Circumcision Debates in Sexology Magazine (1934–1975)

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Abstract
This article explores articles about circumcision that appeared in Sexology: Sex Science Magazine, with particular attention to how the debates shifted and changed over a forty-year period. The articles on circumcision in Sexology begin in November 1934 and end in the May 1973 issue, with every decade of publication includes articles on circumcision, corresponding with growing debates about the medicalization of routine neonatal circumcision. The first article sought to understand “circumcision among savage peoples,” which was quickly followed by an article on “Circumcision among the Jews,” and then “Medical view of circumcision.” In its earliest issues, Sexology advanced arguments in favor of routine circumcision, but in its final article on the topic, Sexology asks, “what’s so good about circumcision?”

Keywords
Sexology magazine, circumcision, medicalization

Beginning in 1933, Hugo Gernsback began publishing Sexology magazine, which, in the words of Ekins and King (2001), was “perhaps, best described as a popular science, sex education for the layman” (n.p.). Gernsback is perhaps “best known as the founding father of science fiction as an established literary genre” (Baetens, 2007, p. 549) and is perhaps best memorialized as “the namesake for the Hugo Award for science fiction writing” (Massie & Perry, 2002, p. 264). However, missing from this record, amongst many things, is his magazine, Sexology. To date, it must be admitted, that very little has been written on Sexology magazine beyond a collection of the most outrageous articles that appeared in the magazine (Yoe, 2008). As such, this article

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initially sets out to introduce readers to the magazine, which has thus far, as far as I can
tell, not been studied by scholars previously. It seems to me that Sexology is an impor-
tant document in the history of gender and sexuality because of its lengthy history,
spanning nearly 50 years, and its fascination with a range of topics. The specific con-
cern of this article is to trace one particular debate over the course of the publication
of Sexology, namely circumcision—the removal of the foreskin from the penis.

If one thing is true, it is that circumcision is divisive, and it would seem at this point
in time, we have witnessed the medicalization of circumcision, the demedicalization
of circumcision, and increasingly the remedicalization of circumcision (Carpenter,
2010). This process is documented throughout the pages of Sexology magazine. In the
course of this article, I set out to show how these processes unfold across Sexology.
What is learned by reading Sexology may well prove valuable to understanding current
debates in circumcision, especially given the deep divides between anti-circumcision
activism and the medical community, or at least parts of it, which are advocating for
circumcision as a prophylactic measure. Ultimately, I contend that Sexology partici-
pates not only in the circumcision debate, but over the course of its publication would
seem to lean into the anti-circumcision perspective. While the medical community,
scholars and scientists, and other specialists debated circumcision, Sexology demon-
strates that these debates were of interest to laypeople and common readers.

**Sexology Magazine**

In the introduction to *The Best of Sexology*, a collection of articles from Sexology, edi-
tor Yoe provides a brief history of the magazine. Yoe (2008) writes that “publishing
Sexology in 1933, when America was belatedly stuck in, if not pre-historic times,
Victorian times, was a bold move... Americans weren’t supposed to read about sex,
but maybe could under the guise of education” (p. 9). In many ways, Sexology becomes
an early part of the “socio-pornographic” imagination, in which, texts could do “dou-
ble-duty,” that is, they were educational books about sex that could push the limits of
publishing and ultimately become an educational source of information about sex.
Each issue of Sexology includes a range of articles on topics relating to sexuality, as
well as a section of question and answers. In this section, readers submitted questions
and received frank and quick answers to their questions.1

In her history of men’s magazines, Hanson (2004) notes that “the three devices
employed by magazine publishers to evade censorship of nude images in the first half
of the 20th century were nudism, film review, and art” (p. 111). These magazines, thus,
were about one topic, for instance, nudism, which, as one argument followed, “nudism
had nothing to do with sexuality” (Hanson, 2004, p. 227) and therefore should not be
subject to censorship. These magazines, instead, sought to educate or enlighten a
reader—though they certainly contained plenty of nudes. Sexology did not embrace
the pornographic imagination of the publications that would appear in the 60s and 70s,
for instance, Playboy, Hustler, and Penthouse which also included information about
sexuality and sexual health, including circumcision (Allan, 2018). Indeed, very rarely
does one encounter anything but a medicalized image of genitalia and there is
certainly not a series of “nudes” to be found in Sexology. However, the periodical does contribute to a history that imagined that sexuality was a valuable topic worthy of a magazine that could be consumed by the “layman” (Ekins & King, 2001).

