as possible after the operation, because it would pull at the incision. It didn't take him long to figure out what I meant: in spite of the fact that there were five other people in the room, he thrust his hips forward and spat, squarely hitting the glans. Then he reached down and pulled his generous, fleshy and entirely healthy foreskin forward and back a few times. His face entirely impassive, his eyes focussed on the middle distance, within ten or fifteen seconds he started to ejaculate, firing ten or a dozen shots of thick, grey jissom into a towel which I hastily grabbed and held in front of him.

Afterward I washed him again, painted his penis and scrotum with disinfectant - and we were ready for the action. The doctor, using a marking pen, drew a circular line around Aki's penis marking the place where he wanted the cut to be. He then looked up and studied Aki's face for a moment. There was no sign of anxiety. He asked again if this was really how he wanted it, and the boy nodded yes. And there he stood, his legs apart, with his friends holding his hands and his ankles. By now his color was not so good: he looked more bluish-grey than brown, and there were beads of sweat on his forehead. His muscular young legs were trembling slightly, but his face was completely expressionless.

The doctor pulled the foreskin forward as far as it would go and put a clamp on it, just behind the mark. Even this little procedure must have been pretty painful, but Aki didn't budge or change his expression. Then, picking up a scalpel, the doctor took a deep breath and deftly made a long, circular cut, removing everything outside the clamp. Aki's eyes widened, his mouth opened, and he drew in his breath with a sharp, hissing sound. I was afraid he was going to cry out. But no sound escaped his lips. As soon as the clamp was removed he began to bleed copiously. Streams of scarlet started to run down the glans and drip onto his dark brown thighs. But we could see that it had been a neat cut, resulting in a clean, oval wound. The doctor then gently peeled the inner, mucosal layer back, and remarked that it really should be trimmed back some. But he couldn't bring himself to do it: this way the scar was going to end up pretty far back on the shaft, farther back than he would

like. I wondered what the final result would look like.

Aki sat down, and the doctor started to tie off the bleeders. He pulled the two skin layers together and started to put in skin sutures. Finally he put vaseline on a bandage and carefully wrapped it around the wounded cock. While all this was going on, Aki talked quietly with his friends and acted as though he couldn't feel a thing. But he was still pretty grey, and his hands shook as he smoked the cigarette one of his friends gave him. It was clear to me that he must be feeling everything, particularly when the needle was being stuck through the edge of his foreskin and the threads pulled up tight. I thought the suturing was never going to end, but when it was all over I looked at my watch and saw that the whole procedure had taken less than ten minutes.

We kept him with his friends in the recovery room for another two hours, but since he wasn't bleeding any more, we let him go home. I told him to go to bed and put an ice-bag on his cock. He was to call us immediately if he started to bleed again, and was to show up the next day to have us check him. In my mind's eye I still see him going down the corridor with his friends on the way out, laughing, joking, to all appearances "full of piss and vinegar". But he was walking slowly, a little awkwardly, and distinctly bow-legged.

He didn't come back the next day though. In fact he didn't come back until four days later. He was alone, and I didn't like the way he looked. His skin was still pretty bluish-grey in color, and when I took his temperature he had a fever of just over 100. He confessed that he was having a lot of pain. When he took off his pants I saw that his cock was swollen and sore-looking, dusky in color, and with the veins standing out.

When I started to change his dressing I saw that there was fresh blood in it. Three of the stitches had ripped out and the wound had become infected.

I asked him what had happened. How was this possible? "Well," he said, "the second day I felt so good that I went out and played baseball for a while. But pretty soon my cock started to hurt more, and when I got home I saw I had bled a little." The third day, when he saw that the wound was infected, he decided he had better come in after all.

The doctor shook his head and mumbled dark things to himself as he sewed the damaged incision up again. We gave Aki a shot of penicillin. The incision was now jagged at the three places where the stitches had ripped out. In general Aki's cock, with the broad band of mucosal layer which had been left, was quite a bit more decorative than our usual job. Aki confessed at one point that he had scratched the scab off a couple of times "to make the scar look thicker and tougher." The effect he was trying to get, apparently, was to make it look more like the result of an African bush-style circumcision. "Well," I said, "if that's what you wanted you should have asked us not to use stitches."

<sup>&</sup>quot;I didn't think of that," Aki said.

When he came back the day after, it was clear that he was going to get better. The fever and swelling were down. I asked him to come back again in a month, and was surprised when he really did show up.

He was more cheerful now. He gave me a grin and a firm handshake. When we were alone in my office I asked him how his cock was doing. "Great," he said. "Let me show you, Doc." (I still hadn't been able to convince him that I wasn't a doctor). While I went over to lock the door of the room, he stood up. When I turned around, he was out of his shorts and bending over to take off his sneakers. From behind I saw his firm, round, brown buttocks, his well-developed scrotum dangling between them. As he turned, grinning, his thick, heavy cock swung into view, erect - and very circumcised-looking.

When he sat down on the examining table he apologized in advance: this probably wouldn't go as fast as the last time: he had had to learn to modify his masturbation technique. Without a foreskin it was somehow different. And the whole business was still pretty sensitive, he added.

He closed his eyes and started to rub his cock. Even with a full erection, the edge of the foreskin overlapped the edge of the glans when he pulled it forward, I noted. Soon a drop of precum emerged at the tip. Then he made a ring with his thumb and his forefinger and began to work farther back, where the broad and still-pink scar was.

Soon he was energetically working the whole length of the shaft. In half a minute he started to thrust with his hips and contract his buttocks, and soon he started pumping it out, grunting softly with pleasure as each gout of semen surged up through his trembling cock and shot out of the slit. This time I was forewarned, and held out a jar. I collected about three tablespoonfuls of warm, thick, boy jissom.

He opened his eyes and grinned at me. "How was that? Pretty good, huh?" I had to agree.

When his erection had gone down I could get a better idea of what the final result of his circumcision was going to be. It wasn't going to be bad, I decided, if you were willing to accept a little more scar tissue than you would expect on the "boy next door".

The final photo we tools of Aki, fourteen weeks after his circumcision, shows a handsome Black boy with a larger-than average, half-erect cock. The back of the shaft is almost straight, but on the underside there is a delightful curve, and the glans has a kind of "pushed-up nose" effect. It and the broad band of tissue behind it are still bright pink. Together with the dark brown of the shaft skin, the total effect is pretty dramatic.

I had been afraid that the remains of the inner layer might hang down over the edge of the glans, but on the photo they are lying in neat folds just behind the crown, like a sort of collar.

Studying the photo, I wondered if it might in general be a good idea to leave as much of this layer as possible; in fact Aki took pains to tell me how wonderfully sensitive this inner skin layer is. He was glad the doctor had not trimmed it off.

I told him it could take a couple of years for the skin of the head to get as dark as the shaft skin, and that in time the scar would probably darken, too, so it wouldn't be too obvious. "Shit, man," he said, "that don't matter to me. Nobody ain't gonna see it but me and my friends and my woman!"

And off he went. In the years to come he probably sired a dozen or so boys with big, beautiful cocks just like his own. His last words to medelivered with a big, toothy and engaging grin - were "Hey thanks, Doc. You were really OK. But I'm gonna tell you one thing, just between you and me. If I have any kids, any boys, I gonna have 'em cut right after they born. Gettin' cut as a teenager is no picnic. I thought I was gonna pass out when the doctor cut into me!"

Aki was the first in a long series of Black kids that came to us over the next couple of years asking to be circumcised. It was clear that he had recommended us. But he was the only kid in my experience who ever wanted to go through it without an anesthetic.

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Chapter 7.

Tom - the Italian

A somewhat more usual case was that of Tom (with whom I subsequently became good friends).

One day, when my boss, Dr. N., was away on a trip, the receptionist said that there was a boy sitting in the waiting room who insisted on speaking with somebody from the urology department. I said I would see him. When I came into the consultation room, I sat down at the desk and took a good look at the kid. He was a young fellow of about fourteen, with olive skin and dark eyes, the physical type you often see in Mediterranean countries, and a fine specimen. He had nice, regular features, apart from the fact that his nose was perhaps a little too long. He had lots of dark, curly hair, and particularly beautiful eyes. They were dark brown, clear, deep - and at the moment very troubled. The dark, troubled eyes searched my face, obviously looking for some sign that I was trustworthy.

He introduced himself as Tom Rossi, and I asked, "What seems to be the trouble, Tom?"

"Well, Sir,... you see,..." he stuttered, "I think there's something wrong with my dick... I mean, my penis."

"Is it that it doesn't function in some way?" I continued.

"Yes, I guess you could put it that way," he said. "You see, at sports, when I'm in the shower... the other guys make fun of me, of my, uh... penis."

"OK," I said, "we can have a look and see if there's anything wrong with it. But it works perfectly OK, doesn't it?"

"Well, yes, but... last weekend I went on a picnic with a friend of mine, down at the river, you know. It was a really hot day, and after a while we decided to go swimming. But we had forgotten to take any swimming trunks along. But George, that's my friend, he's in the class ahead of me at school, said it didn't make any difference. It's a pretty isolated place and there was nobody around. We swam around for a while, and when we were done I went over to a bush to pee,... I mean urinate George was standing next to me urinating, too, and he looked over and said 'Say, is everything OK with your dick? Your foreskin sort of balloons out when you pee. I don't know anyone else where it does that.' To make a long story short, we compared our... our penises. George is 'circumcised', and I'm not. I had never heard the word before, I learned it from him His father is a doctor, and he knows a little about this kind of thing. I told him that the tip part sometimes hurts, the pointed part at the front. It gets inflamed a lot, I told him, and he said he thought my foreskin was too tight, and that I should let a doctor have a look at it."

After Tom had told me that, we went to the examining room. When he had taken off his jacket and shirt I saw that he was a well-built, well-developed and well-nourished kid with a nice suntan, obviously someone who took good care of his body and did sports regularly. While he was taking off the rest of his clothes, he explained that his parents had come to America from Italy when he was two years old. That was the reason he had never been circumcised as a child. Our conversation must have been a little stimulating to him, because while he was getting out of his shirt, I could see through the material of his white pants that his dick was half erect. He took the pants off. His cock and balls were well proportioned, just like the rest of his body, actually. His dick had just nice, normal dimensions (I later came to describe it as of "comfortable" size.) And his balls were also of standard size. Standing next to him, I became aware of a strong, clean boy-smell.

He was pretty well along in his development, about what you would expect at his age (he had mentioned in the meantime that he was fifteen). Two small, thick bushes of curly hair growing at either side of the base of his penis were fighting to meet over the middle.

I asked him to step into the sunlight that was streaming though the window, and looked at his "apparatus" more closely. Friend George had been right. Tom had a full-blown phimosis. The hole at the tip of his foreskin was hardly bigger than a pencil lead. When I tried to draw the skin back, he grimaced and involuntarily drew his hips back. It was clear that the maneuver had hurt. When I felt for the glans through the skin, using quite a little pressure, he drew in his breath through his

teeth and said, "Ow!! That really hurts!" Obviously he was pretty sensitive underneath. His foreskin seemed to be stuck to the glans at various places, too.

