## Commentary



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## Circumcision of children with hemophilia in local places

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Circumcision in some countries, is one of the most common surgical interventions in patients of hemophilia, although it is a controversial issue among medical professionals [1]. Here, retrospective evaluation for 18 circumcised hemophilia patients from the 92 ones followed up in Local Children Hospital at 2 year follow up period presented. They are classified as severe (4), moderate (10), mild (1) Haemophilia A and severe (1) and moderate (2) Haemophilia B. All patients were screened for factor inhibitor 1-30 days before. Patients received oral tranexamic acid (15 mg kg) three times a day for 1 week, first dose was given 24 h before circumcision.

The surgeries were planned to elevate deficient factor to 100% of control and after 50% for 3 days. Factor concentrates were applied in 8 hour intervals for first and 12 hours for next days. In the circumcisions, surgical saturation with effective cauterization done by the surgeons. If the patient revealed bleeding, extra bolus injections of factor concentrates were administered. All of the caregivers gave written informed consent before the procedure. Only one patient developed bleeding complication after discharge of  $3^{rd}$  day and was treated with factor replacement for a week. None of the patients developed factor inhibitor after a minimal 6 maximum 18 months intervals as they are screened for it. The ages of patients ranged between 1 and 14 years with mean value 6.7  $\pm$  4.4 years.

In Muslim communities, people must be circumcised according to their religious beliefs. As medical consequences are concerned, circumcision brings some discussions in other countries. Although the American Academy of Pediatrics (AAP) decide that the benefits of circumcision are not significant enough to recommend circumcision as a routine procedure [2] it is the most common procedure in the Plastic surgery clinics in that country [3]. As we compare literature datas [4,5] the rate of the circumcision almost 9-10 patient circumcision per year for 2 year reveals that there were hemophiliac children that couldn't be circumcised although family's great desire because of incapability of the surgery before.

In our population, circumcision may be assumed essential if child and family desire the circumcision. As more hematology and surgery departments with laboratory facilities get together, procedure may be performed more commonly and safely. So, that unnecessary social and psychological pressures and some other medical problems may be resolved.

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