To be certain, “the first cover was pretty racy and must have caught the eyes of both the man and woman on the street and legislators alike,” however, “future issues succumbed to a more Readers Digest all-type cover design, which possibly made the magazine a bit more respectable, able to get more prominent display at newsstands (and, for sure, kept the art expenditure down)” (Yoe, 2008, pp. 9, 10). These magazines, then, provided articles about sexuality more than they did anything else, and while these articles “often tackle ludicrous subjects” (Yoe, 2008, p. 11) such as “astonishing features on breast-feeding fathers, women with extra breasts, Hitler’s sex life, rubber fetishism, discussing debating twin beds vs. singles, spotlights on notorious husband poisoners and, every couple of months, a feature about Eskimo sex” (Yoe, 2008, p. 11). In a footnote, Meyerowitz (1998) would seem to agree with Yoe (2008), “in a sensational vein, Sexology often emphasized the stranger side of science of sex. It is no coincidence that Hugo Gernsback, the founder, editor, and publisher of Sexology, also published the first pulp science-fiction magazines” (p. 182, n. 25). However, alongside these “ludicrous subjects” (Yoe, 2008, p. 11), readers also find more serious discussions, discussions that are still being debated today in the pages of magazines, or at the online pages of magazines more commonly today. One of these topics was circumcision. Unfortunately, none of these articles appear in Yoe’s The Best of Sexology.

**Researching Sexology**

To write and research about magazines is to be confronted by the reality that significant amounts of grey materials, such as magazines, will almost never find their way into a scholarly and research library. When libraries do have collections, the collections are often incomplete, or are the result of a donation by a scholar who collected particular issues for a certain and specific purpose. Magazines about sexuality, including pornography, have a long and complicated history in the archive. Indeed, Bull (2014) rightly notes that “one of the most significant challenges that historians of pornography face is locating and accessing sufficient primary material” (p. 402). The periodical I am considering here would hardly be considered pornography, even by the most conservative of critics. There are rarely—if at all—images of genitalia beyond the medicalized drawings that would appear in any medical textbook. And yet, this periodical, is largely absent from the history of sexuality.

To complete this article, initially, I collected individual issues of Sexology from online retailers. My initial sample consisted of about a dozen issues of Sexology, which led me to believe that there might be something more to the topic, but I would need to see the full run of the periodical to be certain. With the assistance of Interlibrary Loans, the University of Minnesota graciously agreed to lend their microfiche of Sexology, which included most of the issues between 1933 to 1973. Working with a Research Assistant, all articles on the general topic of circumcision and/or the
foreskin were collected \((n=34)\). All analysis of the articles was done by the author of the article. I sought to find commonalities and recurring themes and concerns over the years of publication; the first article appears in 1934 and the last in 1973. I was chiefly interested in the articles that spoke directly to the medicalization of circumcision, but alongside these articles were more “sensational” examples (Meyerowitz, 1998, p. 182, n. 25).

These “sensational” examples might be divided into two categories: historical and anthropological. The earliest article on the topic of circumcision was titled “Sex Defect of Louis XVI,” published in the January 1934 issue of *Sexology*. While an interesting article that notes that “the truth of the matter was that the young husband had an extreme degree if phimosis (tight, contracted prepuce) and needed above everything else the minor operation known as circumcision” (Unknown, 1937, p. 295) this article tends to be more “sensational” than informative. In a way, it reads like a kind of historical gossip. For instance, we read,

The marriage was physically not consummated (by the sexual act) for years. Not till August 30, 1777 was the young queen able to report to her anxious family in Vienna that she was no longer a virgin. The young king was able to hunt; he was a capable maker of clocks, and expert in locksmithing; but, as a husband, he had been for over seven years a complete failure. (Unknown, 1937, p. 294)

