

## **The Second Time Around**

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Everything about this pregnancy was different.

My previous two pregnancies happened soon after we began ‘trying,’ with two years between, as planned. This one happened soon after we began discussing preventing more pregnancies, six years after my second child was born. Despite it being my third, this was my smallest pregnancy -- most people didn’t even realize I was pregnant until my third trimester. My two previous births were induced at a convenient mid-day time and lasted ~10 hours, with me succumbing to the relief of an epidural in both cases. This time I went into labor naturally, ignorantly waiting until 3 AM to leave for the hospital.

Since it seemed too late to call friends, we took the kids with us. I howled intermittently as my husband sped down Duke Street, the minivan hopping with each well-known dip in the road. In between contractions, I alternated between yelling at him to slow down and pleading with him to get there in time for an epidural before this thing happened, every so often assuring the kids this is normal behavior for a woman in labor.

At 3:36, I leapt out of the car and ran into the hospital. I quickly pushed my bag through the scanner, buckling under another contraction while I asked the security guard if there was an anesthesiologist in the house. A woman arrived with a wheelchair, but I refused to sit down, begging her ineffectively to show me to the delivery room ASAP and to call the anesthesiologist en route. We had to check-in first, during which I tried, in the diminishing spaces between contractions, to impart the desperate need for speed so I could get an epidural.

Given my obvious distress, I couldn’t understand why everyone was smiling, until I got to the delivery room, where – within minutes-- my water broke and my doctor informed that the baby was crowning. Aligned with the romantic notions of nearly every mom, I had wanted a natural, drugless birth with my first child; but now I knew better, and I WANTED AN EPIDURAL! This sentiment only brought more smiles from the doctor and nurses. When they absolutely refused to let me give birth standing up (and to give me an epidural), I finally lay down and immediately gave birth at 4:01. “I guess we ought to buy some diapers now,” my husband said as we looked at the beautiful, bruised face of our newborn son.

The next day, our doctor asked if we wanted our son circumcised. We took for granted that our first son would be circumcised like nearly every other American, consenting to the procedure before really thinking about it. This time we had talked about it but still hadn’t

decided, though we leaned toward circumcision, if for no other reason than our two sons would look the same 'down there.' Fortunately, our doctor called us on this 'easy way out' and engaged us in the lengthy and informed discussion we needed.

The earliest circumcision record dates to ~2200 BC in Egypt, where it was a spiritual rite of passage. It was later adopted by nearby Semitic peoples (including Jews and Muslims). According to Genesis, God commanded Abraham to circumcise himself and his household as a covenant. The Greco-Roman courts considered circumcision evidence of Judaism, prompting many Jews to hide their circumcisions and even undergo surgeries to restore the appearance of being uncircumcised.

In the 1st century Jewish circumcision was thought to benefit health, cleanliness, and fertility, while reducing pleasure. It was recommended the procedure be performed as early as possible, as it was unlikely to be done by someone's free will.

During the Renaissance, non-Jewish Europeans did not practice male circumcision, and the Catholic Church ordered against it. Although other European countries considered arguments for circumcision unfounded, by the early 1900's English-speaking countries performed the procedure primarily for medical reasons, specifically cleanliness (Encyclopædia Britannica). Regarding religious reasons, the encyclopedia points the reader to "Mutilation" and "Deformation." Indeed, most developed countries abhor the practice of 'female circumcision' (also originating in Ancient Egypt, though now performed mostly in Asia and Africa), primarily due to the lack of patient consent.

Currently the major medical societies in the USA, Britain, Canada, Australia and New Zealand do not recommend routine non-therapeutic infant circumcision. Nonetheless, physicians in "nearly half" of neonatal circumcisions (2006, American Medical Association) "did not discuss the potential medical risks and benefits of elective circumcision prior to delivery... Deferral of discussion until after birth, [and] the fact that many parents' decisions about circumcision are preconceived, contribute to the high rate of elective circumcision."

In a 1987 study, most American parents chose circumcision due to "concerns about the attitudes of peers and their sons' self concept," rather than medical reasons. Our doctor informed that circumcision had no proven medical benefits, except perhaps for a slightly lower HIV risk in third-world countries with high HIV incidence. Furthermore, an uncircumcised boy was no more difficult to clean, if simply cleaned in the same manner as a circumcised boy.

It should come as no surprise that we chose not to circumcise our second son, or that we chose without question to circumcise our first, for that matter. We feel fortunate to have made a conscientious decision this time, and glad for the objective doctor-patient discussion regarding circumcision that our society has apparently finally begun.

