



# Focus on Circumcision

Maryland, 2001-2003 Births

December 2007

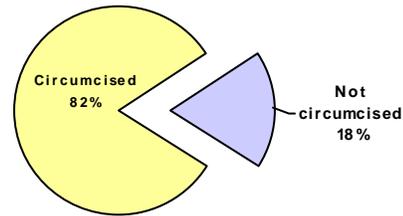
Circumcision, the removal of some or all of the foreskin from the penis, is the most common surgical procedure performed in the U.S. Due mainly to cultural, religious, and traditional factors, the United States is one of the few developed countries where the majority of males are circumcised. Whether any medical benefit of circumcision would outweigh the surgical risks remains controversial and, as yet, no U.S. medical organization has fully endorsed circumcision as a routine newborn procedure.

The Maryland PRAMS 2001-2003 survey includes the following two questions:

Is your new baby a boy or a girl?  
 Boy  
 Girl—skip next question

Did you have your new baby boy circumcised?  
 No  
 Yes

Figure 1. Newborn Male Circumcision Rates Maryland 2001-2003

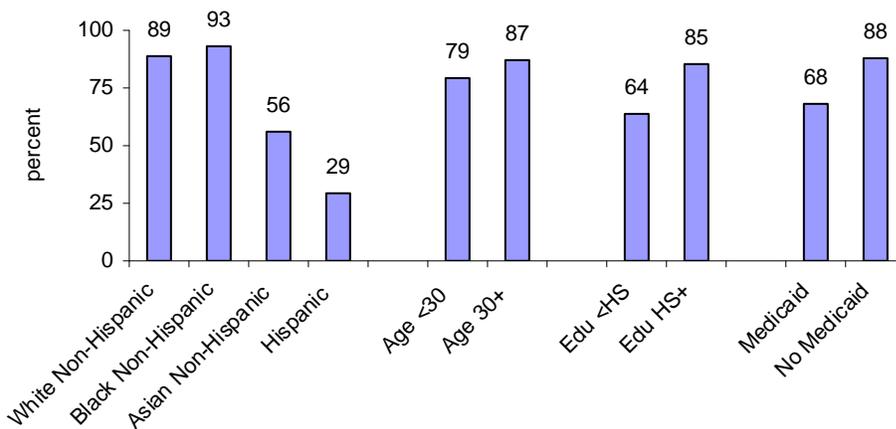


In Maryland, 52% of mothers reported giving birth to baby boys in 2001-2003.

Of these mothers, 82% had their newborn boys circumcised (Figure 1).

Circumcision rates were highest among newborn boys whose mothers were black non-Hispanic (93% of their sons were circumcised), white non-Hispanic (89%), non-Medicaid users (88%), ages 30 or older (87%), or high school graduates (85%).

Figure 2. Infant Circumcision Rates by Maternal Factors



Circumcision rates were lowest among newborns whose mothers were Hispanic (29%) or Asian (56%) (Figure 2).

*Note:* During 2001-2003 in Maryland, 53% of births occurred among mothers who were white non-Hispanic, 33% were black non-Hispanic, 5% were Asian non-Hispanic, and 8% were Hispanic.



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## Discussion

In Maryland, 82% of male infants born in 2001-2003 were circumcised. Although the vast majority of white and black mothers elected to have their newborn boys circumcised, only 29% of Hispanic mothers and 56% of Asian mothers chose to circumcise their sons. In California, where the immigrant population is large, less than one-fourth of newborn boys are currently circumcised. As the Asian and Hispanic populations continue to grow in Maryland, circumcision rates will likely decrease.

In 1999, the American Academy of Pediatrics (AAP) did not find sufficient evidence to recommend routine neonatal

circumcision. The AAP did recommend that parents take into account current medical, ethnic, cultural, traditional, and religious factors when making decisions about neonatal circumcision. This opinion was reaffirmed in 2005. Because of recent studies done in Africa, the World Health Organization (2007) now views adult circumcision as one way to reduce heterosexually acquired HIV infection in males. The AAP is reviewing its U.S. policy statement on neonatal circumcision and will either reaffirm or revise their opinion soon. Clearly, more research and education are still needed on this common, but very controversial, topic.

## PRAMS Methodology

Data included in this report were collected through the Pregnancy Risk Assessment Monitoring System (PRAMS), a surveillance system established by the Centers for Disease Control and Prevention (CDC) to obtain information about maternal behaviors and experiences that may be associated with adverse pregnancy outcomes.

In Maryland, the collection of PRAMS data is a collaborative effort of the Department of Health and Mental Hygiene and the CDC. Each month, a sample of 200 Maryland women who have recently delivered live born infants are surveyed by mail or by telephone, and responses are weighted to make the results representative of all Maryland births.

This report is based on the responses of 4,537 Maryland mothers who delivered live born infants between January 30, 2001 and December 31, 2003, and were surveyed two to six months after delivery.

## Limitations of Report

This report presents only basic associations between maternal factors and neonatal circumcision. Interrelationships among variables are not described, and could explain some of the findings of the study. A retrospective survey such as PRAMS is dependent on accurate self-reports by the responders, their understanding of the questions, and recall of past events.

## References

American Academy of Pediatrics. Task Force on Circumcision: Policy Statement on Circumcision. *Pediatrics*. 1999;103:686-693 (reaffirmed in 2005)



Maryland Department of Health and Mental Hygiene  
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