In some ways, this is, as I have suggested, a kind of historical gossip, which was not entirely uncommon in the pages of *Sexology*, for instance, Rubin (1958) published an article titled “Adolf Hitler’s Secret Sex Life,” who, readers are told, “was completely frustrated and unable to complete the sex act with a single one of the many women with whom his name was linked” (p. 514). Additionally, “Hitler was held spell-bound by the American film ‘King Kong’, story of a gigantic ape which fell in love with a beautiful young girl. Perhaps to the impotent Hitler the story represented the symbol of tremendous sexual power which he could achieve only in fantasy” (Rubin, 1958, p. 517). The historical gossip, however, was also a way in to discussing a medical problem, in the case of “Sex Defect of Louis XVI,” readers learn of the medical condition phimosis. In the March 1934 issue of *Sexology*, a letter appeared that asked about circumcision with the letter writer, M. N., Michigan (1934), noting, “I am a young man with a normal foreskin that covers about half of the glans penis, but, at times, fully retracts and causes a slight annoyance” and he explains, “a friend of mine recommends circumcision as a general practice; he has undergone the operation and claims that it results in comfort and cleanliness, as well as greater pleasure and safety from disease. What is your advice?” (p. 464). The answer returns the letter writer to the article about Louis XVI, and reminds M. N., “you will find that a prepuce which is too tight or too adherent may be the cause of a great deal of marital unhappiness” (M.N., Michigan, 1934, p. 465).

The other sensation examples are those that I have suggested are anthropological in nature, for instance, in 1934b, Fox published a three-part series, which began with “Circumcision Among Savage Peoples” and then moved to “Circumcision Among the
Jews,” and the series closed with “The Medical View of Circumcision” (Fox, 1935). Fox’s approach is not unique; a similar article will appear in 1963, “African Circumcision Rites” by Singh. These articles are interesting because on the one hand they treat circumcision as an exotic practice, that is, it is done among the Savages and the Jews. These articles are a fascinating exploration of the tension between the historical and the medical, for the first two articles engage in a kind of primitivist and orientalizing logic, for instance, circumcision is understood as being done by “primitive (ignorant) races” (Fox, 1934b, p. 163) and the procedure is described as a “mutilating operation” (Fox, 1934b, p. 163). In his article “Circumcision Among the Jews,” Fox notes that “the Jewish people have practiced circumcision since the time of Abraham, the supposed ancestor of the race, as a religious ceremony,” and then argues, “the real reason for the beginning of this operation, in Arabia and Egypt, is lost in obscurity” (Fox, 1934a, p. 219) and in so doing, denies the religious basis for circumcision. This article explains when circumcision is done and how it is done, including images of the circumcision knife.

Following these articles, Fox provided the “Medical View of Circumcision.” Fox provides five advantages for the procedure, and thus, while the “savage” races do it because they are “ignorant,” the Americans do it because they are civilized and they are not ignorant of the advantages. In this way, Fox delineates between medical reason and superstition, circumcision is not a mutilation when it is done for medical reasons.

Throughout Sexology’s history, then, readers found articles such as Jacob’s “The Ritual of Circumcision,” which appeared in 1944, and provides an historical overview of the procedure. The article “corrects this misconception,” that is that circumcision is done only by the Jewish religion, “and explains not only its ancient history but also its widespread practice” (p. 490). A similar article, “History of Circumcision,” appeared in 1952, and yet another article called “History of Circumcision” by Goodman appeared in 1956. Likewise, in 1960, Branson published “Circumcision Through the Ages.” These articles all provide the historical overview of the procedure, but also allow readers to engage with the topic.

In Sexology, then, one can suggest that there are two types of articles about circumcision in the magazine: the seemingly sensation and the medical (to which we shall devote our attention). While it may very well be tempting to dismiss these more sensational stories, I would contend that they are important because they allow an audience to engage with the topic in ways that may be more tangible. Admittedly, my binary is a bit false, since these categories often overlap with one another. For example, there are numerous articles that speak to the “facts” of circumcision, which also often recognize the “sensational” side of the debate. Fox returns in 1943 with another article on circumcision, this time offering the “Facts About Circumcision.” This article is mostly a compilation of his earlier articles, but it is couched in ideas of “facts,” a recurring theme in Sexology, including the 1945 article “Circumcision Facts” by McEnery, and “Circumcision Facts” by Magee in 1964, and “Facts about Circumcision” by Carbary in 1965.

Another example of the slipperiness of this binary is found in the March 1946 issue, which included an article on “Circumcision in the Navy” by Phillips (1946), which
noted that, “circumcision is probably the most frequent surgical procedure in the Navy” (p. 471), and then the author explains the procedure in great detail. This article braids together the medical and the social, by casting light on circumcision in a particular social milieu. Regardless of where these articles fit in this binary, they are all haunted by a rather basic question: why circumcise? Wallerstein (1980) in his *Circumcision: An American Health Fallacy* argued that “circumcision is a solution looking for a problem” (p. 197) and in many ways *Sexology* would seem to exemplify Wallerstein’s perspective. It is as if when an historical reason is not satisfactory, then a medical reason must exist, and if a medical reason is not sufficient, at least history is on the side of circumcision.