"Well, Tom, my boy," I said, "you seem to have a real problem there, all right. We call it 'phimosis'. Your foreskin is just too narrow and tight, and since you can't pull it back, you can't clean under it. And now that you' re almost grown up, you are producing substances under there that really should be cleaned out every day. Besides, the way your penis is now, you can't have sex with girls, at least not with any enjoyment. I bet you even have trouble beating off."

"Yes, Sir," he said, blushing, "that's true. Is there something that can be done?"

"Sure there is. If you can make an appointment for next week, we can fix you up in a hour or so, so that all these problems will be solved. And afterward your penis will look just like your friend George's."

That surprised him. "You mean you can remove the skin even when... when a guy isn't a baby any more?"

"Sure!" I said. "We do the procedure hundreds of times a year. Sometimes on guys who are even older than you."

When he was dressed again, I explained to him how a circumcision works (or at least how it would work in his case) and showed him our photo album. As soon as he saw the first "before" and "after" shots he was completely absorbed, and I could see from the bulge in his white pants that he had developed an erection again.

I asked him when he could take three days off from school, and explained that he would have to bring a signed release from his parents allowing us to treat him and do minor surgery. He said that if I gave him a doctor's letter he could miss school Thursday and Friday. He didn't have school on Saturday or Sunday, so that would give us four days, and we could do the op. on Thursday morning. I ordered the small O.R. for that day, and on Thursday morning at eight when I walked in, there he was sitting in the waiting room. Beside his chair was his sports bag with a change of clothes. His warm, brown eyes seemed a little apprehensive.

Dr. N. spoke with him briefly and asked me to get him ready for an examination. I had him get out of everything but his shorts, and after a while Dr. N. came back and checked him, taking his pulse and blood pressure, listening to his lungs, and so forth. There didn't seem to be any counterindications. The doctor then had him drop his shorts and looked briefly at his phimosis. "Yeah, that's the real thing, all right." he said, "Get him prepped and we can do him right away." Tom swallowed hard and turned a little pale as he pulled the shorts back on.

He had to pull them down again right away, though, at least the front part, to give me a urine sample. When he did, I got a chance to observe the ballooning out that had struck his friend George. I had never seen

that before except in tiny children. And he got stiff again. I talked to him about nothing in particular to distract his attention, and soon the erection went down. Then I had him take the shorts off again, stood him up against the wall of the examining room, which had a grid of ten by ten centimeter lines marked on it, took his picture, and recorded his measurements. I decided not to ask him for a semen sample; he had explained about his masturbatory difficulties on his previous visit. I would have guessed at something like that anyway: I can't remember when I have ever seen a kid who was so excitable sexually; you only had to mention a word like "penis" to make him get a full erection.

The reason was probably that he was well overdue for an orgasm. I knew that this would probably lead to a lot of postoperative discomfort, but there was nothing that occurred to me could be done.

I examined his genitals carefully by hand, a procedure which seemed to be both embarrassing and uncomfortable for him, but I talked about all sorts of different things, the news, sports, and soon he didn't seem so embarrassed. I compared his testicles with the "rosary" of various-sized wooden ovoids representing various volumes, and noted that - like his penis they had not yet reached their final size.

Finally I put a hospital johnny on him, the kind of nightshirt that has ties up the back, had him sit down on the operating table, and washed everything carefully. Then I shaved off the two modest bushes of short, curly, black hair at the base of his dick and painted the whole area with disinfectant. Then I put a couple of pillows under his head, and one under the small of his back to make him a little more comfortable.

By then the doctor was back, and he gave him a couple of shots of a local anesthetic at either side of the root of the penis. He told him that in the course of the operation he could have another shot if he started to feel any pain. Below the hem of the johnny I could see that his right knee was trembling.

Assuming that the anesthetic had taken, the doctor took a metal sound and carefully began to loosen the adhesions under the foreskin. As the sound went in, Tom made a face, and his clear eyes grew murky with fright. Then, as the sound reached the frenulum, he suddenly grimaced and said "Ow!".

"Hm," said Dr. N. "That's not quite enough anesthetic, is it? We'll put in a little more and wait a few minutes, OK?"

Soon everything was all right, except for one adhesion under the frenulum that resisted all attempts at freeing it. The doctor gave him another shot in the frenulum, which made him draw in his breath again, but then it was clear that everything was pretty dead. The remaining adhesion was soon dispensed with, and the doctor drew two lines with a marking pen - one ring-shaped one just behind where the crown of the glans was, and a vertical one down the front of the foreskin.

While I talked to Tom about the current baseball league standings, I set

up a sort of low screen between his face and the area being operated on. Now, on the other side of the screen, the doctor pulled the foreskin forward with a clamp and introduced one point of a small pair of scissors into the small hole at the tip, cut up along the vertical mark for a half inch or so, and then, putting in the whole blade of the scissors, split the skin right up to the circular mark. Blood spurted, but Tom didn't see or feel anything. Then the doctor cut along the circular line with a scalpel, and soon had the outer skin layer removed. Then he pushed the remaining inner skin layer back behind the glans and trimmed it off so that only about a half inch remained.

"We know this boy is still growing," he commented as he worked. "He's probably going to develop a pretty good-sized organ, so I want to be careful not to take too much of the shaft skin. The inner layer here unfortunately has been pretty well destroyed by some infection, so I can't leave as much as I really would like to."

Now everything was just about over. Dr. N. sutured the wound with catgut, and then turned Tom's penis to the right and the left, checking it. Then, while I removed the screen, he looked up at Tom and smiled, stroked the inside of his thigh, and said "You're a nice kid, Tom, and nice-looking, too. I think you're going to be happy with what we've done."

Now Tom was able to get a good look at his maltreated penis. The wound was still oozing a little blood, and stitches stuck out in all directions. He didn't seem very convinced, but he said politely, Thanks very much, Doctor!"

I later found out that Tom had chosen this particular day for his operation because he knew that his parents were going to be away on a trip. I didn't think it was a good idea to send him home to an empty house. He didn't want to stay in the hospital, nor did he want to go spend the night with his elderly aunt (who had signed the release, as it turned out). Without deliberating very long about it, I asked him if he wanted to spend the next couple of days at my place. I could keep an eye on him and take care of him if they should be any post-operative problems. He seemed relieved at my offer, and accepted my invitation with gratitude.

With the characteristic stiff and bow-legged gait of the recently circumcised, he walked out with me to the hospital parking lot. In the car he chattered animatedly about his parents, his school and his friends. But about ten minutes after we arrived at my apartment, a couple of miles from the hospital, he suddenly became still. I knew the reason: the anesthetic was starting to wear off. I sat him down on a sofa in the living room and went to get him something to drink. When he had drunk it, he asked if he could lie down. And while he got his clothes off (taking the pants off very, very carefully) I put fresh sheets on my bed and set up a collapsible camp bed in the same room for myself. He was still wearing his Jockey shorts, but under them it was clear that his injured cock was pretty stiff. I asked him to get out of them. It was summer anyhow and pretty warm. When I asked him how he was

doing, he answered hesitantly, but said he was doing OK. I gave him an aspirin and turned on the TV for him, and then went out do so some shopping.

When I came back two hours later I could see that he wasn't concentrating on the TV program; he was lying on the bed with both hands on his crotch, staring at the ceiling. His eyes, the striking thing about which had been their clarity, were now foggy, and as I bent over him I saw that his eyelashes were wet. He looked up at me, and suddenly two large tears welled up in his eyes and ran down his cheeks.

Jesus. This hurts like a sonofabitch," he said. It occurred to me that he was probably feeling not only the effect of the cutting, but of the separation of the adhesions as well. There must be sore places all over the glans. So I gave him a couple of analgesic pills and got him an ice-bag to put on his injured parts. Then I sat with him and talked to him. After a little while he was smiling again, and after a little while longer I even got him to laugh a couple of times. A couple of hours later he was ready for another pain pill again, and after he had taken it he dropped off to sleep.

I stood beside his bed and looked down at his handsome, naked body, relaxed in sleep, with something like love. His poor cock was detumescent now, its end wrapped in gauze.

He was awake most of the night complaining of pain, so I myself was only able to doze. About three in the morning I woke up and heard him groaning softly, and when I turned on the light I saw that he had gone and fetched himself fresh ice. His cock was standing up straight as a steeple, and he had his hands wrapped around it protectively. I could tell that the erection was pulling at the incision. It had probably started to bleed. He had tears in his eyes again: he should have had his next pill at two, and being asleep, I had missed it. And he had been too polite to wake me up.

"That," I said, "is some erection" after he had taken his pill and washed it down with a bourbon and soda which I brought him. "That's the last thing you can use for the next couple of days."

"I know. It pulls like hell."

"When did you beat off the last time, anyway?"

He blushed. "Well, its been anyway two weeks.... With this phimo... whatever you called it, it always hurt, you know." Now he was warming up to the subject, less embarrassed. "I don't usually beat off much. I usually wait till I get a wet dream. But I haven't had one for quite a while now. Except the one... well, the dream I was just having was really something, I think I would have come if I hadn't woken up with the pain."

"Maybe there's something we can do about it," I said. "We're going to have to do something about it, in fact, but we're going to have to wait

for a couple of days. I'm afraid you're just going to have to stick it out (if you'll pardon the expression) until Tuesday - and keep socking the ice to it. That's the best thing."

"The trouble is," he interrupted me, "if the skin of your cock's been cut, it really hurts like hell, and it makes you think about your cock, and sex and everything all the time. I don't think the erection I got is ever going to go down."

"I know all about it. I was circumcised myself at age nineteen."

"Yeah?!" He was suddenly all ears. "Could you, some time, uh... show me...?"

"Sure. I can show it to you. No problem. But... I think we better wait a couple of days, OK?"

I changed his dressing regularly that first day. His insulted organ was swollen and angry-looking, and it oozed lymphatic fluid. We had long talks about everything under the sun, and that seemed to help to keep his attention off his troubles. But when he was left to himself he became pretty miserable. When I came into the bedroom after being out for a while, I usually found him lying on his side, naked, with his legs drawn up to his chest. In that position there didn't seem to be so much tension on the wound. His almost constant erection still pulled at the incision, and I was afraid a wide, irregular scar would result if it went on. So on the second day I decided it was time to act.

"If you're feeling courageous, I'd like to do something which will give you both pain and pleasure, but afterwards I think you'll feel better, Tom."

When I showed him the vibrator and explained where he should put it, he blushed to the roots of his hair, but stammered, "OK. I've trusted you all this time, and I trust you to do the right thing now. Let's go for broke, if you think its the right thing." I put lubricant on the vibrator and gave it to him. He turned away from me, towards the wall on the other side of the bed, and slowly introduced the lubricated vibrator into his behind.

