Current Debate: Circumcision Decision

A Painful Case

Lisa Braver Moss

sk ten Jews a simple question, the A saying goes, and you'll get at least eleven answers. But ask the same ten what they think about circumcision and the choral response will be loud and clear: Jewish baby boys should be circumcised—period.

Indeed, Genesis 17 unequivocally states that we must circumcise our sons in order to fulfill Abraham's covenant with God. The uncircumcised Jew shall suffer the penalty of karet, which the rabbis understood to mean "excision at the hand of heaven from the community." Karet is also the punishment for such transgressions as idolatry, incest, adultery, and the desecration of the Sabbath. According to the Talmud (Shabbat 137b) the very existence of heaven and earth depends on brit milah (the covenant of circumcision).

But most of us these days don't follow Halakha to the letter. Why do we strictly observe this one commandment while ignoring so many others? Probably because medicine, tradition, aesthetics, and psychology influence our decision to circumcise our sons. Very few of us practice brit milah solely to obey God's commandment.

Judaism requires that commandments be fulfilled with genuine spiritual intent, and brit milah is no exception. In his Guide for the Perplexed, Moses Maimonides says that one's decision to circumcise the male child should be based on faith alone. Yet one mohel estimates that only 10 percent of his clients request his services for purely religious reasons. (This doesn't take into account the large number of Jewish circumcisions done by physicians.) Given the gravity of the circumcision commandment and the overwhelming lack of commitment to the command-

ments on the part of most contemporary Jews, it makes sense to counter the pro-circumcision chorus and question our attitudes toward brit milah as Jews have practiced it through the ages.

The issue at hand is pain—pain, and what it means to be Jewish. I think it's safe to say that, deep into their eighth-day ritual festivities, most Jewish parents have their pride and sense of solidarity with tradition interrupted by the nagging question: "Why are we doing this?" Our tradition strictly forbids us from causing tza-ar ba'alei khayyim, pain to living things. The Encyclopedia Judaica points out that "even the necessary inflicting of pain is frowned upon as 'cruel'" in both halakhic and ethical rabbinic literature. Many of us have resolved the conflict between this Jewish principle and brit milah by believing that infants don't feel pain when they are circumcised.

The notion that infants don't feel pain has been an accepted medical view for hundreds of years. In the thirteenth century, Maimonides, a physician as well as a rabbi, wrote in regard to circumcision that "a child does not suffer as much pain as a grown-up man because his membrane is still soft and his imagination weak." As recently as the 1980s, premature infants were still undergoing major surgery with no anesthesia at some well-known U.S. hospitals.

But in September 1987, largely in response to lawsuits filed by parents whose infants had undergone surgery without anesthesia, the American Academy of Pediatrics (AAP) published a formal statement challenging the assumption that infants differ from adults in their ability to feel pain. The statement recommends that anesthesia be used on every infant undergoing surgery, unless the infant is high-risk or "potentially unstable." According to

Nance Cunningham Butler, an ethicist with Yale University's Program for Humanities in Medicine, safe anesthetic agents are available for use on infants in most situations; infants demonstrate the same responses to injury that adults do; and even premature infants have the physical capacity for memory and may suffer both short-term and long-term negative effects of early painful experiences. The AAP statement concludes:

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The decision to withhold [anesthesial should be based on the same medical criteria used for older patients. The decision should not be based solely on the infant's age or perceived degree of cortical maturity.

ocal anesthesia has been available for infant circumcisions since the 1970s. The dorsal penile nerve block, consisting of an injection of lidocaine at each side of the root of the penis, has been shown in medical studies to be a relatively safe and effective anesthetic agent for newborn circumcision. Although research about this procedure is still limited, the nerve block has been shown to reduce crying as well as changes in heart rate and blood pressure for most infants during circumcision. Infants who are given the nerve block also exhibit less behavioral distress during the twenty-four hours following the surgery.

One would think that the availability of the nerve block would be of great interest to the Jewish community. On the contrary, despite the fact that local anesthesia for circumcision is halakhically permissible, almost all Jewish circumcisions are still being

done without it.

I have found it nearly as hard to generate a dialogue about anesthesia in the Jewish community as to question the practice of brit milah itself. And

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while I have managed to stir some interest in the subject among Jewish peers and leaders, pain relief is still seen largely as a nonissue. Bringing up the topic usually elicits responses ranging from the lighthearted and dismissive ("The anesthesia might go to better use on me than on the infant") to the defensive ("I was circumcised without anesthesia and it certainly didn't do me any harm"). I sense an underlying anxiety that, if we acknowledge infants' pain and discuss anesthesia, we may call the entire ritual into question. And that's taboo.