**Medicalized Circumcision**

Circumcision, the surgical removal of the foreskin from the penis, has been a key debate in health, and particularly, men’s health, over the course of the twentieth century. This debate has unfolded in newspapers, parenting manuals, medical studies, and policy papers, and opinions seem to be constantly in flux. The debates are deeply divided so much so that since about 1980, we have witnessed the rise of organized anti-circumcision activism, or intactivism (being a portmanteau of “intact” and “activism”) in North America (Allan, 2018, 2019a, 2019b; Kennedy & Sardi, 2016; Sardi, 2011, 2014). In her work, Carpenter has explored the medicalization, demedicalization, and remedicalization of circumcision. For Carpenter (2010), the medicalization of circumcision “refers to the processes whereby a procedure—cutting away most/all of the male foreskin—performed for ritual purposes was adopted as a preventative health measure” and secondly, she argues, it “can also refer to defining the foreskin in medical terms, as potentially an inherently disease-inducing body part that may be treated/cured surgically (i.e., by circumcision)” (p. 614).

Historically, particularly given the time frame under consideration in this article, it is important to recall that “in 1910 about 35% of male infants were circumcised, by 1940 that rate had risen to about 60%” (Glick, 2005, p. 181). Thus, in the 1940s, circumcision was no longer an anomaly for an American public, but rather had become a norm, and if not a norm, than normal enough. Indeed, the rates of circumcision would only continue to rise until the 1980s, when nearly all male neonates were circumcised (between 80%–90%) in the United States of America. Thus, throughout the history of *Sexology*, circumcision was normalized and medicalized, and only toward the end of its publishing history would we begin to see cracks in the discourse surrounding routine circumcision.

In many ways, then, *Sexology*’s engagement with circumcision runs alongside, but not quite parallel to, the medicalization of circumcision. As circumcision becomes normalized, the articles defend and argue in favor of circumcision, and yet, at the same time, questions begin to arise about the claims to normalcy. Circumcision thus begins to be questioned both in the popular press, such as *Sexology*, but also in the medical press. As such, *Sexology* is yet another important cultural text in the history of circumcision, especially medicalized circumcision and reactions to it. Of course, and
importantly, this debate is limited to the twentieth century, and even then, only a particular part of it, from the 1930s through the 1970s.

**Early Debates on Circumcision: “The Impossibility of Keeping the Parts Clean”**

In the December 1936 issue of *Sexology*, Neuwelt, M.D. published “The Reasons for Circumcision,” which provided a number of health-based, medical reasons for circumcision. For instance, Neuwelt (1936) observes that the foreskin “secrete[s] a white, cheesy material called *smegma*, with a characteristic, offensive odor” (p. 246). This is a fairly common reason for circumcision, that is, there are hygienic reasons to remove the foreskin. Neuwelt (1936) will also observe that,

> There are a number of conditions due directly to the presence of a long and tight foreskin, but easily preventable by circumcision. Owing the impossibility of keeping the parts clean, the foreskin becomes irritated and tender and particularly liable to attacks of inflammation. Under such conditions, ‘venereal warts’ (contracted through sexual intercourse with a woman infected with gonorrhea or syphilis) grow luxuriously. (p. 247)

This claim will be echoed when Neuwelt (1936) writes,

> Circumcision is particularly helpful in the avoidance of syphilis, inasmuch as the prepuce is the usual site of the *chancre* (the first sore of syphilis) in about 75 per cent of cases. One authority reports that he did not observe a single case of chancroid among one thousand circumcised Jews. (p. 248)

Ultimately, Neuwelt (1936) concludes:

> Enough has been said to show the great necessity and value of circumcision in early infancy, to prevent disease in adult life. In fact, in a great many hospitals today, in recognition of its hygienic value, as many male infants as possible are circumcised before they are discharged from the hospital. If this were done more often, a great many of the diseases of adult life could be avoided. (p. 249)