And immediately he had to hold onto his cock, stretching the stump of skin forward to minimize the pulling, as his erection went into high gear. "OK, he said, "let's make it happen."

No sooner had I flipped the switch, then a spasm went through him: he gasped and twisted, and his buns started to contract rhythmically. He closed his eyes and made a high, moaning sound, and then I heard a rhythmic "uh..., uh..., uh...," as the stubs of grey fluid came gushing out of his cock: ten, eleven, twelve shots of warm boy jissom.

No sooner had the last quiver shaken his firm, muscular, young boy-body than his face became troubled: he had squirted tablespoonfuls of jizz all over my sheets and the mat in front of the bed. I laughed and said

he shouldn't worry: as long as it was his, it was fine with me. He relaxed again and pulled the sheet up to his chin. When I came back with a rag, he was already asleep. He slept for seven hours, the first time since the operation that he had slept for more than an hour at a stretch.

A couple of days later, when I was about to take a shower, he asked again shyly if he could see my circumcision. I took off my towel and stood in front of him. After he had examined me for a half a minute he asked if he could touch it. 'Is the boy gay, perhaps?' I asked myself, but more likely he was still at the stage when all boys are more or less homosexually oriented. And besides, he had a good reason to want to know how these things work.

He gently touched my cock with the tips of his fingers, first along the upper side. Then he slipped his hand around it and felt along the underside. Electric shocks went through me as I felt the touch of his gentle fingers, and my cock jolted to attention. Tom's soft brown eyes glanced up at me mischievously, and he said, "Does it feel nice when I do that?"

"You're damn tootin' it does," I said. "You think I'm made of wood or something?"

We got into the shower together. From behind me he reached forward and started to masturbate me, but the attendant excitement was too much for him, and his penis was still too sore to bear the stretching. It was erect and throbbing, almost comical-looking with the black stitches sticking out of it, and it obviously caused him pain. We abandoned the action, and he got out of the shower and started to dry himself. Behind the opaque glass of the shower stall I had to help myself. Having felt his warm, wet, naked body next to mine, it took all of ten seconds for me to come.

He was sad afterwards, but I told him it wouldn't be long before we could play together, if that was what he wanted. "I think I love you," he said coming over to me. And he kissed me. It was a lovely, gentle kiss, and was followed by an even lovelier one, much longer and much harder. When we broke, he took a deep breath and said, "I don't think I ever kissed anybody before. Not like that."

He stayed for ten days, until his parents came back from their trip. By then his circumcision had pretty well healed up, and his hair was starting to grow back. (It itched a lot, and for a couple of days he was constantly scratching his groin.) And I could predict that when it was completely healed it was going to be a real pretty, inconspicuous circumcision, just right for his comfortable-sized teenage cock. I told him I was sure his parents wouldn't suspect anything, if that was important to him. I had filled out an application for him in which I maintained that he was living at the poverty level, so that the Hospital Foundation would pay the cost of his circumcision his parents wouldn't get a bill.

The examination after one month, and one after six months showed that cosmetically speaking we had indeed given him a real picture-book circumcision. And together with his firm, muscular body, the total effect was that of a nice, handsome, fellow. I hoped his dick wouldn't get too much longer, as it was already just right.

The examination of the hormones in his urine indicated that he was just at the height of puberty. And my own observations - from more private interaction with him - indicated the same thing. When we were together he always produced two orgasms, sometimes three and once even four. Over the course of the months his pubic hair came in again thick and rich, and his scrotum grew heavy and full with the weight of his balls.

His circumcision scar was almost invisible after a year, as I would have expected in view of his complexion, and since so little of the inner layer had been left, there was no "cuff" of skin behind the rim of the glans. His cock did indeed grow bigger, and thicker, but retained its "classical" shape. (And it felt wonderful in your mouth - as well as in other orifices.)

One day when we met to go swimming, he grinned and told me that a couple of his schoolmates that had kidded him before had recently admired him in the shower. They wanted to know where he had had it done, and how, and all the details. But he had kept his secret to himself, with a Mona Lisa smile.

A year or so later, when he had a girl-friend, I let him have my car a couple of times, so he could take her out. When he brought it back after the first time he beamed and told me how wonderful it had been with her. They had both come a couple of times, and it had been heavenly. "I want to say I'm glad we were together like... like we were, you know. You showed me a lot of things I never would have known or even guessed before," he said.

Over the years we have been in touch often. He is now a successful young entrepreneur in the pop music scene. He married a charming girl, who loves him, and she has in the meantime had a daughter and two boys (both circumcised before they left the hospital, of course). But he has not forgotten me: every once in a while he adds a couple of days to a business trip and spends them with me. Even at age 30 his is perhaps the circumcision that I am most proud of. He's a good kid. I love him still.

-----Chapter 8.

Diary of a Circumcision

My name is Paul W. and perhaps I should start with a little background about myself. I guess to begin with I have always had trouble with my foreskin, from the moment I was born. Its always been very long.

I was born in Atlanta, Ga. My parents came from Czechoslovakia after the war, and because kids in Europe aren't generally circumcised, my parents didn't agree to having me cut, even though at the time the doctor had made the remark (as I found out years later) that my foreskin was really too long, and that if they didn't do a circumcision now I would certainly have to have it done eventually.

Later, in school, when I was a teenager, my classmates gave me a lot of shit when I had to shower with them after gym class. They were all cut, of course, and I suppose none of them had ever seen an uncut male human being before. One of the guys, a big football-player type, came up to me under the shower one day. I couldn't keep my eyes off his massive, radically circumcised dick, which swung back and forth like a pendulum as he stood in front of me. He asked me straight out what was the matter with my dick, right in front of all the other kids. After that the other guys made fun of me whenever they could. Several times six or eight of them grabbed me on my way home from school, out in the bushes in back of the baseball field. After they pulled my pants down they tied me to a tree, and hung a sign on me saying, "Paul Longskin. 1st prize in elephant trunks." And before somebody finally cut me loose, half the kids in the school came by to see me and make fun of me.

A year later two kids came into our school who were uncut, too, and for a short time I breathed a sigh of relief. But only for a short time, because soon something awful happened. One day the two uncut guys and I were in the shower together, as it happened, when suddenly a whole bunch of the other guys, maybe a dozen, came storming into the shower room and grabbed us. They said they were going to circumcise all three of us, right on the spot. It was late on a Friday afternoon and gym had been the last class of the day. If there was anybody else in the building it could only be the janitor, who by that time of day was usually asleep half-drunk in the furnace room.

The guys led us through a door I had never seen open before. It opened onto a flight of stairs leading down into a kind of subbasement. The two rooms had no windows. It was very damp down there. I could hear all kinds of dripping sounds, and there were little rivulets of water slowly running down some of the walls; I figured out the rooms were under the swimming pool. No one outside could possibly hear a sound from down there.

The guys were only wearing their underwear, and we had nothing on except the towels we had wrapped around ourselves. They tore our towels off and we stood there in front of them, stark naked, embarrassed, and scared as hell. They took the younger of the two other victims into the other room. His name was Jose Valdez. He was only thirteen, and had just started to develop.

Jose told us later that at first they only played around with him. They roughed him up and slapped his face and his ass, calling him a "fuckin' pachuco". Then they showed him a long kitchen knife and said they were going to use it to cut off his foreskin. He got scared and started to

He told us that four of the guys held him down on the floor and played with his dick. They pulled his foreskin back and forth, then stretched it out as far as it would go. In the other room we could hear them laughing and making obscene jokes. Of course they weren't very gentle about it, and by the time they had messed around with his dick for a while it started to hurt. Outside in the other room we heard him crying and saying "No! No! Stop! You're hurting me!" The two of us almost shit ourselves, we were so scared.

Jose said they made him sit up - so he could see what they were going to do, I guess - and forced his legs apart. Then one of the guys must have at least scratched the end of his foreskin a little with the knife, because we heard him yell. Then things got pretty confused; he cried out again, desperately this time. What had happened, it turned out later, was that one of the guys had cut a triangular piece of skin out of the tip of his foreskin, maybe a half-inch on each side. It wasn't much of a wound, but it was enough so he started to bleed pretty heavily.

When Jose screamed, I guess the guys got scared, too. Maybe they were afraid somebody would hear him after all. Anyway, they let the three of us go. We took Jose to a clinic a couple of blocks away, where he had to have stitches. The doctor said that actually it would be a good idea to complete the circumcision the guys had started, but Jose, indignant and angry, refused.

But when he was all healed up, he had the penile equivalent of a cauliflower ear, and couldn't pull the skin back over the head any more, because of the scar tissue. In the end he had to be circumcised after all, and I went and visited him in the hospital. He was very sad about it, because among Hispanics foreskins are considered very masculine ("macho" was the word he used) . Of course he didn't come back to our school, and the other uncut kid transferred the next term, so once again I was the only uncut kid in my school - and the shit continued.

Max says a couple of experiences like that would be enough to ruin anybody's enjoyment of sex for life. But there was worse to come.

That summer I had my first girl-friend. She was a little older than I was and had already had sex with other boys. Before long 1 had her where she wanted to fuck with me. It was in the shed next to the pool at a friend's house, where there was a wooden bench you could put the mattress from one of the sun-chairs. But after we had gotten undressed, and she saw that I was uncircumcised, she refused to touch me. She got dressed and out of the shed as though it was on fire. She said my dick was absolutely "un-American"; she would feel like she was bucking with a dog or something." I don't know when anything has happened to me that made me feel worse, or more mortified. I wanted to commit suicide.

So even if you ignore the fact that my foreskin is now usually red and irritated, I guess I have every reason to want to have it fixed.

Even today I still get this recurrent nightmare where a bunch of bigger guys attack me in the shower of the gymnasium with a knife. Once or twice a week in my dreams, I see them standing there in front of me, their hands on their hips, their legs apart, threatening me with this knife, the naked glans of their skinned dicks pointing at me, accusing me. In this dream they are going to cut off my foreskin, of course. They hold me down on a bench and stretch it out, then I can feel the cold edge of the steel knife on my skin. When the knife bites, I wake up screaming, bathed in sweat.

I had three friends who went to school in another school district. When we were thirteen or fourteen we jacked off together in one of the guy's rooms (both of his parents worked). When we first decided to do it, I told them right off that I wasn't cut, and they were really curious to see my dick. But they were real nice about it, and never made fun of me or anything. I noticed that they had a little different masturbation technique than mine. If I used a little spit, I was almost always the first one to come. (In the kind of games we played, the guy who came first won. In life it's usually the other way around.)

A cut and an uncut penis usually don't look that different when they are stiff. But with my dick, no matter how long or stiff it gets, there are all these folds, so that it is really obvious that I have this long foreskin.

