



Older Child, Adolescent, Adult Circumcision & Penile Frenulectomy

Patient Information

CLINICS
Pollock

No-Scalpel No-Needle Vasectomy
Circumcision For All Ages
Penile Frenulectomy
Erectile Dysfunction
Peyronie's Disease
Premature Ejaculation
Testosterone Assessment
Penile Enlargement
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Pollock^{CLINICS}



A GENTLE PROCEDURES CLINIC™

*Minds that innovate. Hands that heal. Hearts that care.
No matter what your needs are, we're in this together.*

Circumcision

New Information About Health Benefits

Male babies are born with skin covering the end of the penis, called the foreskin. Circumcision is a procedure in which the foreskin is removed, exposing the tip of the penis. Circumcision is often performed on healthy babies within the first few days after birth.

Circumcision has often been a controversial issue that places parents in the position of balancing personal, cultural, and health issues when deciding whether to circumcise a son. In the past, medical evidence was insufficient to fully support circumcision's health benefits. More research has provided increasing evidence for health benefits of circumcision. An article in this month's issue of the *Archives* reviews studies evaluating male circumcision and sexually transmitted diseases. These studies found the following with regard to circumcision:

- Human immunodeficiency virus (HIV) was reduced by 53% to 60%.
- Herpes simplex virus type 2 (HSV-2) was reduced by 28% to 34%.
- Human papillomavirus (HPV) was reduced by 32% to 35%.
- Among female partners of circumcised men, bacterial vaginosis was reduced by 40% and *Trichomonas vaginalis* infection was reduced by 48%.

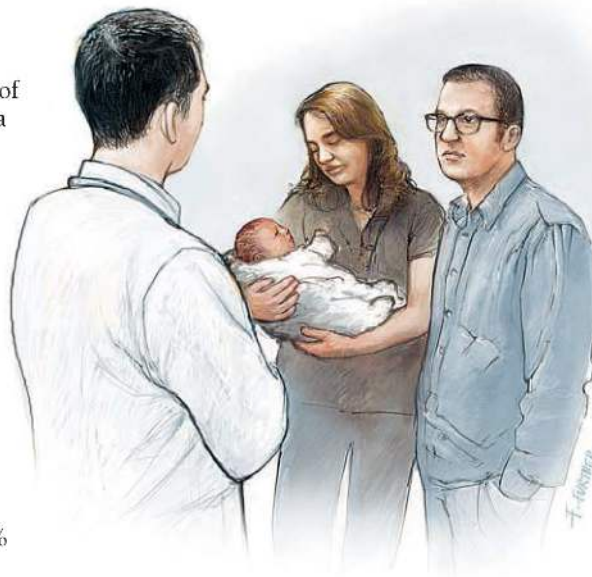
As many of these studies were done in developing countries, it is possible that the protective effects of circumcision may be lower in the United States. Additional health benefits of circumcision include the following:

- Lower risk of getting cancer of the penis, a rare type of cancer.
- Lower risk of urinary tract infections during the first year of life. Urinary tract infections during the first year of life can be serious and may lead to hospitalization. An uncircumcised baby boy has a 1 in 100 chance of getting a urinary tract infection during the first year of life, compared with a 1 in 1000 chance for a circumcised baby boy.
- Prevention of foreskin infections.
- Prevention of phimosis, a painful condition in which the foreskin retracts. Circumcised males do not get this condition.
- Easier genital hygiene.

Like any medical procedure, circumcision is not without risks, although complications are rare and usually minor. These complications may include bleeding, infection, improper healing, or cutting the foreskin too long or too short.

Some families decide not to circumcise their sons. Some families are concerned that the foreskin is needed for identity reasons, sexual pleasure reasons, or other reasons linked to family, culture, religion, or tradition. Circumcision is also an important part of some religions.

Parents can learn about potential risks and benefits of circumcision from their physician. Particularly because the topic of circumcision can be linked to strong opinions, parents should be cautious in interpreting stories or information from unvalidated Internet sources. The ultimate decision regarding circumcision of a baby boy is the parents'. Parents should feel both informed and supported in this decision.



FOR MORE INFORMATION

American Academy of Pediatrics
http://www.aap.org/publiced/BR_Circumcision.htm

INFORM YOURSELF

To find this and other Advice for Patients articles, go to the Advice for Patients link on the *Archives of Pediatrics & Adolescent Medicine* Web site at <http://archpedi.ama-assn.org/>.