I highlight these passages because they show how the discourse surrounding circumcision develops. While the article initially notes that “the practice of circumcision is practically as old as man himself” (Neuwelt, 1936, p. 246), the article very quickly moves not to historical reasons to circumcise, but rather to medical and hygienic reasons. Neuwelt description of the foreskin as allowing for venereal warts to “grow luxuriously,” is a language that will follow through to the present day, where we speak of the foreskin as being a “reservoir for infection” or a “cesspool for the virus” because the space is ideal for disease to grow.² Obviously there is a difference between the opulence of “luxuriously” and the degradation of the “reservoir” or “cesspool,” but what remains true is that foreskins are “cultural facts—whether removed or abstained” (Boon, 1999, p. 43) and, as noted in Cassell’s *Queer Companion*, “men seem prepared
to go to war in defense of their foreskin, or lack of” (Stewart & Hamer, 1995, p. 62). The language we use to describe the foreskin is important and it shifts with the medicalization and demedicalization of circumcision. For instance, today, we might speak of the luxury attached to the numerous nerve endings found in the foreskin. In some ways, however, this language precedes some of Sontag’s (2001) arguments in *Illness as Metaphor*—we need to give language to disease.

Neuwelt’s articles was followed by “The Case Against Circumcision” by Scott, which was published in the July 1937 issue of *Sexology*. A note reminds readers that Scott (1937) has produced a number of articles in *Sexology*, including, “A History of Prostitution,” “Marry or Burn,” “Sex and Its Mysteries,” “The Common Sense of Nudism,” “The Sex Life of Man and Woman.” Before one can even begin to read the article, the Editor of *Sexology* has included an Introduction, which notes that “medical men for some years have been inclined to urge circumcision as a general rule for boy infants, and the reasons for advocating this have been given wide publicity” (p. 706). The Editor, then, notes that “an English sexologist of wide experience here opposes the practice, giving social as well as medical reasons; the former, perhaps, stronger than the latter” (p. 706). As such, the Editor tells his reader that though the reasons given are valuable, the medical reasons are less justified than the social reasons. For Scott (1937), then, some of the “harms” of circumcision include, “the removal of the prepuce (‘foreskin’) causes the exposed surface of the glans to harden and toughen until, in time, the delicate and sensitive mucous membrane becomes practically indistinguishable from ordinary skin” (p. 706), additionally, “the extirpation of the loose flesh constituting the prepuces reduces the size of the organ” (p. 707). In these cases, the reasons focus on the penis, and note that it loses its sensitivity and that it will also be “reduced” in size. Scott (1937) then declares that “circumcision is a mutilation” (p. 708), which would seem to be his overall thesis. Circumcision will affect the life of the circumcised, “the youth is extremely likely to be perturbed by the knowledge that his body has been mutilated” (p. 708). Moreover, though the operation is often described as simple and routine, it must also be admitted that it “is not entirely devoid of risks” which can include too much skin being cut away, for example (p. 708).

In responding to the medical reasons for circumcision, which the Editor has already noted are not as convincing as the cultural reasons, Scott provides an argument that will become quite well used by those arguing against circumcision. Scott (1937) writes:

> Now there is no doubt that this accumulation of smegma or of dirt under the foreskin does lead to irritation, and is frequently the cause of much discomfort, with possibly inflammation as an aftermath. But this, in itself, can hardly be looked upon as a reason for circumcision, any more than the collection of dirt under toe-nails can be held to be a reason for the amputation of the toes. (p. 708)

This argument will be an argument that appears throughout debates on circumcision, and if it is not the toe-nails, then it is finger nails, behind the ears, or under the eyelids. This argument also has significant historical precedent in which the foreskin has been
compared to the eye (Strouse, 2016). Ultimately, Scott (1937) concludes: “in my opinion, the drawbacks and the potential disadvantages of circumcision constitute arguments against the operation sufficiently powerful to outweigh any value it may possess as a sanitary or prophylactic measure” (p. 710). And he further notes that “adult males would be well advised to decide against any such operation unless there are equally potent medical indications” (p. 710). This latter point is particularly interesting given how circumcision has been, in our times, rendered a prophylactic decision.

Finally, in the October 1937 issue of *Sexology*, readers found “Circumcision—Pro and Con,” an unsigned article, which includes excerpts from “a couple of the letters which we have received from readers” (Unknown, 1937, p. 113). This article notes that Scott’s article is “based largely on psychological rather than medical grounds” (Unknown, 1937, p. 113), which is another fairly common distinction in the debates about circumcision. This is important because the article thus challenges Scott’s article on his understanding of the medicalization of circumcision—that is, it serves medical, rather than cultural, reasons. This article, like Scott’s, will flirt with many of the concerns of intactivists, for instance, in this article a reader explains that “I would like to have a correction made. With the progress in plastic surgery, I must believe that a prepuce of some sort might be grafted on” (Unknown, 1937, p. 113). The rise of “decircumcision,” which Gilman (1997) calls “the first aesthetic surgery”, becomes an interesting query for *Sexology*, and in a way, this makes sense: the topic was sensational, but real and genuine (and will become more important over the course of the periodical). At bottom, the letters would seem to suggest that readers seem to be on both sides of the argument, which leads the author of the unsigned article to conclude: “So, for the present, the discussion must rest” (Unknown, 1937, p. 114).