Of course I really enjoyed the opportunity to get a good look at the other kids' circumcised cocks when they had their pants off, because after the episode in the room under the swimming pool I was somehow fascinated by circumcision, and excited not only by the appearance of a circumcised dick, but by the very idea of circumcision. It was after I had beat off for a while with my three friends that I started to ask myself what it would be like if I were circumcised.

Two of the guys were pretty big for their age. The one whose name was Bobby had brown hair, and he looked pretty much like any kid his age, I guess. About average. At first glance he seemed to have the smallest dick of all of us: you only saw the clean, pink head sticking out of a bush of hair that was already pretty thick. But when he was horny and ran his dick out to its full length, he had almost seven inches, and it pointed almost straight up. The doctor hadn't left much skin on the shaft (probably because when he was a baby it looked as though he was going to have a short dick). So when it was erect, it looked really scalped - the scar was almost half-way back on the shaft. The first time he started to get worked up to jack off I thought I had never seen anything so naked - or so exciting!

The other of the bigger kids, Peter, was blond, and he had the biggest dick of any boy I have ever seen. Even when it was relaxed it was more than eight inches long, and when he was standing it was shaped like a long letter "S". Like all long dicks (according to Max) it didn't get that much longer when it got stiff. In fact, it didn't really get stiff, at least not as rock-hard as Bobby's did. There was always something a little rubbery about the way it moved, even just before he shot off.

Peter had trouble holding it back. The rest of us could make him have an orgasm just by talking - about some girl we knew, how nice her tits were, or what it felt like when her cunt was moist and ready. You didn't have to say much more than that when Peter would say "Aw, shit, guys! I'm starting to come already!" And no sooner said than done: his big pony-cock started to twitch, and the cream shot out of it - without his even laying a hand on it.

His cock looked different than Bobby's, where the doctor had left very little of the shaft skin. Even when he was fully stiff, there was still enough skin to overlap the crown of the head a little. I thought that was really fascinating, too.

The third kid, Louis, was smaller than the rest of us, but he had a nice body. He swam and played a lot of tennis. He had thick, black, curly hair, on his head, in his armpits - and between his legs, and he was really nicely developed. We used to lay bets as to who could control himself and his erection best, and Louis almost always won. He could turn his erection on and off as though it had a switch, no matter what we talked about or said. His cock was about middle-sized, but it was wonderfully proportioned. It had a sort of cuff of skin right behind the edge of the glans, and it looked terrifically sexy to me. When he wanted his erection to come up, up it came, and he went into high gear. You could see every blood-vessel pounding in it, and when he came (his warm brown eyes closed, his head thrown back, and his breath coming in gasps) it was as though a long series of small explosions were taking place inside him, shaking his lithe, athletic body. He made little tight noises in his throat, and thick globs of jissom, each one reaching a little farther than the last one, made a path of drops the size of fifty-cent pieces on the runner next to the bed. Louis really enjoyed jacking off, and it was a real pleasure to watch him, and try to come at the same time - and to come as hard.

We usually let him go first, because it was so exciting to watch him. For some reason he preferred to do it standing up, although when he started to come his knees usually buckled. The others of us sat naked on the floor, with our eyes glued to the action.

Once we all did it together under the shower. Peter's parents had a really great bathroom, with a big, tiled shower. But it was still pretty close quarters with four teenagers inside. Our warm, young, naked bodies were pressed together, and I think we all found it the most exciting thing we had ever done. Our bodies touched all the time. Then - unexpectedly - his parents drove into the driveway, and we would have been caught in the act if Peter hadn't recognized the sound of the car.

So all in all, I guess I had quite a few experiences with circumcised guys, and close-up experience with their cocks. I've talked about this a lot with Max, and now I'm pretty sure that what I'm going to do is going to be the right thing.

Once when I was in college we had an Israeli exchange student. He lived

in the same dormitory as me. He was a wonderfully good-looking guy with short, thick, black hair that reminded you of a mink coat. His face, with its strong, regular features was reminiscent of a horse's head. His dark eyes sparkled with energy and he was somehow very smooth all over: his legs, his buns, his flat belly.

On our floor there was a common bathroom with four showers. One day, while 1 was taking a shower, he came striding ins his yarmulke on his head as always, but apart from that wearing only a bath-towel, which he dropped as soon as he came in.

I was looking at his smooth, naked body up close for the first time. Apart from his head he only had hair in three places: his armpits and his groin. The thick patch of hair at the base of his cock ended in an abrupt straight line where it joined his lower belly. His cock was thick but nicely proportioned, and like his face, something about it made me think of horses. And his thick, horsy cock had been pretty radically circurmcised.

It only took a second for me to take all this in, and I turned toward the wall of the shower to finish washing my cock and balls. He walked over to the shower next to mine and turned on the water. When I had pulled my long, elephantine foreskin forward again I turned toward him, unthinking. I had wanted to make friends with this boy from the moment I had laid eyes on him. But up to that point we had only spoken a few words to one another - I hadn't been able to engage him in a real conversation.

When he saw me from the front, he froze. I guess it took a second or so for it to dawn on him what he was seeing, that he was under the shower with an "uncircumcised dog". He turned pale and, without even waiting to turn off the water, fled from the room as though an earthquake had broken out. The next day he was no longer in his room. I found out that he had applied for a room in another dorm. And I was sad. My foreskin had played me another dirty trick. I'm really glad I've gotten rid of it in the meantime. But now I'm going to start with the real diary of my circumcision:

26th of July. I have made the decision. For over two years now my foreskin has been red and irritated all the time. When I get up in the morning and go to the bathroom, sometimes I forget to pull the foreskin back before I pee. When the warm piss hits the irritated place I get a really sharp burning sensation that is so strong that I almost yowl.

It hurts to pull it back or stretch it out, in fact to touch it or manipulate it in any way. Its probably not hard to imagine that there is no form of sex that I can enjoy. The last couple of years I haven't had any sexual activity of any kind, apart from wet dreams, and they are no alternative.

Besides, my cock really looks ugly. And as I have explained, I'm not the only person that thinks so. The foreskin overhangs the tip of the glans by almost an inch. I think its always been as long as that, ever since I

first became aware of it, as a preschooler. The couple of times I have tried to fuck with girls my foreskin got all tangled and knotted up, and was a real hindrance. I couldn't even get to a climax, and needless to say, the girl didn't either.

Last week Max and I took a picnic down to the lake. When we had finished eating we wanted to go swimming, but we didn't have any trunks along. Max said he didn't mind going without a bathing suit, so we just stripped and jumped into the water.

When Max had taken his underpants off, he turned around, and I saw that he is cut. He looked at my cock with a certain amount of interest, and since he is some kind of medical assistant (I know he worked in a hospital for a long time), I decided to tell him about my problem. After he had had a good look at my cock he advised me to talk to a doctor about getting it circumcised. He said he would help me find the right doctor.

27th of July. Max found an "andrologist" for me to go to. That's a specialist for men's problems (just like there are gynecologists for women's problems). Max said he could either do the procedure in his office or put me in touch with a doctor who could do it in a hospital. I hope I'll get an appointment pretty quick.

28th of July. Well, at least I got an appointment for today. Max drove me out there, to Dr. Slaisser's office, in a big clinic building in the city. The doctor was really great, and went to a lot of trouble not to make it embarrassing for me. First we talked for about fifteen minutes, before he asked me to take my pants off. When he examined me he was very careful, but you could tell he was completely sure of himself. When he was done he said, "OK, well, I think a circumcision is really the only solution to your problem."

He told me exactly how he wanted to do it, and I have an appointment for the operation the day after tomorrow. He is going to do it in his office under a local anesthesia, and afterward I'll have to spend a couple of days in bed. He says it really isn't any big deal. He'll give me medication for pain, but he thinks maybe I won't even need it. He says its pretty uncomfortable at the beginning, but that it is surprising how quickly you get used to the discomfort, and that it doesn't last very long.

When I left the office he added that he had done hundreds of circumcisions and never had a serious complaint or a complication yet. So I'm not going to worry.

Actually I'm a little afraid of course, but on the other hand I can hardly wait till Friday. This dick of mine hasn't gotten any better recently. I'm getting even more pain when I stretch the foreskin in any way, or even touch it. I haven't been able to masturbate for months, so I'm running around hot as a pistol, half-stiff all the time. I only have to close my eyes and I start imagining all these naked bodies are around me, like I'm in the middle of a big orgy, but I don't seem to have the

wet dream I really could use. I'm really miserable.

29th of July. This is my last day with a foreskin. When I got up this morning and washed my cock, I smelled that cheesy stuff that the glands produce under my foreskin. Its a bad smell, I really hate it, and I'll be happy when I don't have to smell it any more. Max and I went down to the lake again and he took a couple of "before" pictures.

Max said I should write down a couple of measurements. He wants to compare them with some figures he collected while he was working in the hospital. He seems to be doing some kind of research on circumcision. Its going to be difficult to get any measurements of my cock in its relaxed state. I only have to think about the operation, and Wow! up it comes! I wonder what will happen if it starts to get stiff during the operation. Do you suppose Dr. Slaisser can get everything straight anyway? How can I be sure he won't take too much skin? I gotta ask Max. There must be some way they figure that out.

Max says my cock is about average size, but because I'm not very tall it looks bigger than it is.

Now I've taken the measurements. Here they are: length, relaxed: just over 4". Total length of skin (i.e. with the foreskin stretched out): 7". Length, stiff: 7-1/2". Length of the foreskin: inner layer: 1-3/4". (The doctor said he was going to leave about 3/4" of the inner layer. I think that's not enough, but he said that was what would give the best appearance afterwards.)

After the operation I'm going to measure everything again.

I'm still a little afraid, afraid of the pain afterwards, and maybe the scar will turn out ugly, but Max is very optimistic and says I shouldn't worry. I guess I worry too much about everything, anyway.

I asked him if I should try to beat off tonight. He said I should do whatever I think is right, but that it wouldn't be much help anyway. After the operation is over he says I'm going to have to put up with erections for two or three weeks anyway before I can do anything about them. The tip of my foreskin is pretty red again today, and it itches, but by tomorrow this time it will be gone. Dr. Slaisser says you get the best result if you wait until somebody is pretty well finished with puberty, when the cock has reached its final size and shape.