Source: Centers for Disease Control and Prevention,
<http://www.cdc.gov/hiv/resources/factsheets/circumcision.htm>

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PEDIATRICS

Circumcision Policy Statement

TASK FORCE ON CIRCUMCISION

PEDIATRICS Volume 130, Number 3, September 2012

abstract

Male circumcision is a common procedure, generally performed during the newborn period in the United States. In 2007, the American Academy of Pediatrics (AAP) formed a multidisciplinary task force of AAP members and other stakeholders to evaluate the recent evidence on male circumcision and update the Academy's 1999 recommendations in this area. **Evaluation of current evidence indicates that the health benefits of newborn male circumcision outweigh the risks** and that the procedure's benefits justify access to this procedure for families who choose it. Specific benefits identified included prevention of urinary tract infections, penile cancer, and transmission of some sexually transmitted infections, including HIV. The American College of Obstetricians and Gynecologists has endorsed this statement. *Pediatrics* 2012;130:585–586

POLICY STATEMENT

Systematic evaluation of English-language peer-reviewed literature from 1995 through 2010 indicates that **preventive health benefits of elective circumcision of male newborns outweigh the risks of the procedure. Benefits include significant reductions in the risk of urinary tract infection in the first year of life and, subsequently, in the risk of heterosexual acquisition of HIV and the transmission of other sexually transmitted infections.**

The procedure is well tolerated when performed by trained professionals under sterile conditions with appropriate pain management. Complications are infrequent; most are minor, and severe complications are rare. Male circumcision performed during the newborn period has considerably lower complication rates than when performed later in life.

Although health benefits are not great enough to recommend routine circumcision for all male newborns, the benefits of circumcision are sufficient to justify access to this procedure for families choosing it and to warrant third-party payment for circumcision of male newborns. **It is important that clinicians routinely inform parents of the health benefits and risks of male newborn circumcision in an unbiased and accurate manner.**

Parents ultimately should decide whether circumcision is in the best interests of their male child. They will need to weigh medical information in the context of their own religious, ethical, and cultural beliefs and practices. The medical benefits alone may not outweigh these other considerations for individual families.

The American College of Obstetricians and Gynecologists has endorsed this statement.



TASK FORCE ON CIRCUMCISION

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**Key points bolded and underlined by
Dr. Pollock for your ease of reference.**



You are considering to have, or about to have, a circumcision or frenulectomy procedure. This booklet will give you the general information you need. Please read it with care, and we hope that you find it to be a useful reference before and after your procedure.

*** IMPORTANT :** If your doctor gives you different advice from what has been provided in this booklet, please follow the specific directions you receive.



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Welcome

Welcome to Pollock Clinics! We thank you for your trust. Our mission is to make world-class expertise available to residents of British Columbia. For over 25 years we have made it a priority to strive to achieve the highest standards of patient care.

About Us

Our clinics deliver a focused set of therapies and surgical procedures. With highly experienced physicians and two convenient clinic locations (in New Westminster and Vancouver), we are able to provide you with the care you need within just days of calling our clinic. For added convenience, we offer online booking for fast service, and to allow booking when most suitable for patients.

Our team of dedicated physicians and staff take pride providing personalized services and individualized care; we offer 24/7 aftercare and support before and after all procedures.

Our Procedures

Pollock Clinics is BC's largest provider of no-scalpel no-needle vasectomy and circumcision for babies, boys, and men of all ages. We also offer treatment for erectile dysfunction as well as penile frenuloplasty and frenulectomy, and circumcision revision.

Our Doctors

Dr. Neil Pollock, MD

Neil Pollock, MD is the founder of Pollock Clinics and has over 20 years of clinical and research experience in vasectomy and circumcision. He has developed and pioneered the Pollock Technique™ for circumcision. Numerous articles have been written about Dr. Pollock in local and national publications and he is an invited guest lecturer and surgical instructor at many hospitals and conferences in Vancouver and throughout the world, including Haiti, Turkey, China, Rwanda, and the US.

Dr. Pollock is a Clinical Instructor with the University of British Columbia Faculty of Medicine. He enjoys teaching medical students and visiting physicians, who travel from around the world to Vancouver to work specifically with him to learn his unique and highly respected surgical techniques.

Dr. Jack Chang, MD

Jack Chang, MD, is a graduate of Yale University and the University of British Columbia Medical School. After completing his postgraduate training in Prince George, BC, he started his career serving rural and remote communities in BC, Yukon, and Nunavut before joining Pollock Clinics in 2014.

Dr. Chang studied under some of the most renowned vasectomy physicians in North America. Along with Dr. Pollock they are among the most experienced providers in the world. Dr. Chang is a veteran of multiple No-Scalpel Vasectomy International medical missions, providing free vasectomies in developing countries such as Haiti, Kenya, and the Philippines to alleviate poverty through family planning, and trains international physicians from around the world in both developed and underdeveloped nations.