Unsurprisingly, perhaps, the discussion did not rest long as the December 1937 issue included an article called “Youth and Circumcision,” which was written by Reader. The author speaks from the perspective of experience noting, “having been greatly benefited by the operation from both a physical and psychical point of view, I feel that I am qualified to give other readers some facts on the subject,” and the author contends, “I do not feel that the later article ‘Circumcision, Pro and Con’, in the October issue has dealt enough with the ‘pro’ side of the issue” (Reader, 1937, p. 240). In particular, the author notes that after being circumcised he was “no longer ashamed to appear nude before other men, and I was left with a cleaner and more comfortable feeling” (p. 241).

One final article appeared in the 1930s, “The When and Why of Circumcision” by Wood, M.D., who notes that “while circumcision of the male is recognized by all authorities to be beneficial in several ways, it has not appeared to the author that the operation is universally demanded” (Wood, 1938, p. 22). Thus, the author provides several reasons for circumcision, noting that “there can be no objection to universal circumcision of the male if it is properly done, and at not too tender an age” (p. 23).

Over the course of the 1930s, then, various articles appear in circumcision articulating both the advantages and disadvantages of the procedure. The general opinion in these articles would largely focus on its benefits rather than its potential harms. As is to be expected, these articles follow a heteronormative perspective, for instance,
Neuwelt (1936) speaks of “‘venereal warts’ (contracted through sexual intercourse with a woman infected with gonorrhea or syphilis)” (p. 247).

**Ongoing Debates: “Shall I be Circumcised?”**

If the early debates were more general about circumcision, speaking in terms of benefits and harms, the ongoing debates shifted to more personal and introspective questions. The March 1942 issue of *Sexology* included an article titled “Shall I Be Circumcised” by Pugh, B.S., M.D., a urologist in New York City. This article begins anecdotally,

An Italian woman called to see me, regarding her little boy, aged two years. “It is terrible!” said she, “when the boy makes water, he gets so big like a toy balloon and he smells very bad. Please, doctor, give him a good pill.” When I looked at the boy, his foreskin opening was like a pin-point. There was but one answer—the boy must be circumcised. The mother departed and soon returned with her husband. When I explained things to the father, he turned to me and said, “Doctor, I am a good Christian and you cannot make my boy a Jew!” (Pugh, 1942, p. 31)

This is a telling example, perhaps indicative of its time, for one cannot help but note the anti-Semitism apparent here. Circumcision is indicative of Judaism alone. Even though circumcision had been medicalized, it was still, in this woman’s mind, a Jewish operation. Strikingly, however, there is another reading that needs to be noted, that is, the parents are ethnically and likely religious othered, as well. This may, in some ways, remind readers of the earlier more sensational articles with the anthropological turn that relies on an othering narrative. In this case, the other is two-fold, firstly, on a woman, and then secondly on an Italian woman in a largely Anglo-Saxon Protestant context. Of course, her anxieties are not unique to Italian women, but rather, she becomes a vehicle through which to explore a more common concern—being a good Christian, which for most, did not require circumcision, a ritual tied to Jewish culture, dating back to Abraham, as many of the articles have noted.

But beyond this, the author also introduces his readers to balanitis, which is the concern for the “little boy.” Additionally, readers will be introduced to phimosis, another medical condition, which requires, we are told, circumcision. Pugh (1942) is clear, however, that even though this may be a “trivial operation,” as one person put it to him, he insists, “the procedure should be carried out by a competent and professional surgeon and even then, accidents may happen” (p. 33). However, in a sense, Pugh never quite answers the question for the reader who may well be asking about his own circumcision status. Much of the article focuses on infants and toddlers, ultimately Pugh (1942) concludes, “I should just like to emphasize the fact, that while circumcision is a very minor operation in the infant, it must not be taken lightly in the adult” (p. 34).