30th of July, 12 o'clock. Two hours after the operation. So it's over! I went into the operating room at around half past nine, and by ten I was on the table. I wanted to sit up for it, but Dr. Slaisser wouldn't let me watch. He had the (male) nurse set up a kind of screen between me and the operation site. Max was allowed to stay and give me moral support. Dr. Slaisser said it wouldn't be necessary to shave me, they usually didn't do that any more. He covered up my cock area with a sterile towel with hole in it, where only my cock and balls came through, and then he swabbed everything down with disinfectant. Then I got two shots at the base of my cock, one on either side, and then one underneath, where the

two sides of the head join. He said there's a sort of band there that in most guys has an independent nerve supply. It didn't hurt much, I only felt a couple of sharp pricks. After a minute he checked with the point of a needle to see if everything was dead, and it was. As to what happened after that I only know it from Max's description: The doctor pulled the foreskin out as far as it would go and marked a long, oval line around it, about where he could feel the edge of the head. Then he cut through the outer skin layer along the line and peeled it down. Then he shoved the bleeding margin up in the direction of the root of my penis and made a second cut, this time in the inner layer, a little less than 1/2" from the edge of the head. All this took about fifteen minutes. Dr. Slaisser was in good humor and joked with Max and the nurse while he was working ("The end is in sight," "It won't be long now," and other bad puns like that), along with describing what he was doing. He sewed up a couple of places that were bleeding and then cut away the "collar" of skin remaining between the two incisions. Then he sewed up a few more bleeders and sewed the two skin margins roughly together, with four stitches. Then he made a fine seam, witn about 30 small stitches. This took a while, and by the time he got through, the anesthetic was starting to wear off, so I could feel the last couple of stitches going in. But Max held my hand and told me everything was almost over. During the operation I had the problem that without my wanting to, I kept contracting the muscles in my back and my legs. I guess it was just general tension and nervousness. It seemed to me the operation was lasting forever, but finally Dr. Slaisser had the screen taken away, and said I was ready, and could look at the result. But I couldn't say much, because everything was pretty bruised and swollen-looking. Then he put a bandage around it. I was surprised that the bandage was so small . He said he thought he was going to be able to be pretty proud of the result, but that I shouldn't be surprised if it stayed pretty swollen and black and blue for the next couple of days, like somebodies face after a bar-room brawl. That was mostly because of the anesthetic, though, he added. The third day I could take a bath if I wanted to, after the bandage was changed. But for three or four weeks no sex of any kind, he said. We didn't want to risk popping the stitches and opening the wound. And even after that I was to be very careful!

Actually it wasn't so bad. It was a good atmosphere, and I was really glad to have Max along to talk with me and keep my relaxed.

(During the drive home). Now the anesthetic has definitely worn off, and I'm starting to have quite a little pain. At the moment it feels just like the whole head has been cut off, but I know everything is still there under the dressing. The pain changes its character from time to time. Sometimes it feels like my cock has two fiery rings clinched around it, just behind the head, as though the foreskin had been burnt off. Then sometimes the pain shoots up like small bolts of lightning from the cut place to the root of my cock. But it's nothing I can't take. I was afraid it was going to be a lot worse.

1 p.m. We're at Max's place now. He put me into bed and gave me a couple of Darvon tablets. Now there is only a dull ache.

5 p.m. Now the pain has started in earnest. I've got the TV on, but I can't really concentrate. Once again it feels like there are two red-hot metal rings clinched around my cock, but with the tablets it's OK. Now I've got to hang on until seven o'clock before I can have a couple more Darvon. Max is sitting beside the bed and doing his best to keep my mind off my troubles. He keeps telling me what a good job the doctor did, and that in the end it's really going to be good.

30th of July, 7 p.m. At the moment the pain is pretty bad, but I guess I can take it as long as I keep my mind occupied. I don't want to think about what my cock will feel like if I start to get an erection.

8 p.m. I think I'm going to lie down and try to get some sleep.

9 p.m. The minute I started to drift off I got an erection, of course, and was wide awake. It pulled at the stitches like hell, and pretty soon I could see there was some fresh blood oozing through the dressing. Max put a new one on for me. Underneath the dressing it looked like my cock had been worked over with a baseball bat. And that's just the way it feels!

10 p.m. I feel a little better now. The pain has let up quite a little. It's not sharp and burning any more, just kind of dull. I'm still bleeding a little, though, and there is a lot of other watery stuff, Max says it's called "lymph", and that its to be expected. Its half stiff the whole time, now. When we changed the dressing just now I could see that Dr. Slaisser really did take a lot of skin. Jesus! It looks like hell, but maybe it only looks that way because everything is so swollen.

11 p.m. I'm going to try to sleep again.

31st of July, 1 a.m. I just woke up with pretty bad pain. I started to have this horny dream, and didn't get into it very far when the pain from the erection woke me up. Max said I should just sit up and think about something else. He just made me a good, stiff gin and tonic and gave me a couple of magazines to read (not the kind of magazines you're probably thinking of, though).

2 a.m. Max just brought me something to eat and we have just been chewing the fat for a while. I'm not having much pain except when my cock is stiff. Which is about half the time, no matter what we talk about.

3 a.m. Now I'm back to the dull ache again. Max and I have been playing cards. I think I'll even pass up the next pain pill.

4 am. Now I think I would describe myself as almost comfortable. I'm going to lie down again. Max says he's going to continue my 'diary" while I'm asleep.

Hi! This is Max. Paul is really a good kid. He's asleep on his back now, with his knees drawn up almost to his chin. He was really brave. I think he was more afraid that he would admit to me. Besides, he had had a lot

more pain than I expected. Probably cause he's still a pretty young guy.

31st of July, 9 a.m. Here I am again - Paul. I was awake a couple of times in the night with erections, but it wasn't so bad. This morning I got up and got dressed and had breakfast in the kitchen with Max. It's a lovely warm, summer morning, Day One of my new life without a foreskin. I feel fantastic, actually. I haven't taken any more pills since last night. It's not really painful any more, just uncomfortable, at least as long as it's not stiff. But when it is, its no funs I can tell you that.

When Max changed the dressing this morning we both had a good look. Now I've got a nice scab all the way around. Max says you probably will hardly see the scar when its healed. I guess he's right, but right now it still looks kind of bruised from the anesthetic and all the surgery, and its still all swelled up and crooked, sort of off to one side.

There's an unbelievable difference between the way it looks when its relaxed and when its stiff. When its relaxed it looks like some kind of little wounded animal asleep in the hollow of my scrotum, between the balls. Shut when its stiff it already looks like it could produce a fountain of jissom, and believe me, it wants to... But I've got to stop. Even thinking about that makes it get stiff and then it smarts.

10 p.m. I had a really good day, but my cock still looks like Its been in a fight. I was asleep for a while, but woke up with a real unbelievable erection. But everything has healed up enough now so that its not unbearable, only uncomfortable. The erections always go down again after a while, if I read or watch TV I wouldn't have thought the pain would go away so fast.

1st of August. My cock is doing so well that it only has one thing in mind: it wants to shoot. And it really pulls at the stitches. But Max says there is no way he is going to allow me to make it do that. "You've just got to stick it out," he said, and I answered "Well, if you look closely, that's just what I'm doing!"

2nd of August. Max just took off the dressing for good. The best thing now is to let the air get at it. It felt so good with the bandage off that I did something stupid. While Max was out getting gas I decided to go out and do a little shopping. Bur when I came back the head was swollen and it hurt. And when I looked, it was bleeding at the seam underneath, where the doctor cut away the bridge of skin. Max says there are no palls for stupidity, and that I should haste known better. I'm going to have to spend the rest of the day in bed. Max says it can take up to a week before the swelling goes down, and that the lymphatic system of the penis has to get use to the changes that have taken place.

3rd of August. I had a really good night last night. I only woke up once. The swelling of the head has gene down almost completely nova. The only thing J,hat's still kind of unpleasant is the stitches. They stick out in all directions like bristles, and they keep getting caught in the material of my underpants. Max said I should wrap a strip of gauze around my cock until the stitches are ready to be removed - if they

don't fall out by themselves.

4th of August . Finally I got a chance to take a bath. It was really wonderful. I just lay there and enjoyed the feeling of the warm water. When I got out and dried off, I felt just great. While I was lying in the water I just (very, very carefully) tried to masturbate a little, but everything is still too sore when you touch it. But I have the feeling that my cock is going to work just fine when it gets straightened out. I can hardly wait...

5th of August. My cock looks better, more normal, every day now. The problem is that I'm almost dying of horniness. Max says I should wait until there's almost no pain any more when I rub it. (Shit. That could take over a week.) I'm not gonna be able to last that long.

During the operation Dr. Slaisser said, "When we do this operation we try to add an inch or so of length. I assume you don't have any objection...?" Like an idiot I took him seriously, and when I said, yes, that would be fine, everybody in the room laughed. But now, when the bandage is off and I look at myself in the mirror, it looks as though he really did add something. But maybe that's because its still a little swollen, and off to the side a little, because the right side is more swollen than the left. But the color is almost normal again. Max says everything is coming along so well that we could go to the beach tomorrow, if the weather is OK. I think he wants to get some "After" pictures to go with the ones he took before.

6th of August. Last night I woke up with a really monumental erection. It was throbbing so hard I thought I could hear my pulse beating inside my cock. The veins were full and stuck out, and I wanted to beat off so much I could have cried. Why don't I have a wet dream and get rid of some of the pressure?

Finally I woke Max up and said I couldn't stand it any more, but if I touched the incision or the stitches it still hurt. "Well," he said," OK, I guess we'll have to see what we can do." He wrapped a long strip of gauze around and around my cock, up to the place just behind the edge of the glans, really tight, so that just the head stuck out. Then he went to his closet and got a pile of porno magazines, and said, "OK, kid, I'm going to leave you to your own devices now. Just be gentle, and use lots of lube gel."

It was hard to get anywhere at first. I had thought I would come in ten seconds, but I somehow couldn't get it to work right at first. Mainly because I only had the head to rub, and I had to be careful not to stretch the shaft skin in any way. But when the orgasm came it was a doozie. After weeks with nothing but unsatisfied erections, I came like dynamite. When it was over I fell back onto the pillow and fell asleep in about 30 seconds. I didn't even take the time to clean up the jizz, which had squirted half-way across the bed. It must have been four or five tablespoonfuls. But when I woke up, Max had wiped everything off the sheets for me. I was so fast asleep I didn't even notice.

This morning I can't feel any pain at all, but its starting to itch like fury. But basically my cock feels so good its almost as though I have always been circumcised.

We went to the beach this afternoon and Max took the pictures he wanted. He seems to have found it exciting to photograph me in the nude: I could see he had a real stiffy inside his jeans.

7th of August. The nicest thing is the feeling that I'm really clean now. And always, day or night, it looks as though I'm ready for sex. Which I am. And when I pee of course I don't have to pull the skin back (or at least try to), and when I'm done there's no smell on my fingers - except a nice clean cock smell.

I still got problems with erections. It often happens that I have to get up about two in the morning and watch TV or read for a while. Max says he thinks the scar looks great now. After the big bang yesterday I'm going to try not to jack off for as long as I can, so everything gets a chance to heal up really well first, so afterwards it will look as good as possible.

Max says everything is going so well we can go to a lonely spot he knows on the shore of Lake Eire and maybe even go swimming a little. He must be taking part of his vacation to take care of me. He hasn't been back to work since the operation.

Most of the time everything feels entirely normal now. I just wish the goddamn stitches would fall out, so that I could have something like a normal sex life. Max says it usually takes about three weeks for the part of them that's inside the skin to be absorbed. And even afterward I'm going to have to be real careful for a couple of weeks.