He is a Clinical Instructor at the University of British Columbia Faculty of Medicine and is actively involved in teaching medical students and residents.



About Circumcision Getting Started

What Is Circumcision?

Circumcision is a simple procedure in which the foreskin that sheathes the head of the penis is removed. Since foreskin traps bacteria and other infectious agents, its removal may improve genital hygiene and reduce risk of disease over the lifetime of the boy and his future sexual partners.

In 2012, the American Academy of Pediatrics issued a statement that the health benefits of circumcision outweighed the risks. The Canadian Pediatrics Society acknowledges the potential benefits of circumcision but stops short of routine recommendation for newborns. Thus, circumcision for your son is a personal decision that you must make with your partner after weighing the benefits and risks and often involves religious or cultural preferences as well.

In the case of an adult circumcision, it is a personal decision based on personal, cosmetic or health reasons.

What Is The Ideal Age For Circumcision?

The ideal age for infant circumcision is within the first two weeks of life, and at our clinic we provide circumcision for males of all ages including older children, adolescents, and adults.

What Are The Potential Benefits Of Circumcision?

1. **Improved hygiene** – It is well known that microorganisms accumulate under the foreskin which fosters inflammation which can lead to conditions such as balanitis/balanoposthitis (inflammation of the head of the penis). The incidence of balanitis is twice as high as those who are uncircumcised. Smegma, which is a cheesy like secretion, can also accumulate under the foreskin combining with bacteria to produce an offensive odor.
2. **Reduced risk of urinary tract and bladder infections** – Because microorganisms can accumulate under and adhere to the foreskin, bacteria has a greater chance of migrating up the urethra causing urinary tract infections (UTIs) especially in infancy. Studies suggest an over 10-fold decrease in risk of urinary tract infection in circumcised infants. UTIs are a potentially painful and dangerous condition as it can result in kidney inflammation and scarring. Studies suggest that the protective effect of circumcision against UTIs when done as a newborn continues into adulthood.

3. **Eliminates risk of phimosis** – Phimosis is a condition where the foreskin becomes so tight that it cannot be pulled back fully, resulting in UTIs, local skin infection, pain when passing urine, retention of urine, kidney stones, and sexual dysfunction. Circumcision eliminates the risk of phimosis, which affects 1 in 20 older boys and men.
4. **Reduced risk of penile cancer** – Studies have shown an over 20-fold reduction in the risk of invasive penile cancer which is thought to arise from adherence of high-risk human papillomavirus to the foreskin and smegma causing chronic inflammation and recurrent infections resulting in phimosis. Invasive penile carcinoma is highly associated with a history of phimosis.
5. **Reduced risk of prostate cancer** – Some studies show that uncircumcised men may have a higher incident of prostate cancer.
6. **Reduced risk of sexually transmitted diseases** – This is because viruses enter through the inner lining of the foreskin which is thin and vulnerable. Ulceration and tearing of the foreskin are not uncommon in uncircumcised men, adding to the risk of virus entry. The following diseases are all reduced by circumcision:
 - Human immunodeficiency virus (HIV) is reduced by 53% to 60%.
 - Herpes simplex virus type 2 (HSV-2) is reduced by 28% to 34%.
 - Human papillomavirus (HPV) is reduced by 32% to 35%.
 - Among female partners of circumcised men, bacterial vaginosis is reduced by 40% and Trichomonas vaginalis infection is reduced by 48%.
7. **Reduced cervical cancer in women** – Circumcision reduces the risk of cervical cancer of a man's female partner by 5.6 times as there is less risk of adherence and colonization of human papillomavirus in circumcised men, which is a recognized cause of cervical cancer in women and venereal warts in both sexes.

What Are The Risks Of Circumcision?

1. **Bleeding** – In 1 in 500 circumcision there may be some bleeding that is usually stopped with pressure or less commonly with stitches. If a bleeding disorder such as hemophilia, then our doctors will need advice from a pediatric hematologist prior to proceeding.
2. **Infection** – There is always a possibility that there could be a generalized infection requiring antibiotics after the surgery (1/4000). Serious infections are rare (1/5000).
3. **Concealed penis** – When there is a generous amount of fat around the penis (pubic fat), the penis may retract inward becoming buried, leading to a trapped penis that would require medical intervention to release it (1/800).
4. **Meatal stenosis** – This is a narrowing of the urethra that may occur after the procedure requiring medical intervention (1/1000).
5. **Trauma** resulting in permanent damage to the head of the penis (never in our practice)
6. **Suboptimal cosmetic result** (1/500)
7. **More serious complications** including death (never in our practice).

Do I Need a Physician Referral In Order To Book An Appointment?