But suppose we found, after an evaluation of the pain that the ritual entails, that a Jewish argument against circumcision could be made. Judaism would not fall apart. The beauty of Halakha is that it has the capacity to recognize and integrate advances in empirical knowledge. Beyond this, the fact re-

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mains that most Jews feel themselves bound less by Halakha than by a vaguely defined commitment to be "ethical." But if my own experience is any indication, re-evaluating the ritual may actually strengthen Judaism; I am a far more committed Jew now than I was before I began to question brit milah.

et's look at some common Jewish misconceptions about circumcision and pain:

· Lack of crying indicates lack of pain. It is often said that many infants don't even cry during circumcision. The medical explanation for this phenomenon is that these babies are experiencing neurogenic shock, that is, withdrawing into a state of diminished responsiveness in reaction to sudden, massive pain. It is ironic that the absence of crying is used as evidence that circumcision doesn't hurt.

· History makes right. It is also said that since circumcision has been practiced without anesthesia for thousands of years, it must be OK. Few of us today would use this reasoning to condone slavery, child abuse, or even the subordinate role of women throughout

most of Jewish history. · It's the restraint, not the surgery. Some say that infants are upset because they are held down, not because of the surgery itself. This is pure conjecture, but even if it could be proved, I fail to see how such a distinction justifies the withholding of anesthesia.

Jewish men often point out that they were circumcised without anesthesia and they turned out fine. I suggest we cannot establish whether or not they turned out fine. We do not have a control group (an identical uncircumcised group to use for comparison).

· Pain is part of life. Some concede that the infant feels pain, but maintain that pain is part of life. Unfortunately, the infant will discover this soon enough even without circumcision. In any case, though pain is undeniably part of life, Halakha does not mandate pain as part of the circumcision.

· Anesthesia is risky. Some people confuse the risks of general anesthesia with the much smaller risks of local anesthesia. Though research on the subject is limited, complications due to the nerve block appear to be extremely rare.

· Circumcision is over so quickly, it would be silly to give an anesthetic. Many are unaware of the painful procedure the baby must undergo in addition to the cutting off of the foreskin. The mobel or physician must sever the membrane between the baby's foreskin and his glans, either by inserting a blade or probe all around the glans or by retracting the foreskin very hard. This procedure may well be as painful as the actual cutting. Some mobels do this manipulation before the ceremony begins, creating the impression that the procedure involves only the cutting of the foreskin. Circumcision involves more than this.

· Mohels are so fast, anesthesia is unnecessary. It is sometimes said that if a doctor does the operation, it may be "worth" using anesthesia, but if a mohel does it, it probably isn't (mohels are usually faster than doctors). I would argue that surgery is surgery, and that unless one is an accomplished yogi, surgery hurts. And unlike adults, infants do not understand that pain is temporary.

· But they're given wine. The ceremonial wine given to infants is sometimes mistaken for an anesthetic agent. It would be dangerous to give an infant enough alcohol to make him unaware of the surgery.

· It's harder on the parents than on the baby. While it is certainly important to examine the pressures on parents regarding brit milah, discussions of who suffers more at a bris only take the focus away from the obvious: the baby is suffering.

If we are circumcising our sons for reasons that are not purely religious, then circumcision is a medical procedure, and we ought to consider using anesthesia as an appropriate way to do surgery. If, on the other hand, we are circumcising our sons for purely religious reasons, we ought to consider using anesthesia as a logical way to protect living creatures from undue pain, as mandated by Jewish law.

hildbirth lore promotes the notion that parent-child bonding occurs just moments after birth. Such was not my experience with either of my sons. Especially the first time, it took me weeks to develop what I would consider a maternal instinct, and months to feel that I truly knew my child.

When my first son was circumcised, I cried not for the suffering of my infant, but because I felt bullied by this part of being Jewish. I felt my husband and I were failing our son, despite the fact that we were doing the "right" thing by Jewish standards and despite the fact that I wanted my son to be accepted as a Jew. I blamed myself for letting cultural and social factors affect a decision that I felt should be purely religious. My bond with my son was not yet strong enough for me to experience his suffering as primary and my own as secondary.

