

1 February 2016

Ms Natasha Ryan  
Assistant Secretary  
Medical Specialist Services Branch  
Medical Benefits Division  
Department of Health  
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Dear Ms Ryan

The Royal Australian College of General Practitioners (RACGP) thanks the Department of Health for the invitation to provide comment on MBS item 30659 for male circumcision in patients over the age of ten performed by general practitioners (GPs).

Male circumcision in patients over the age of ten (using MBS item 30659) is not a procedure commonly undertaken by GPs and so we were also surprised by the numbers being performed. Evidence and paediatric guidelines suggests infancy is the optimal time for circumcision. Therefore, most male circumcision is performed on boys less than 10 years old utilising MBS item 30653.

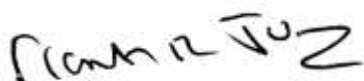
Because of the potential safety issues, in most instances, clinical best practice would involve referral to a qualified surgeon (such as an urologist) experienced in doing this procedure.

Feedback from some of our members suggests in males older than 10 years of age, circumcision would sometimes be utilised for religious reasons (Druze, Jews and Muslims) or because of a belief that it is more hygienic.

However, we suspect the procedure would mostly be done for anatomical or dermatological issues of the prepuce such as to fix phimosis or paraphimosis, frenulum issues or skin complaints such as erosive lichen planus, recurrent balanitis and or extensive warts. Adult male circumcision for these reasons would be entirely appropriate and medically necessary.

In regards to anaesthesia, we understand that available guidance often advises that local anaesthesia is appropriate for adults but we don't have a position on whether general or local anaesthesia is best practice.

Yours sincerely



Dr Frank R Jones  
President