No. If you are booking for your son, it is a parental decision and we only require consent from both parents to proceed. You can book online directly, or give us a call with your questions.

If you are an adult planning circumcision for yourself, you may book online or call us for an appointment, as no referral is required.

Circumcision For Older Children, Adolescents And Adults

There are a number of reasons why men and older boys may choose a circumcision procedure including improved personal hygiene, cosmetic reasons or other personal reasons.

Features of our older boy and adult circumcision procedure include local anaesthetic, quick surgical technique, and skin glue closure. No hospital visit or doctor's referral is required, and all procedures are done here in our Vancouver clinic locations.

We are also often asked; "Am I too old to get circumcised?" and the answer is almost invariably "no". Men and youth of all ages can have the surgery in our clinic. The most common age range for adult circumcision is 20 – 40 years old, but the procedure is regularly performed on a larger age range as requested for medical and personal reasons. The medical team at Pollock Clinics is experienced at circumcising men of all ages.

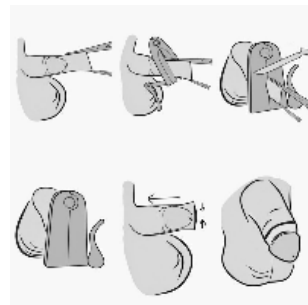
The Older Child, Adolescent, And Adult Circumcision Process – Two Methods

Our team and our internal procedures are optimized to deliver care to men requiring circumcision. We perform two methods of circumcision at Pollock Clinics – Mogen clamp circumcision using the Pollock Technique™ and Shang Ring Circumcision. Both provide equally good cosmetic results.

With either method, you will receive detailed written instructions for post-surgery care as well as consult one-on-one with the doctor. Healing times are relatively the same. Our doctors will determine which procedure will be best for you. Our team is available after surgery as required to answer your questions and to react quickly should there ever be any problems.

Pollock Technique™ Circumcision

This method uses a combination of local anesthetic and quick surgical technique, with the Mogen clamp and use of skin glue. With the skin glue closure method, we have been able to obtain improved cosmetic outcomes without suture track marks in the mucosa and skin. In addition, glue closure is faster than sutures.



Shang Ring Circumcision

Shang Ring is quick, virtually painless and bloodless procedure also providing a sutureless circumcision without track marks. This method was developed in China through the backing of the Bill and Melinda Gates Foundation.

Our doctors have traveled to China to train in this technique and are the first Canadian doctors that we know of to offer this in North America. Conveniently, dressing changes are not needed with the Shang Ring – and no skin glue is required.

The Shang Ring consists of two concentric medical grade plastic rings: an inner ring with a silicone band and an outer, hinged ring that acts as a ligature. The Shang Ring is removed after one week. The advantages of the Shang Ring procedure may be benefits in your case, or our doctor's may recommend Pollock Technique™ circumcision. In either case your procedure will be performed by an experienced doctor with a close follow-up post procedure.



Pre-Operative Instructions For Adult Circumcision

For Both Shang Ring And Pollock Technique™ Procedures

1. Do not take Aspirin or anticoagulants (warfarin) for one week prior to your procedure. Non-steroidal anti-inflammatory drugs (NSAIDs) such as Ibuprofen, Motrin, Aleve, Advil, Ibuprofen, Naproxen, or Diclofenac must not be taken in the 48 hours prior to your procedure.
2. Two business days prior to your appointment, please call our office to confirm your circumcision at 604-717-6210.
3. Please avoid any alcohol 2 days before and after the procedure.
4. Please shave your pubic hair the day before the procedure as best as you can to save time.
5. On the day of your surgery eat before your procedure (a normal breakfast or lunch) as those who don't are more likely to become lightheaded.
6. Please take a shower with soap and water the day of your procedure.
7. Please arrive 15 minutes before for your appointment. You may drive yourself to and from the clinic after your procedure, although you may choose to have a driver if that makes you more comfortable, especially if you have a history of easily fainting.
8. Wear light clothing because it will be warm in the room and wear clothes you won't mind getting some iodine on.
9. When you are in one of the surgical rooms, you will not be required to fully undress; you just need to lower your pants, lie back on the table and relax.
10. You are now ready for your circumcision.
11. You are welcome to bring and listen to any music/podcast or watch any programming or play any games on your mobile device during the procedure.
12. If you have any questions, feel free to discuss with the doctor during your procedure.