You might want to know how much skin they ended up taking off. Max thinks all in all it was about two inches of the outer layer plus a little bit less of the inner one. (Boy, if you figure it out, that was almost half the original total skin length!)

10th of August. By now I've been home for a couple of days. Now I really feel like I've always been circumcised. Psychologically I guess I always wanted to be. Some of the stitches have loosened already, and I pulled them out with tweezers. The others are still firm, though, and Max says to wait until they slip out almost by themselves. The whole thing itches like hell. Max says the itching goes on off and on for a month or so. But if you're alone it's kind of nice to scratch, too.

I still get these erections at night, but now if I'm really careful I can already jack off once in a while. And pretty soon Max says I should be back to a normal sex life. "Back to!" Hell, I've got to START with a normal sex life!

14th of August. Max-says if I want to masturbate it should be OK to really go to town now, only I should stop if it hurts.

15th of November, three months later. I'm really happy I got myself circumcised. Before the operation, as I have said, my foreskin was always red and irritated, and I my mind was always on my cock and its problems. Now I think about it when I want to - which is often, of course - and when I don't - I don't. I don't have this obsession any more. Now the head is always smooth and dry, and the only thing you can smell in my underwear is the interesting smell of the sweat from my bag.

If I look in the mirror I can see that the scar is just a thin, regular line, a little lighter than the skin around it. But the skin just behind that spot is starting to get darker, so that the combination is a sort of interesting ring. I hope its going to get broader, it looks really sexy.

(Once in a while, when I go to the bathroom, I forget that I have been cut! If I'm thinking about something else, and on /'automatic pilot", I sometimes try to pull the foreskin forward that isn't there any more. And then I'm mildly surprised to find it gone. But it feels and looks wonderful. My cock thinks it was born circumcised.

Masturbating is a little different than it was. I can get to an orgasm all right, but it takes a little longer. I have to rub harder and use more spit as a lubricant. (Before, sometimes I didn't use any spit at all.) In general, jacking off is not quite as pleasurable as it was. But sex with others is much better! (At least I guess it is much better, before it wasn't even possible.) I've been with someone a lot recently guess who? - and when he lays me down on the sand of some beach and gives me a blow job it's so beautiful I think I'm going to pass out. (When I stand up afterward and look at the sand where I was lying, it looks like there's been a dog fight - from the way I was thrashing around.)

I have a new girl-friend, too, and when I'm with her I can go on almost forever, and we both get terrific orgasms. Both times we have fucked, we both came at the same time, and it was like a combination of Vesuvius and the Fourth of July fireworks. For some reason I can control much better when I come than I could before. It's almost like having a switch or a button to push. My girl-friend is really in love with my cock. She's always stroking it and kissing it. She wonders what it looked like before. Maybe Max will give me a couple of prints from the "before" series so I can show her.

Thanks, Max, for all your help!

Chapter 9.
An African Circumcision

Perhaps the best and most graphic description of an African bush

circumcision is at the same time one of the earliest. It was written by a Belgian doctor in the first years of this century; it describes the circumcision of three "volunteers" in Central Africa in 1906. One wonders what King Leopold of Belgium, for whom the report was written, must have thought when he read it. The story that follows is a free adaptation of the story told in that report.

During a visit to a camp of the Congolese army in 1906 I had dinner with the commandant, Colonel Boutsen. In the course of the evening the conversation happened to turn to the subject of circumcision.

"It's strange," he said. "When I came here, four years ago, I had a medical examination done on all the men in the garrison. Among other things the examiners took note of whether the men were circumcised or not. At the time, of the 300 native soldiers, only two had been circumcised. But when we repeated the examination last year, it turned out that more than half of the men had submitted to the operation in the meantime. And there had been very little turnover in personnel, so it was largely the same men." The custom seemed to be spreading southward from the Moslem areas to the North, he added.

"I would be very interested," I replied, "in photographing one of these circumcision operations for an anthropological report I am doing, Colonel. Do you think it would be possible to find a few men who would be willing to have themselves circumcised in the next few days, and who would let me photograph the proceedings?"

"Oh," he laughed, "I'm certain that won't be any problem. We haven't given any of the men leave for that purpose for over half a year now. You can't get the men to do any useful work for a couple of weeks after the operation, you know.... But I wouldn't mind making an exception in a few cases, if it would be a help to you. I'm sure quite a few men would respond. Their women have gotten pretty wild on the subject, as a matter of fact. whey don't give their men any peace until they have it done. They seem to believe that the men have a lot more 'staying power' afterward, it seems. And both the men and the women say the penis looks much more attractive after circumcision, more, well... sexy.

"I tell you what. Tomorrow at roll-call I will have the men asked whether there are any who would like to volunteer. I'm sure we ought to be able to find a few who - for a small consideration, of course - would be willing to do something along those lines... In the past the operation has been done by a fellow from one of the tribes to the North of here. You will want to pay him his fee in advance, of course..."

Of course I said yes. And the men would get a certain amount for their trouble, I assured him.

When I arrived at headquarters the next morning at eight there were about 150 Black soldiers standing in line in front of the building Probably every man in the place who hasn't been circumcised, the Colonel remarked. At any rate many more than I could use in the two days I had left.

But as it turned out, it was exactly 37 volunteers. The other men were previously circumcised friends who were there to lend moral support to the volunteers. (To be more exact, they were there to hold the volunteers down during the operation, as I later discovered.)

The Colonel was astonished at the large number of volunteers, and asked me what I wanted to do under the circumstances. After I thought about it for a few minutes, I told him that the best thing would be for n e to choose three, and that for that purpose it would be best if I got to see the men without their clothes on.

A half-hour and a cup of coffee later, the potential circumcision candidates were lined up stark naked for my inspection. I chose three well-built, muscular fellows of different ages and appearances. The first was a well-developed young man with an athletic body. He was about 20, with a particularly long and noble penis. The second was a little younger, perhaps eighteen, with an organ that was more average in size, and the third was a boy of perhaps fifteen. But he was well-built, too, with hearty balls and an organ that was large for his age.

The Colonel had already sent for the "surgeon". I shrill refer to him in what follows as the "operator," since the procedure somehow didn't have that much to do with surgery. We were going to do all three of them the same daft The operator was a man of almost 70, I would guess, with a permanent smile, more of a grimace, actually. After watching him for a while, I realized that he was blind in one eye! I'm not sure he is somebody I would have chosen as a surgeon, but the Colonel assured me that this was the man who had done almost all the circumcisions in the camp, and that he was trusted by all the men.

I should add here that many African tribes do circumcisions as part of their puberty rites. They are usually accompanied by involved religious ceremonies. Since circumcision is thus an integral part of the introduction of boys to the status of men, in most of the tribes it is a difficult test of bravery and the ability to bear pain stoically. In the -majority of the tribes here the boys - and girls, for that matter - dare not cry out or struggle during the operation, and in fact must not even show by their facial expression that they are in serious pain.

The Colonel explained that in spite of this cultural and ethnological background, the men here in the garrison who wanted to be circumcised came from tribes that were historically non-circumcising, and that the reasons they had for being circumcised were actually more sexual and cosmetic in nature. Because circumcision played no role in puberty rites, and had nothing to do with bravery, there was no reason for the men to show any particular stoicism. So I should be prepared for a certain amount of struggling and crying out. He had witnessed a number of these operations in the past, and said it was obvious that the operation was acutely painful.

He added that after the procedure the men were curiously unwilling to admit how bad it had been, and that they minimized the amount of pain

when talking to as yet uncircumcised comrades. They always reported the procedure as almost a bagatelle, actually, probably so that as many of their friends as possible would submit to the operation as well, and be "members of the club."

The regimental doctor, who was present at this discussion, mentioned that after the operation the men would be unfit for anything but light work for up to a month, and that this was also considered an incentive. Since the wounds were not sutured in any way, he said, it was usual for them to heal badly. The men of course got erections, and consequently the healing sometimes lasted a long time. The usual practice was for the men to go about without pants in the period after the operation, at least until the scar was pretty well formed.

The old medicine man soon appeared, collected his fee, and obviously wanted to start right away. So the group started off, he, the three candidates, the friends, and me, accompanied by a bearer carrying my heavy camera and its tripod. The old man led us out into the bush. We walked until we were perhaps a kilometer from the camp (far enough, at any rate, so that no cries could be heard). Soon we came to a simple hut in a small clearing. In front was an iron pot full of water over a fire. The three volunteers took off their khaki trousers at this point. They had nothing on underneath. I was fascinated by their beautiful bodies, their generously-dimensioned penises, and their long foreskins - soon to be sacrificed.

I had the three men stand next to the elderly "operator" and took a photograph. Looking at it now, I can see that biggest of the three candidates has a noticeable erection: the upper half Of his penis is lighter in color than the rest. He is probably thinking about what is to come. His foreskin is partly retracted, so that the tip of the glans is visible, quite bright in color. (Examining the men earlier in the day, I had noted that his foreskin was pulled far forward. It was quite long, overlapping the tip of the glans by almost an inch.) The expression on the man's face indicates that he is perhaps not quite so enthusiastic at the prospect facing him as he was an hour before.

The old man informed me by gestures that I should chose the one who was to go first. For some reason my heart was pounding. I chose the biggest and tallest one. The others were led off into the bush, where they would not be able to see or hear anything of the proceedings. The old man led the candidate over to the pot, where he carefully washed the whole area between the man's navel and his knees. He pulled his foreskin back and washed under it carefully. When the glans was fully exposed I saw that it and the surrounding skin were astonishingly light in color, almost as light as my own.

Now that the sun had climbed considerably higher, the old man insisted on doing the operation in the shade of a grove of banana trees. While they were moving over I got a chance to look as his "instrument kit": it consisted solely of an ordinary kitchen knife of European manufacture, about four inches longs I have seen this kind of knife used to cut vegetables in French restaurants.

As soon as the other two candidates were out of earshot, it was clear that the time had come. One of the men that had accompanied us sat down on the ground and spread his legs. The man about to be circumcised had to sit down in front of him and spread his legs, too. The man behind the candidate set his feet in front of the candidate's knees, and spread them as far apart as possible. He then put his arms under his armpits and held his hands with one hand, while he held the other hand in front of the candidate's eyes. Two other men had hunkered down on either side in the meantime. Each held one of his ankles.

Now the old man bent over and carefully examined the man's penis. Grasping it just behind the glans, he pulled the foreskin out lengthwise as far as it would go, probably to determine how much skin to remove. Then he pulled it back, rubbed something like dust on the exposed glans to make it smooth, and, pulling it forward again, made a mark on the foreskin with a White powder he had brought along. This was obviously in order to mark the spot where the cut was to be made.