The June 1943 issue will ask a similar question as the one asked in Pugh’s article. In this issue, readers found “Should Your Child Be Circumcised?” by Newman (1943).
This article attempts to answer a question that continues to be asked by expectant parents today. This article will provide a “frank discussion on circumcision which will help the modern parent make an intelligent decision when the problem crops up” (p. 758). One is almost tempted to imagine that the “crop” has to be a kind of pun, just as one “crops” a photograph, to trim it down to size. Nonetheless, this article braids together the historical, noting that “for five thousand years or more, boys have been circumcised,” as well as the social, “today, there are 100,000,000 people living who have been circumcised,” and the medical, “the majority of urban doctors in the United States and a growing proportion of gynecologists, obstetricians, and pediatricians and specialists in venereal diseases” argue that circumcision is “necessary” (Newman, 1943, p. 758). Read carefully, the article would strongly appear to be in favor of circumcision, though it is careful not to be explicit. Newman (1943), asks, “Is there any risk to circumcision?” to which the answer is, “on this both sides agree. They chorus a ‘No!’ There is no risk if the operation is performed by qualified surgeons under proper conditions,” (p. 759) a point which echoes Pugh’s argument. However, Newman (1943) does ultimately conclude, somewhat ominously, that “one thing about circumcision is that when it is over it is over. The foreskin never grows back” (p. 760).

With so many questions about whether or not one should be circumcised, it is hardly surprising then that in 1946, readers found a brief article, a summary from The Urological and Cutaneous Review, on a “new circumcision method.” This new method is called “cuff removal technique” and we are told “the skin around the penis is cut about one inch forward of the root of the organ. Then drawing back the forward part of the skin so that the glans is exposed, another cut is made in the skin around the penis; this surrounding cut is about one and one-half inches forward from the first surrounding cut.” As such, the readers learn, “the intervening ring of ‘cuff’ of skin between the two cuts is removed and discarded. Then, about one inch forward from the root of the organ, the skin that was separated by removal of the ‘cuff’ is united and sewed together.” Readers learn that this new method is advantageous because “the procedure unites similar tissues, leaves an indiscernible scar hidden by the public hair, avoids contamination by urine with subsequent infection, and is easily performed” (The Urological and Cutaneous Review, 1946, p. 551). Such a procedure is well before the rise of the metrosexual and the routine removal of pubic hair, but the article shies away from anything titillating and simply and clearly explains the new procedure and its advantages.

Cleanliness and the Foreskin

While Sexology debated the pros and cons of circumcision, provided the history of circumcision, explored medical reasons for circumcision, it also considered what happens without circumcision. For instance, in January 1952, readers found an article titled “The Inflamed Foreskin” by Pugh (1952) (who had written other articles on the topic) and will produce a similar article in 1960 titled, “Hygiene of the Foreskin.” In the 1952 article, readers learn that “frequently, in newborn babies, the foreskin closely
adheres to the head of the penis and must be separated with a dull instrument in order that the child can urinate properly” (p. 379). The author then notes that,

a part, or all, of the foreskin may then become inflamed and the individual is often most uncomfortable. Would not ordinary cleanliness help this situation? It would. The foreskin should be cleansed daily or as a result of accumulation of pus under the foreskin a discharge often takes place, and the man, thinking he has gonorrhea, will consult a physician. At times the odor from this is very disagreeable. (Pugh, 1952, p. 379)

The discussion here of gonorrhea is important because in 1954, an article will ask, “Does Circumcision Prevent Cervical Cancer,” which notes that, “it is believed that circumcision may prove to be an important factor in reducing not only the occurrence of cervical cancer but also cancer of the penis. One reason for this may be based on the greater ease with which the circumcised organ can be kept clean” (Unknown, 1954, p. 751). All of this leads Pugh, in 1960, to ask: “What is the treatment for chronologically inflamed foreskin?” (Pugh, 1960, pp. 634, 635) to which he response, “in the young it is circumcision; in adults, those who have a little patience can be trained in ways of keeping the foreskin back” (p. 635). In conclusion, he writes, “suppose one neglects the foreskin over a period of years. The chief danger of allowing a chronic inflamed condition to persist is cancer. Inflammation can be prevented by proper care and cleanliness. Do not neglect hygiene of the foreskin!” (p. 635, ital. in orig.).