Post Operative Instructions For Adult Circumcision

For Pollock Technique™ (Mogen Clamp) Procedures Only

1. For the first 24 hours, you will go home with a bandage wrapped around your penis. Do not try to re-wrap it in the first 24 hours. You will see the physician the next 1 – 2 days to ensure there is no major swelling that requires re-bandaging.
2. On post op day 2, we will remove your bandage and re-wrap the penis.
3. For two weeks after your procedure you need to apply the dressing yourself twice a day. First take the gauze with the hole in the middle and apply Vaseline around the hole and apply it to the penis. The penis goes through the hole. Then take the coban tape (brown dressing) to wrap the gauze around the penis.
4. You may shower the next day as long as your penis is covered with plastic or a waterproof covering, unless a physician indicates otherwise. Make sure the harsh stream of the shower does not hit your penis. You may take a regular shower after one week.
5. Do not go swimming in a lake or public pool until you are completely healed which is usually around 5-6 weeks.

6. Do not take part in any intensive activities.
7. Do not have sex (or masturbate) until you are completely healed (around 6 weeks).
8. Try not to allow your penis to dangle freely. Tightly fitted briefs are recommended to keep the penis upright.
9. In the event that you experience mild pain (including during an erection), especially in the first few days after the circumcision, over-the-counter pain medications such as acetaminophen or ibuprofen can be used for pain relief. We generally advise acetaminophen 1000 mg plus ibuprofen 400 mg 3 times a day for 5 days. If the pain is excessive, contact our office for further advice.
10. Five to seven days after your circumcision, you will return to the office for another follow up, then every two weeks thereafter.
11. A distended bladder often triggers erections. To avoid nocturnal erections, minimize fluid intake after 6pm and urinate before going to bed. You may want to set a time in the middle of the night to urinate. Applying ice is often helpful to reduce any nocturnal erections that occur.

Post Operative Instructions For Shang Ring Only

1. When you are back at home, rest until you have gotten used to having the Shang Ring in place.
2. Do not try to remove or re-position the Shang Ring yourself.
3. Keep the circumcised area clean and dry. This will promote proper healing. When you urinate, use tissue to dab the final few drops from the penis afterwards to prevent urine from seeping into the circumcision area, which might result in infection.
4. After the day of circumcision, you may shower as long as you carefully dry the penis and Shang Ring afterward. Do not go swimming or wash in a bathtub.
5. Do not take part in any intensive activities to avoid dislocating the ring. If you sweat heavily, be sure to clean and dry your body immediately, to keep the wound from becoming infected, which would delay healing.
6. **Do not have sex (or masturbate) while the Shang Ring is in place.**
7. Try not to allow your penis to dangle freely. Tightly fitted briefs are recommended to keep the penis from drooping downward and to keep the ring in place and avoid skin abrasion.
8. In the event that you experience mild pain (including during an erection), especially in the first few days after the circumcision, over-the-counter pain medications such as acetaminophen or ibuprofen can be used for pain relief. We generally advise acetaminophen 1000 mg plus ibuprofen 400 mg 3 times a day for 5 days. If the pain is excessive, contact our office for further advice.
9. You may experience slight swelling around the Shang Ring. This is normal, so long as it does not cause you too much discomfort. You can apply ice to your penis to reduce swelling.
10. Five to seven days after your circumcision, you will return to the office to have the Shang Ring removed. **Please take a 15-minute bath the day of your scheduled removal to help make it easier to remove.** Do not try to remove the Shang Ring yourself or re-position the ring.
11. A distended bladder often triggers erections. To avoid nocturnal erections, minimize fluid intake after 6pm and urinate before going to bed. You may want to set a time in the middle of the night to urinate. Applying ice or taking a cold shower is often helpful to reduce any nocturnal erections that occur.
12. After the Shang Ring is removed, do not shower for 2 days. Starting on day 3, shower and replace the bandage daily over the wound for 14 days (gauze with hole and Vaseline around it).
13. The wound will look “open”. This is normal. There will be white and yellow discharge that looks like “pus”. This is also normal.
14. No sex or masturbation for another 4 weeks.

About Penile Frenulectomy Getting Started

What Is Penile Frenulectomy?

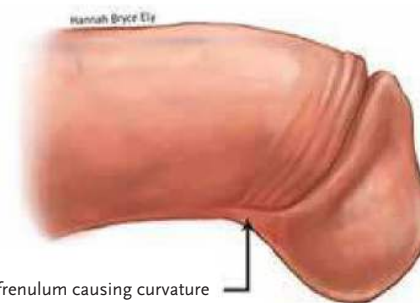
Penile frenulectomy and frenuloplasty are procedures that can alleviate the pain associated with a tight band of tissue connecting the glans to the shaft of the penis on its underside. When the frenulum is tight or short this is called a frenulum breve. A tight frenulum can exist in both circumcised and uncircumcised men and can create a restriction that is susceptible to micro-trauma, causing bleeding and painful erections.