It was at this point that I took the second photograph. Looking at it, we see the following: the 'operator" has now pulled the man's foreskin forward toward himself as far as possible, so that the white mark, the place where the incision will be made, is just in front of the tip of the glans. You can see that it is under considerable tension. I he man's large scrotum, about the size of two tangerines, is clearly risible. The friend holding the man's left leg is grimacing in anticipation of what is to come.

Then the operator made the first of numerous cuts. Reaching under the penis, with the cutting side of the knife ups he rapidly made a long, circular incision starting near the top of the right side, going underneath, and coming up the other side. Immediately a white line became visible in the dark skin of the shaft. That is the scene I captured on my third photograph.

Up to this point the candidate had remained quite calm and had shown no signs of agitation or fear But the second the knife bit in, he cried out and began to struggle. He somehow got one hand free and attempted to defend himself. He was quite strong, and the others had all they could do to hold him. His body slid down in the direction of the operator. The friend behind him managed to grab his hand again. Immediately the white line widened, and blood welled up in it. The operation site was soon drenched in scarlet. Grasping the severed edge of the skin, the medicine man inverted the forward portion of the foreskin and pulled it down over the mucosa layer covering the glans, where it hung down, overlapping the glans by perhaps an inch and a half. The medicine man's fingers were new slippery with blood. But the operation was far from over: while the first cut had had something like the effect of a strong electric shock, what followed was pure, slow agony.

The assisting friends sought and found a better grip on the candidate's wrists and ankles, and the next phase began, in which the thin, sensitive inner layer Lucas Colt off piece by piece.

The operator now- pushed the remaining shaft skin-upward in the direction of the root of the penis, where it formed a wrinkled, bleeding collar. The blood dripped down the man's scrotum. Now the inner layer, about one and three-quarter inches long, was resected. Together with the severed portion of the outer skin, which was still attached, was perhaps three and a half inches long (twice the length of the glans). All this was pushed back up and rolled in back of the crown, exposing the glans - permanently. Now the operator cut into the "collar" thus formed at the top and cut it into two halves. When he did so, the man began to cry out and squirm again in his misery. Strangely enough, while he was trying hard to get his hands free, he hardly moved his legs at all. The men holding them had no difficulty in keeping them under control. (I have since noticed this during other such circumcisions.)

Now the operator grasped the two pieces of tissue one after the other between his thumb and forefinger and began to cut them away with a sawing motion, leaving perhaps a scrap a half inch long. The knife was most certainly not terribly sharp, and the man's groans and cries increased from one cut to the next. They reached a panic intensity at the moment when the operator severed the frenulum, the incredibly sensitive bridge of skin on the under side of the glans. That was in retrospect the worst moment of all. Although I understood almost nothing of Jambo, the language of the tribe, it was clear that the man writhing under the knife was begging them to stop. But they held him fast, and mercifully the operation was soon over.

The candidate, grey and trembling, was allowed to stand up. Thin streams of scarlet blood ran down his scrotum and his thighs. He sat down some yards away in the shade of the hut. For the next fifteen minutes or so he sat there, trembling and exhausted, holding his penis firmly between his fingers at the root to control the bleeding. During the operation he had bled quite profusely, I suppose because his genitals, as I had seen, were fully developed, to say the least, and because the circulation was correspondingly good.

I must confess that I was quite shocked by what I had seen. I had had no idea beforehand that the pain would be so terrible, and hoped I didn't look too pale, because the next candidate, the eighteen-year-old, had already been led in.

His operation was almost a repetition of the first. He cried out horribly when the knife cut in, particularly while the inner layer was being resected. But the old man worked on calmly, and in spite of his primitive equipment it seemed to me that was getting good results. Soon the second patient was sitting in the shade of the hut next to the first, holding his insulted organ between his fingers to staunch the flow of blood.

In the meantime one of the men had given the first candidate a green twig which had been split down the middle. It was squeezed open and placed just behind the wound as a kind of clamp to prevent any further hemorrhage. It worked like a charm: the bleeding stopped, and he was

able to let go and lean back against the wall of the hut.

The third candidate, the youngster, was the bravest of the three. Possibly it is because his genitals were less well developed that he experienced less pain, but I don't think so. He took the first, long, circular cut through the shaft skin without making a sound. When the inner layer was being cut off, he ground his teeth, and silent tears ran down his cheeks, but he didn't struggle until almost the end. When the frenulum was severed, however, he couldn't bear the pain any more, and suddenly let out a shrill, animal cry of pain that cut me right to the bone.

But soon the last of the operations was over. My last picture shows the boy sitting next to his two comrades, compressing his wounded and bleeding cock firmly between his fingers.

Being unable to speak Jambo, I was unable to tell the newly-circumcised men how sorry I was for them, but I sat with them for a while and gave them cigarettes - and their money - and when I left, I put my hand on the youngster's shoulder. I told him that I was going away, but would come back before long. He looked up at me and smiled, a little wanly, to be sure, but I had the feeling that he had understood.

About four months later my travels took me back to the camp. It soon became obvious that I had given the men enough money for their trouble, because when I arrived it was clear that I was expected. The drums had obviously announced that I was in the area, because as my boat approached the camp, a number of canoes came toward us. As they came close I could see that the men in them were all naked. As they came closer to the little steamer and hove to, they stood up. I could see that they were all uncircumcised: when they saw me standing at the rail they called particular attention to this fact by pointing to their penises. Some of them stretched their foreskins out, so that I couldn't ignore what they were trying to say. It was clear from their gestures that they wanted me to photograph their operations, too.

But unfortunately my camera had had an accident ill the meantime. The parts that had to be replaced were in Brussels. When I had it explained to them that I couldn't take any more photographs, they were very disappointed. (Somehow life seems to consist mostly of missed opportunities.)

The three circumcision candidates of a few months before were standing on the bank. They smiled and greeted me enthusiastically. I was anxious to see the results of their operations, which by now must be well healed - and they didn't lose much time in showing me.

Within a quarter of an hour I had a chant e to examine them in the infirmary. The healing process was complete. The old man had worked incredibly well with his vegetable knife. Only the oldest of the candidates, the one who had been operated on first, had a rather irregular scar, probably because he had struggled so much during the operation. The scar formed a kind of star in back of the glans, with

points of light-colored skin which contrasted sharply with the shaft skin, which was a quite deep black. But the general effect was wonderful, given the unusual length and girth of the man's penis.

The second candidate had had lust about the right amount of skin removed. With his somewhat shorter penis the inner skin layer formed a bright collar around the crown of the glans. certainly enough had been left to give him the maximum possible amount of sensitivity during the act of love. There were some irregularities in the scars but it looked like a good! comfortable circumcision

The teenage boy had a fine, regular scar on his pretty cock. but it looked to me as though too much skin had been removed. In fact I wondered if it didn't hurt when he had a full erection (I soon had an opportunity to see whether this was the case.)

After we left the infirmary, the middle candidate said goodbye. The older man and the boy then led me to a hut in the jungle just outside the camp. When we went in, 1 saw that there was a girl there, obviously the older one's wife or girl-friend. She was lying naked on a mat on the floor, and could hardly have been older than fourteen. I admired her full breasts and generous hips. The man was already taking his pants off. I was going to get a demonstration. In a moment he was lying beside leer. He kissed her on the mouth, moved on to her belly, then took one of her nipples into his mouth and started to lick at it. He was obviously excited, and had trouble finding a place to put his cock, which was erect, trembling - and now very obviously circumcised.

Within a few moments the woman was wet and willing, and ready to be penetrated. The lips of her vulva swelled and stretched as his thick penis invaded her. In an instant he was in up to the hilt and both were groaning and squirming with pleasure.

Of course I had no way of knowing how pleasurable the sex act had been for this man before his circumcision. But at least now it was clear that both were in ecstasy. Again and again the man pulled back until the glans was almost outside, and then thrust into her with full power. The girl sighed and groaned and tossed her head, her legs moving uncontrollably.

The teenager, watching all of this, had in the meantime put his hand inside the belt of his pants and was obviously rubbing his cock. At this moment the two on the ground had their orgasm. It was something like watching a tropical hurricane. When it was over they sighed and, snuggling close to one another, soon went to sleep for a nice, post-climax nap.

The boy now opened his belt and dropped his pants. Out and up came his pretty, circumcised cock, and he made it clear to me that he wanted to masturbate. His balls, already of almost adult size, were pulled up close to his body, and his elegant boy-cock stuck out and up at the kind of erectile angle that only young boys can achieve. At the tip there hung a drop of pre-cum. Now, with his cock in full erection, I could see

that it was as I had thought: he had been cut very far back. The shaft skin, under tension, pulled the skin of his scrotum up and out, and the stretching on the scar must have been very painful while it was healing. The basic impression was of a young, vibrant, and very, very naked cock.

The boy leaned back against the wall of the hut, made a ring of his thumb and forefinger, and rubbed back and forth along the whole length of his cock. After a few minutes he started to concentrate on the scar area, and the thin band of the mucosa layer which had been left. Soon he was working on the edge of the glans, his eyes closed, his breath coming in deep gasps.

In the meantime I found I had a wet patch on my pants the size of a saucer. I had almost come in my pants watching candidate number one and his girl-friend. And what the boy was doing now was even more exciting.

Now he put some saliva on his fingers, lubricated himself with it, and went to work again. He was having a good time, and he knew what he was doing. Several times he came close to an orgasm and then, at the very edge, stopped and then after a few moments started up again. But at some point he went too far, and the climax was suddenly inevitable. He stopped rubbing and grasped his penis firmly at the base, then groaned and sank to his knees.

He came mightily. At first the seminal fluid came flowing out of his cock in a stream, like water from a spring. Then he started to pump, and the jissom shot up into the air and half-way across the hut. I think he came for almost a full minute. Then he sat back, spent and satisfied. He smiled at me, and his dark, shy eyes seemed to ask, "Was I OK?"

He certainly was. He spent the night with me, and almost every night thereafter for the next six years. As a matter of fact he came back to Belgium with me and was my house-boy until he started studying at the University at Lovain. He has since come back to visit me often, and he is still unbelievably handsome (whether his erect, skinned cock is visible or not). In the meantime he has become Minister of Education of his country. I wonder what he has the children in the schools there taught about circumcision.)

Chapter 10.

Go get yourself circumcised - or maybe don't

Yes: There are many reasons whir you might want to get yourself circumcised after infancy.

Some of the reasons for a circumcision after infancy are medical in nature: the best one is if you have developed phimosis, which may happen when you are a teenager or adult. Phimosis, as we have seen above, is the situation when you are unable to retract your foreskin: the hole in the end of the foreskin is or becomes too small for it to pass back over

the glans freely. In this case of course it is impossible to wash under the Foreskin, which is not really terribly necessary in children, but very much so in the case of boys m puberty and already mature men. Not being able to wash the glans leads to inflammation, infection and pain within a short time.

If someone with a phimosis attempts to engage in sexual intercourse he usually experiences severe pain the minute he tries to thrust, when the foreskin is stretched by the advancing glans and pulled back by the walls of the vagina. Usually this leads to immediate breaking off of sexual activity. Attempts to continue lead to tearing of the leading edge of the foreskin.

