Schoen, M.D., director of perinatal screening at Kaiser Permanente Medical Center in California, and an outspoken proponent of circumcision. “There are numerous medical reasons for it.”

This pro and con argument has been raging in the medical community for almost three decades. Meanwhile, the circumcisions continue.

The doctor enters the room, scrubs his hands in the sink, and snaps on plastic gloves. The nurse passes him a package, and he opens it on the counter beside the child. Inside are several large, light blue cloth napkins; some squares of gauze; a suture-tube of Betadine (an antiseptic ointment); and an assortment of stainless-steel uterines: a pair of scissors, two hemostats (small, needle-nose pliers), a heavy metal clamp attached to a hollow cone, a scalpell handle, and a scalpel in a sterile packet.

If you’re like most American men, you’re circumcised. But you probably haven’t given it much thought since junior high school, when you first noticed that not every kid in the locker room looked the same. In fact, if you’re single or childless now, you may think that it’s purely a father-son issue of little concern to you. Think again.

“Circumcision removes one-third to one-half of the skin on the penis shaft,” says Ronald Goldman, Ph.D., executive director of the Circumcision Resource Center in Boston and author of Circumcision: The Hidden Trauma. “The average circumcision cuts off what would grow into about 12 square inches of sexually sensitive skin.”

According to Canadian pathologist John Taylor, M.B., the foreskin is one of the key erogenous zones of the male body. Its 240 feet of nerves and 1,000 nerve endings are similar to those on the fingers and lips.

“The fact is,” says Goldman, “when it comes to sex, circumcised men don’t know what they’re missing.”

But a few do. Increasingly, men who were circumcised as adults (for various medical reasons) are speaking out against circumcision, providing firsthand accounts of sex before and after.

“I had ample sexual experience, and I was quite happy as an intact mate,” says Nick Thomas, who was circumcised on advice of his doctor at age 26. “After that circumcision, that pleasure was utterly gone. On a scale of 10, the uncircumcised penis experiences pleasure of at least 11 or 12; the circumcised penis is lucky to get to 3. If men who were circumcised at birth knew the loss of pleasure they would experience, they would storm the hospitals and not permit their sons to undergo this.”

Douglas MacArthur, a 55-year-old knotchuck from Pennsylvania who was also circumcised as an adult, reports similar problems. “Sex before circumcision was like driving a luxury car with automatic transmission,” he explains. “I used to just glide along. Sex now is like driving a tiny, powerless compact with a manual transmission. It takes a lot of work to get anywhere. My penis has lost 90 percent of its sensitivity.”

Only in the last decade have scientists devoted in-depth studies to the structure and function of the foreskin. The foreskin is a complex, two-layer organ similar to the eyelid; it’s designed to protect the head of the penis from abrasion and infection. Its surface represents 30 percent of all penis skin, and folds around the opening of the penis. Its inside surface is composed of a soft mucosa that secretes antibacterial and antiviral lubricants called reugua, which further protect the glans from friction and infection. Because the glans is sheathed in this moist envelope, it retains its sensitivity. During sex, the foreskin glides along the penis shaft, providing lubrication and stimulation.

One spouse of her uncircumcised husband: “There’s a big industry in this country selling lubricants and jellys to enhance sex, but they’re unnecessary for those of us lucky enough to have married an uncircumcised man. An intact man’s glans is naturally moist and juicy.”

Another over his legs, and a third, with a small hole in the middle, over his genius. He pops the tiny penis through the hole. The baby is still crying. The nurse men- tors that babies feel safest in the fetal position. She says they hate having their arms held away from their bodies. The parents are not in the room. The nurse shuts the door.

Outside of the Jewish community, where it’s a religious rite, circumcision was practically unheard of in America until 1870, when Lewis Sayre, M.D., claimed to have cured a 5-year-old boy of paralysis by stretching out his foreskin and snipping it off. For the next two decades, Dr. Sayre and his associates created a sensation, claiming it could cure hip-joint disease, epilepsy, herma, convulsions, elephantiasis, poor eyesight, tuberculosis, and rectal prolapse, among other things. This was all disproved, of course, and circumcision would probably have vanished from the American medical scene had its backers not found a compelling new way to sell it: as a cure for masturbation.

To the publicly puritanical but privately lascivious Victorians, masturbation was the root of numerous social maladies and physical illnesses, including blindness and even insanity. Naturally, they believed, if circumcision could prevent masturbation, it would prevent other diseases as well.

Doctors of the time reported that “removal of the protective covering of the glans tends to dull the sensibility” of the penis and “thereby diminishes sexual appetite.” In 1888, John Harvey Kellogg, M.D., of cereals fame, summed up the medical profession’s opinion and gave justification for the next 60 years of foreskin removal. “A remedy for mastur- bation which is almost always successful in small boys is circumcision. The opera- tion should be performed by a surgeon without administering an anesthetic, as the pain attending the operation will have a salutary effect upon the mind.”

The doctor snaps the scalpel blade onto the handle, then places it beside the baby. Lifting the hemostat, which resembles a sharp-tipped pair of piers, he begins. Holding the penis in one hand, he moves the point of the hemostat through the hole at the end of the foreskin. The foreskin is tightly attached to the glans, like a fingernail to a finger. The doctor begins pushing the point between the foreskin and glans. The operation is similar to running a razor blade under the fingernail. The baby buckles on the plastic form, in obvious pain.

By the end of World War II it was clear that circumcision was not stopping men from masturbating; but, by then, the procedure was institutionalized. It had become the norm for white, middle-class American men. The uncircumcised were often recent immigrants or African-Americans. Probably as a result of racial prejudice, the uncircumcised penis was viewed as unhygienic and unclean.

But this, too, turns out to be false. “The uncircumcised penis is self- cleaning,” explains Robert Van Howe, M.D., a pediatrician from Wisconsin who has been studying the causes of circumcision for 20 years. “Every time you urinate, you flush out the preputial cavity. The hygiene issue was just another excuse. Since its inception, circumcision has been a surgery looking for a rationale. First it was disease, then masturbation, then hygiene; now it’s back to disease.” In 1971 the American Academy of Pediatrics (AAP) stated that circumcision was medically unnecessary. At the time more than 80 percent of American baby boys were circumcised. Then in 1989, the AAP released a new position paper that equivocated: “Newborn cir- cumcision has potential medical bene- fits, as well as disadvantages and risks.”

Still, by the following year, the rate was down to 59 percent.

Dr. Schoen chaired the AAP task force that made that reversal. He still stands by the position, claiming that the foreskin is the genital equivalent of the appendix, and that newborn circumcision is “a preventive health measure analogous to immunization.”

“The most important health benefit of circumcision is the decreased risk of