The procedure involves the removal of the restricting tissue for increased range of motion in the penile skin and enhanced sexual enjoyment. At Pollock Clinics, the procedure (done in under 20 minutes) is performed using a long-acting local anesthetic and generally results in relief with a very brief recovery period.

Tight Frenulum – A Cause Of Penile Pain And Bleeding During Sex

The frenulum of the penis is a band of tissue located underneath the penis. When the frenulum is tight or short, this is called a frenulum breve. This can result in tension on the frenulum during erections, which can rip and tear during vigorous activities such as sex, causing pain and bleeding which in turn causes many men to lose their erections.

Some men go through their entire lives suffering from pain and bleeding unaware that there is a cure. The degree of tightness and thickness of the frenulum varies from men to men.



Tight frenulum causing curvature with erections

© 2014 New York Urology Specialists

A Tight Frenulum May Cause Premature Ejaculation

Premature ejaculation is uncontrolled ejaculation either before or shortly after sexual penetration. It happens with minimal sexual stimulation and before the person wishes. It may result in unsatisfactory sex for both partners. This can increase the anxiety that may add to the problem. It is one of the most common forms of male sexual dysfunction. Between 30% and 70% of men have PE. While it is more common in younger men, it can happen at any age.

Having an orgasm too soon is not always cause for concern. However, clinical diagnosis is made when a man exhibits the following symptoms:

- Ejaculation occurs too quickly, often in the first few minutes of intercourse, or in other sexual situations, even during masturbation
- Inability to delay ejaculation most of the time
- Feelings of anxiety, or avoidance of sexual intimacy as a result

Both psychological and biological factors can play a role in premature ejaculation. Although many men feel embarrassed talking about it, premature ejaculation is a common and treatable condition.

Premature ejaculation can be classified as:

- **Lifelong (primary).** Lifelong premature ejaculation occurs all or nearly all of the time beginning with your first sexual encounters.
- **Acquired (secondary).** Acquired premature ejaculation develops after you've had previous sexual experiences without ejaculatory problems.

Some studies report that a short frenulum is found in up to 43% of individuals affected by premature ejaculation. It is thought that the frenulum plays an important role in penile erection and when frenulum tension exceeds a certain limit, orgasm and ejaculation may be accelerated. When the frenulum is lengthened, penile tension and sensitivity may be decreased.

Penile frenulectomy has been shown to be effective in some but not in all cases of premature ejaculation.

Our Approach

Dr. Pollock has developed a minimally invasive technique that he teaches to doctors around the world.

Regardless of your anatomy, our goal is to provide the optimal aesthetic and functional result. With Dr. Pollock's technique, there is minimal down time and complete healing usually occurs within 6 weeks. Procedures are performed under long lasting local anaesthetic.

Common Questions

Can The Problems Associated With a Short Frenulum Get Better By Themselves?

No, unfortunately a short frenulum generally does not get better on its own. Sometimes stretching exercises are suggested, but the frenulum is a rather tough tissue that is not easily stretched. A frenulectomy is usually necessary to release the tight band of tissue creating painful downward traction on the glans.

Is a Frenulectomy Painful?

We perform frenulectomy under long-acting local anesthesia and those men who have undergone this procedure usually describe it as virtually painless.

What Are The Potential Risks Of The Procedure?

- Swelling and bruising at the site of the procedure 1/100
- Infection requiring antibiotics 1/500
- Bleeding (usually mild) 1/100
- Scarring at the site of the operation 1/100
- Meatal stenosis due to injury to the frenular artery requiring a meatotomy (rare) 1/500
- Suboptimal cosmetic or functional effect requiring a second procedure. 1:100
- Chronic pain at the site of the surgery 1:500
- Vasovagal reaction causing light-headedness after the procedure. 1/200

How Long Does It Take To Recover?

Recovery from penile frenulectomy is relatively quick and painless. Most men do not require additional pain medications after the procedure and are able to return to office work the next day. If your work requires heavy or physical activity, you will need a few days off.

After frenulectomy, when can I have sex again?

We generally recommend no sex for at least 5-6 weeks to allow the surgical site to heal optimally and sutures, if required at the time of the procedure, to dissolve.

How Will This Affect My Sex Life?

After a frenulectomy, because the tight band is released, sex becomes more pleasurable due to less pain and worry from tearing and bleeding.

If I Am Uncircumcised, How Will Frenulectomy Affect My Foreskin?

Frenulectomy does not affect your foreskin and you will remain uncircumcised. Because frenulectomy only involves releasing the tight band of tissue underneath the penis where it attaches to your foreskin, your foreskin will be preserved. If you are interested in circumcision, please refer to our website for more information.