If someone With phimosis has this experience, it happens during his first attempt at intercourse, a situation which is usually awkward to begin with, and you may be sure that it is not a very jolly introduction to love and sex. .If you have a phimosis, by the way, even masturbation is not much fun (although I knew one guy with phimosis who as a teenager had developed a technique involving stimulating the glans through the foreskin., without retracting it).

The important thing is, as I have already mentioned, that every uncircumcised adult male should take care to wash under his foreskin daily, thoroughly, to remove the evil-smelling, cheesy substance called "smegma" that accumulates there, which is secreted by the inner layer of the foreskin. If you don't clean out the smegma you are in danger of developing an infection of the glans called "balanitis". If you are circumcised, you will never have to worry about smegma, and you may never run into it, unless you have sex with uncircumcised men. (Some people, by the way, are very turned on by smegma and its odor and taste, particularly if it is still fresh.) In my opinion everyone, whether circumcised or not, should wash his whole genital area daily. It doesn't have to be right before sex, though: depending on how your partner feels about it, a slight hint of urine, or ball-sweat, your own distinctive smell down there, can be quite a turn-on.

Some years back there was an investigation done on a large number of Danish schoolboys. It turned out that a considerable portion of the boys not only didn't wash under their foreskins, many of them had never been taught that you should! This is interesting when you consider that in Europe, and particular in Scandinavia, almost nobody is circumcised. If a boy or a young man gets in trouble with his foreskin in such countries, he may find himself put into the hospital for a week or two, and treated intensively with a view toward NOT circumcising him.

A further danger in having a foreskin that cannot be retracted properly is this: you may with some effort and discomfort get a phimotic foreskin retracted, but you may not be able to get it back forward again. Often the foreskin forms a tough, inelastic ring Just behind the glans, which constricts it and makes it start to swell. The ring of foreskin tissue chokes the glans, the shaft swells, and a vicious circle is set up. The resulting blue-black glans on the examining-table is something to behold (and if nothing is done, it will die off and become gangrenous). This

condition is called "paraphimosis". If this happens to you, you will need the services of a good surgeon - and fast! With luck your foreskin will be off within a half hour at the nearest clinic or doctor's office, whether you want it or not. (Actually, you will want it in this case. The pain is indescribable.)

In the case of small boys, the foreskin remains stuck to the glans for an amount of time which varies widely from individual to individual. The foreskin of a small boy should never be retracted forcibly. The adhesions let go spontaneously, usually when the boy is one or two years old. Boys do not produce smegma until they get into puberty. One of the theories about smegma is that it is there as a last-ditch effort of the body to loosen these adhesions. At the very latest the foreskin almost always loosens when a boy is twelve or thirteen, in the course of his first attempts to masturbate.

Many researchers believe that smegma is carcinogenic, i.e. that it predisposes both males and females to genital cancer. This has been looked into in particular for cancer of the mouth of the womb. Many other researchers seriously doubt the cancer-causing properties of smegma, though. (What really has been shown to have a strong statistical connection with genital cancer in females is sex in the early teens, whether their partners were circumcised or not.

Circumcision of infant boys protects them for their entire lives from cancer of the penis. A great deal of penile cancer is cancer of the foreskin itself, in fact. If an uncircumcised male is circumcised as an adult, by the way, he still may develop cancer of the glans at some point. So watch out for any changes in the appearance of the skin, even if you have at some point been circumcised.

Then there are purely esthetic reasons for wanting to get circumcised. The foreskin of the adult male is always damp with urine, and for that reason alone it can smell bad if it is not washed daily. Also, even the normal foreskin is often red and irritated from contact with urine and smegma and with the material of the underpants. The uncircumcised male's underpants are always stained with urine, even if he always takes care to dry the tip of the foreskin off after urinating and before packing up the equipment. Of course even circumcised males know the old saw "No matter how you shake and dance, the last drop always falls in your pants," but the problem is exacerbated in the uncircumcised male, and whoever does your laundry knows more about your circumcision status that you might imagine.

The circumcised cock always looks ready for the sex act, and so a lot of people of both sexes find it sexier. There is a theory that this is one of the main reasons why people have been circumcising boys for thousands of years. Also, the foreskin weighs something, and tends to weigh the end of the penis down a little. When it is gone, the penis often hangs out from the body at an angle. This emphasizes any degree of erection the owner may have at the moment of observation, and looks sexy for that reason as well.

A male with a relatively short foreskin is practically speaking circumcised when he has an erection: the foreskin slips in back of the crown of the glans, when the penis is thrust forward, and if it is short enough, it stays there when it is drawn backward.

But if the foreskin is long, which it generally is in men and boys of European extraction, then it remains covering the glans completely or partially even during intercourse. Most men find they enjoy having the glans completely exposed and in contact with the walls of the vagina (or anus, or whatever). And this just doesn't happen if the penis has a long foreskin. Many uncircumcised men find that during intercourse they have to have one hand in their groin, pulling back the excess skin, to expose the head enough to produce an orgasm.

"Before" and "after" interviews with men circumcised as adults show clearly that there is no real difference in sensitivity of the glans before and after circumcision. But for many men it is psychologically important Whether they are circumcised or not.

## No:

There are arguments in favor of keeping your foreskin, of course. In infants the foreskin protects the glans from the strongly alkaline substances produced as the urine in the diaper ages and deteriorates. In many circumcised infant boy the "meatus" at the tip of the glans, the orifice where the urine comes out, is so irritated and sensitive that they cry out in pain when they urinate. The tip of the glans is sometimes even eaten away by these substances, particularly when the diaper is not changed often enough. This irritation is the explanation for some of the blunt-looking glans you occasionally see. (The effect of such a snub glans may not be unattractive, of course.)

One of the wonders of Creation is that in the normal penis the stream of urine comes out with a twist on it, just as a projectile comes out of a weapon with a twist caused by the rifling in the barrel. This twist guarantees that the stream remains coherent, even when the stream is many feet long (I first noticed this effect pissing over the edge of a cliff with a couple of twelve-year-old friends). This rifling effect is ca used by the configuration of the meatus, and someone I know remarked once that it is one of the incontrovertible signs of male superiority: the stream of urine is not coherent in females, and the urine splashes over a considerably wider area when they urinate. God's reasons for providing men with this little detail may have something to do with a better ability to mark one's territory with urine: surely the task of the male in the Stone Age.

If the meatus has been eaten away and there is scar tissue there, the owner may find himself peeing off at an antic angle, and missing the urinal part or most of the time, etc. This is in a way an argument in favor of circumcision, I guess. It is at any rate an argument for waiting with circumcision until the boy is out of diapers.

Of course the foreskin protects the glans from accidents, but most of us

do not spend our lives running around naked, except perhaps at certain lovely beaches or in naturist camps. I have not noticed any great dangers to the glans in either of these places.

A further reason for keeping one's foreskin is this: when you have intercourse with an intact foreskin, inserting it into the vagina or anus is like putting a damp foot into a rolled-up sock. You just "roll" the sock up over the foot. But putting the circumcised penis in is like holding the sock by the upper edge and trying to force your foot into it. None of this is any hindrance to penetration, of course, if there is enough lubrication there. (In the case of a female partner adequate foreplay will take care of this. If you have a male partner you will have to take recourse to some kind of lubricant anyway.)

Finally many men find the sensitive, wrinkly skin at the tip of the foreskin very important in the sex act and very much relish the pleasure they derive from it. In my opinion boys should not be circumcised (except in the case of phimosis) before they are in a position to make the decision themselves. This is actually only possible after they have had an opportunity to experience sex for long enough to feel comfortable and at ease with it.

Finally there is the argument that circumcision is painful, which it certainly is under "bush" conditions in Africa, or when experienced by a boy of eight or ten in Turkey or Egypt. Anyone who has ever witnessed a circumcision under these conditions will be in no doubt about the amount and quality of the pain- it is in fact one of the most painful experiences that you can have (as is clear from some of the reports in this volume). But this is no argument in the case of a circumcision performed by a physician. In fact as done in a hospital by well-trained personnel, it has an exceedingly low complication rate.

The anesthetics used today are 100% effective, and the only real pain you experience is on the first day or so after the operation. Surprisingly, most men find that they can stand the pain following circumcision without any medication at all (It is the cutting itself which is almost unbearable without an anesthetic). But children of four or five seem to suffer quite a bit, as well as some teenagers, whose organs are very sensitive during this period of rapid growth. They are just in the process of developing an adult-dimensioned blood circulation and innervation, and often complain bitterly in the first days after the operation. But most guys, even young ones, become accustomed to the discomfort astonishingly quickly, and after the first few days there is often nothing more remarkable than itching. When the pubic hair is shaved for the operation, men often say that the itching as the hair grows back is more unpleasant that the discomfort from the operation itself.

A final argument is purely esthetic: here opinions differ widely. Some people find the uncircumcised penis simply wonderful and beautiful. One of the students at the American college where I worked in the locker-room was the son of German immigrants. He was well-built, blond, and muscular. His parents had not had him circumcised, and somehow his

long, uncircumcised cock just fitted him perfectly. (The other kids called him "Firehose", but apart from that they didn't kid him about it, the way they did with some guys.) But other people simply prefer the appearance of the circumcised organ, with its business-like looking exposed head.

Whether circumcised or uncircumcised, the human penis is one of the most wonderful organs in the human body - and all of Creation. And one way or the other, when it is attached to a cute young guy it is beautiful, whether short or long, thick or thin, cut or uncut. A more important question is how you carry it and what you do with it. The penis has a very strong will of its own, but it is also very stupid, and you should never let it run your life. It is a good servant and a bad master, and it can get you into a lot of trouble. You have to use it in such a way as to never exploit another human being for your own purposes.

Every male should have the privilege of deciding for himself whether to get circumcised or not. No one should ever make the decision for him, because it is (practically almost) an irreversible step.

If you are going to have yourself circumcised, the best thing to do it find a clinic with gay men in its clientele. Such clinics can always refer you to a number of doctors who are understanding about problems with the foreskin, and they will not underrate the importance of how the penis will look afterward. You should also talk with the doctor in detail about how much skin he is going to remove, and work for a good compromise as to how much and how little of the sensitive inner layer should be sacrificed, so that you are in the end neither skinned half-way back to the balls nor left with a thick collar which overhangs the edge of the glans. In my experience about half to three-quarters of an inch should be left, depending mainly on the difference in length between your penis when erect and when flaccid.

As an adult, you should not have your circumcision done by a doctor who proposes to use devices like plastic bells or mechanical clamps. You should insist on free-hand methods such as the "cuff" or "double circular incision" technique. The doctor should be prepared to take as much time as necessary. With all the pre-operative procedures, it can take an hour.

It's your cock that's at stake, so don't take any short-cuts!