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I'm sure some people do experience strong instant bonding with their newborns. But no matter how powerful the initial connection, it cannot be as powerful as the connection that develops over time; even the most loved and welcomed and "bonded-to" newborn is a stranger in the family compared to an older infant or child. Maimonides was well aware of this when he advocated circumcision on the eighth day:

The parents of a child that is just born take lightly matters concerning it, for up to that time the imaginative form that compels the parents to love it is not yet consolidated. For this imaginative

form increases through habitual contact and grows with the growth of the child.... The love of the father and of the mother for the child when it has just been born is not like their love for it when it is one year old, and their love for it when it is one year old is not like their love when it is six years old.

Maimonides encourages us to take advantage of our natural indifference to our infants, for without this indifference, we might not be able to do what tradition demands.

But is it right from a Jewish point of view to do something to a "stranger" just because one would not feel comfortable doing it to a person one knows well? What about the commandment to love the stranger? According to Rabbi Herbert S. Goldstein, Professor

of Homiletics at Yeshiva University, the rabbis interpreted this commandment as a warning "first of all not to pain or annoy him at all." Goldstein continues:

The Talmud mentions that the precept to love, or not to oppress, the strangers occurs thirty-six times in the Torah. The reason for this constantly repeated exhortation is ... that those who have been downtrodden frequently prove to be the worst oppressors when they acquire power over anyone.

Again, brit milah without anesthesia conflicts with Jewish principle.

The nerve block does not completely resolve the conflict between brit milah and the halakhic ban on the causing of pain. Circumcision is traumatic for

an infant whether he is anesthetized or not. Until the wound heals over a few days after the surgery, the skin will be raw, nerve block or no. The injections themselves are painful. And anesthesia does not address the fact that, if nothing else, it is surely unpleasant and frightening for the baby to be held down against his will for the operation.

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Why do I think the nerve block is so important? It is the best we have at present to lessen the pain of infant circumcision. But aside from this obvious reason, I believe using anesthesia will help us see brit milah for what it is—elective surgery on sentient beings. Only with this perspective can we enter into a fresh discussion not only of how, but of whether we should continue with this ancient ritual.

Gainful Pain

Rabbi Daniel Landes and Sheryl Robbin

pposition to brit milah has a history. Greco-Roman culture and Christianity, for differing reasons, were revulsed by it.

For the classical world, brit milah marred the perfect body and signaled an intense sexual identity that misanthropically excluded non-Jewish partners. Says Tacitus, in the Histories:

The Jews are extremely loval toward one another, and always ready to show compassion, but toward every other people they feel only hate and enmity. They sit apart at meals and they sleep apart, and although as a race, they are prone to lust, they abstain from intercourse with foreign women, yet among themselves nothing is unlawful. They adopted

circumcision to distinguish themselves from other peoples by this difference. Those who are converted to their ways follow the same practice ...

Both as an affront to nature and as a manifestation of the separateness of Jewish sexuality, *brit milah* was looked upon with horror. Some Jews accepted these claims. Hellenistic Jewish men, embarrassed to be truly naked in the gymnasiums, had painful operations to reverse the "blemish" of their circumcision and their consequently unnatural bodies.

Paul rejected the corporeal sign of brit milah and insisted that "real circumcision is that of the heart" (Romans 2:29). He saw the flesh as the enemy of the spirit—so that inner circumcision is properly "the complete stripping of your body of flesh" (Colossians 2:11), that is, a rejection of sexuality. In short, for the classical world, brit milah shows the Jew in opposition to nature and humanity; for Christianity, bodily circumcision reveals the Jew's profound

alienation from God.

The contemporary attack upon circumcision, as reflected in Lisa Braver Moss's article, unites both the classical and the Christian claims in a particularly nasty mixture. Brit milah is accused of being an unnatural act whose distinguishing mark is the infliction of pain upon a terrified infant, and at the same time it is depicted as an event which lacks transcendent meaning. The force of this attack derives from a barely hidden supposition: Jewish men have been deeply damaged by the inherent abuse of brit milah. And this hurt is inflicted from father to son, generation to generation, as with any abusive familial syndrome. The only way out, we are "sympathetically" told, is to stop the abuse. First we must transform brit milah into an anesthetized surgical procedure. This, however, is only a temporary measure; the community is to initiate a "dialogue" on circumcision with the clear purpose of junking the whole process.

Braver Moss is surprised at the depth

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