Pre-Operative Instructions for Penile Frenulectomy

1. Do not take Aspirin or anticoagulants (warfarin) for one week prior to your procedure. Non-steroidal anti-inflammatory drugs (NSAIDs) such as Ibuprofen, Motrin, Aleve, Advil, Ibuprofen, Naproxen, or Diclofenac must not be taken in the 48 hours prior to your procedure.
2. Two business days prior to your appointment, please call our office to confirm your procedure at 604-717-6210.
3. Please avoid alcohol 48 hours before and after the procedure.
4. Please shave your pubic hair the day before the procedure as best as you can to save time.
5. On the day of your surgery eat before your procedure (a normal breakfast or lunch) as those who don't are more likely to become lightheaded.
6. Please take a shower with soap and water the day of your procedure.

7. Please arrive 15 minutes before for your appointment. You may drive yourself to and from the clinic after your procedure, although you may choose to have a driver if that makes you more comfortable, especially if you have a history of easily fainting.
8. Wear light clothing because it will be warm in the room and wear clothes you won't mind getting some iodine on.
9. When you are in one of the surgical rooms, you will not be required to fully undress; you just need to lower your pants, lie back on the table and relax.
10. You are now ready for your frenulectomy.
11. You are welcome to bring and listen to any music/podcast or watch any programming or play any games on your mobile device during the procedure.
12. If you have any questions, feel free to discuss with the doctor during your procedure.

Post Operative Instructions for Penile Frenulectomy

1. Most men do not require any additional pain medication after the procedure, but you may take acetaminophen 1000 mg plus ibuprofen 400 mg 3 times a day for 5 days for optimal pain control.
2. There may be a small amount of bleeding at the surgical site. This is normal and will stop in a few days. If it does not, call our office or emergency number provided.
3. You may return to office work the next day, but your work requires a lot of activity you should take 2-3 days off.
4. If you are uncircumcised ensure that your foreskin is rolled over the head of your penis.
5. After one week, you will be advised to gently stretch the healing area for 30 seconds, twice a day for one week.
6. We recommend no sexual activity for about 5-6 weeks or until the sutures come out completely.

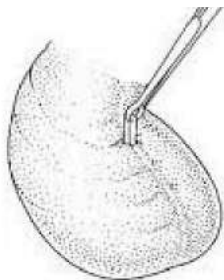
Learn More About No-Scalpel No-Needle Vasectomy

What Is a Vasectomy?

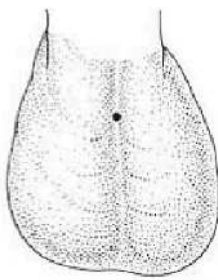
The testicles produce sperm that travel through a tube called the vas deferens. The vas deferens or “vas” continues to travel through the prostate before joining with the vas on the other side to become the urethra, which exits through the penis. The goal in a vasectomy is to block the right and left vas. After vasectomy, you will ejaculate semen without sperm. A man cannot make his partner pregnant without sperm!

What Is a No-Scalpel No-Needle Vasectomy?

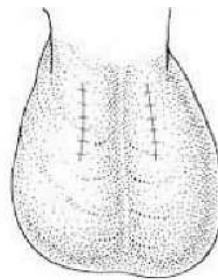
No-scalpel no-needle vasectomy is different from a conventional vasectomy in the way the doctor gets to the tubes, not in the way he blocks them. With the no-needle method the doctor makes one tiny puncture with a special instrument. The same instrument is used to gently stretch the opening so the tubes can be reached. Through this tiny opening both tubes are temporarily lifted out and then blocked, using heat cauterization.



No-Scalpel Vasectomy : Pulling out one of the two vas tubes



No-Scalpel Vasectomy : No stitches are needed to close the tiny opening



Conventional Vasectomy: Two moderate incisions stitched closed

When Is The Right Time For Vasectomy?

It is best to get a vasectomy when you and your partner are sure that you are happy with the number of children you have. If you have a child under six months of age, you might want to wait because of “Sudden Infant Death Syndrome (SIDS)”, a condition where a child can die after a few months of life for no apparent reason. This might possibly affect the timing of your plans for vasectomy.



Learn More About ED Treatment

Erectile dysfunction (ED) is a relatively common medical condition that affects about half of Canadian men between the ages of 40 and 70. Though all men may experience an occasional lapse of sexual function, ED is the persistent inability to achieve an erection, despite being sexually aroused. Erectile dysfunction is a potentially treatable medical condition that is not related to masculinity or sexual prowess.

At Pollock Clinics, we are dedicated to providing our patients with the latest solutions to erectile dysfunction.

Latest and Effective Treatment Options for Erectile Dysfunction

At Pollock Clinics we offer both physiological and psychological treatments for erectile dysfunction. Our options include :

Erectile Dysfunction Shockwave Therapy (EDSWT)

EDSWT uses low-intensity acoustic sound waves and is a non-invasive treatment that requires no drugs and offers long-term benefits. Shockwave therapy treats the underlying vascular cause of erectile dysfunction by improving the quantity and quality of blood vessels and blood flow to the penis, addressing the actual problem that is causing ED and not just the symptoms.

PRP Therapy – Platelet Rich Plasma Injections

Platelet Rich Plasma Injections, also known as PRP Shots, work by enhancing blood vessel regeneration and increasing the amount of blood flow to the penis. The treatment uses the patient's own blood, and platelet rich plasma is separated and injected into the penis.

Sex Therapy

Sexual issues are multi-dimensional, arising out of biological, psychological, behavioral and social factors. Counselling can enhance the efficacy of medical interventions.

Sex therapy is often helpful in the treatment of erectile dysfunction, even when physical factors are the principal cause. Sexual difficulties, no matter what the cause, can strain your relationship. Sex therapy, with our experienced, certified sex therapist, can help a couple overcome these feelings and re-establish intimacy.

B.C. doctor delivers unusual foreign aid to Haiti, teaching surgeons to perform safer circumcisions

In Neil Pollock's home province of British Columbia, a group called Foreskin Pride has actually held protests against circumcision, the procedure that has formed the heart of Dr. Pollock's medical career for 20 years. In the crumbling Caribbean nation of Haiti, the operation made him something of a hero.

Dr. Pollock spent a week in the country recently, delivering an unusual bit of foreign aid. In a place beset by violence, poverty and the aftermath of 2010's devastating earthquake, he trained surgeons to perform the almost-painless form of circumcision he has perfected.

It is hoped the operation will become a mainstay in the battle against the country's HIV epidemic, with evidence suggesting the penis-snipping can cut spread of the disease by 60%.

Meanwhile, Dr. Pollock earned a surprise visit in Port au Prince from Hollywood philanthropists Sean Penn and Charlize Theron, also now a couple, who watched as he taught his technique. Now he is in talks with Ms. Theron to deliver similar training in Kwa-Zulu-Natal province of her native South Africa, a place harder hit by HIV than almost anywhere in the world. "I felt having this knowledge and this technique, I have an obligation to share it with other doctors in other countries, where it could have such a meaningful impact," said Dr. Pollock.

Dr. Pollock dedicates his practice to circumcision and "no-scalpel, no-needle" vasectomies at his Vancouver clinic. Using special techniques to administer the local anesthetic and other modifications, he says he can now carry out a circumcision in about 30 seconds, almost painlessly.

"There wasn't a day that went by ... when I didn't think, 'How can I improve this, make it safer, minimize discomfort,'" he said. "When you focus all your energies on one or two surgeries, you have a lot of mind space to continue to innovate."

After research emerged that circumcision can significantly curb the spread of HIV — the mucosal surface of the foreskin can hasten uptake of the virus — he spent several days in Rwanda in 2009, training doctors there.

More recently, Jeff Klausner, a medical professor at the University of California at Los Angeles, discussed with contacts in Haiti the idea of bringing back the largely overlooked procedure there. Though HIV rates have fallen dramatically, the disease still afflicts about one in 50 Haitians, many of whom do not even know they are infected, said Dr. Klausner, a former CDC official in Africa.

He asked around for someone to teach the Haitian doctors. Everyone told him Dr. Pollock "had a reputation for being the best in the field and a great trainer."

Circumcision of small babies in Haiti makes particular sense, given the average age of first sexual intercourse for boys is about 13 and 2.5% of teenage sex partners contract the virus, said Jerry Bonhomme, one of the Haitian physicians Dr. Pollock trained.

"Within 12 years, most newborn males born today will be protected with circumcision, which has an impact similar to that of a vaccine," he said.

Dr. Pollock and his trainees managed to circumcise more than 100 babies. Now, Dr. Bonhomme will not only be able to apply the skills himself, but eventually teach others.

Excerpt from an article by TOM BLACKWELL
Sunday, March 15, 2015



Dr. Pollock lecturing surgeons in Haiti.



Charlize Theron and Sean Penn came to the teaching hospital in Haiti showing their support for Dr. Pollock's work.



A happy family after successful infant circumcision.

Pollock^{CLINICS}

No-Scalpel No-Needle Vasectomy
Circumcision For All Ages
Penile Frenulectomy
Erectile Dysfunction
Peyronie's Disease
Premature Ejaculation
Testosterone Assessment
Penile Enlargement
Hair Restoration

*Thank you for your interest in
Pollock Clinics for a circumcision
or penile frenulectomy procedure.*

www.pollockclinics.com

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