Given all of this discussion of cleanliness, it is hardly surprising, then, that Winfield (1954) asks, “When is circumcision necessary?” (p. 698). He notes:

circumcision is sometimes necessary, especially in cases of true phimosis (a condition in which the foreskin is so tight that it cannot be drawn back over the glans), balanitis (inflammation of the glans penis), for venereal warts or warts on the prepuce, and for early epithelioma. (p. 699)

Winfield, thus, begins to temper the reasons for the necessity of circumcision. Indeed, drawing on Pugh’s work, Winfield (1954) explains, “if men washed the glans every day with soap and water (with foreskin retracted) much of this trouble would be simply and effectively eliminated” (pp. 700, 701). This is an important shift in the discourse because it leads to a movement away from circumcision as a medical and hygienic necessity. One can, as it were, do just as well by simply “wash[ing] the glans every day,” just as one brushes their teeth or washes their hands.

Uncircumcision?

This cleanliness discussion leads into the next debate to unfold in Sexology, that of uncircumcision or decircumcision. And this seems a logical question given the realization that most of the benefits of circumcision could be found in simply washing oneself. The debate over uncircumcision begins in earnest (though it had appeared in Questions and Answers) with the publication of Schneider’s (1956) article, “Uncircumcision.” The issue of “uncircumcision” or “decircumcision” had certainly appeared earlier in
Sexology, for instance, the July 1950 issue includes a question in the question and answer section of the magazine. Mr. Texas (1950) asks, “is it possible to have a new prepuce (foreskin) grafted on the organ of a man who has been circumcised?” to which, the editor responds, “grafting a foreskin would be, if done by the most experienced surgeon, a matter of slight likelihood of success” (p. 800). Likewise, in the October 1953 issue, Mr. Pennsylvania (1953) explains that he was circumcised at the age of five and found it to be “humiliating, causing me a sense of inferiority,” noting that “I have always regarded the uncircumcised, unmutilated male organ as esthetically attractive, and the circumcised one as unattractive,” and thus, he asks, “would it be possible to become uncircumcised? Would it be possible, when someone is circumcised, to graft the prepuce from one organ to another?” (p. 192). The Editor replies that, “far back in history of reconstruction of the foreskin was practiced by surgeons who were crude in their methods. Even in that remote time the method you suggested was unsuccessful. It remains so today” (Pennsylvania, 1953, p. 192). The Editor, does, however, spend some time seriously attending to his question by offering other possibilities, ultimately suggesting, “one should consult a plastic surgeon and should be prepared for an expensive undertaking. Your dissatisfaction is psychological. Why not make up your mind to conquer that?” (Pennsylvania, 1953, p. 192).

The article “Uncircumcision” by Schneider, M.D., thus explores the history and the practice of uncircumcision. This is a history that in many ways remains to be written, and it is a history that also remains rather taboo—even in the present moment. Schneider begins his article by quoting from the First Book of the Maccabees, which is perhaps most well-known for including the narrative explaining Hanukkah. In this book, one reads, “And they built a place of exercise in Jerusalem according to the laws of the Gentiles; and they made themselves uncircumcised, and forsook the holy covenant and joined themselves to the Gentiles, and sold themselves to do evil” (488, I Maccabees 1:14-15). This quotation leads Schneider (1956) to ask, “What is then possible, as this verse suggests, that one could remove the evidence of circumcision by undergoing another surgical operation?” (p. 488). This was a question that readers were, as noted above, were asking: could one uncircumcise oneself? The article moves quickly to what is called “The Celsus Operation,” which involves,

the prepuce around the glans [being] seized, stretched out until it actually covers the glans, and there tied. Next the skin covering just in front of the pubes is cut through, but great care is taken not to cut into the urethra, nor into the blood vessels there. (Schneider, 1956, pp. 489, 490)

Celsus, of course, was an ancient romance physician, and this is one proposed method of decircumcision, and one that will, to some extent, continue through the present. The stretching of skin on the penis to mimic the foreskin has been well-documented. Nonetheless, at the close of the article, Sexology’s Editor inserts their opinion:

These operations are no longer used today. While, technically, modern plastic surgery could conceivable ‘uncircumcise’ a circumcised genital organ, this would be considered
an unnecessary operation in the contemporary medical profession. Medical opinion today
generally is in agreement that the circumcision not only is not harmful, but also probably
in an aid to a man’s genital health. (Editor, in Schneider, 1956, pp. 490, 491)

Needless to say, *Sexology* is not interested in advancing an argument in favor of
being uncircumcised or decircumcised. This kind of editorial intervention, how-
ever, does provoke a series of interesting questions that will be debated in future
issues of *Sexology*. For instance, was circumcision even a necessary operation to
begin with?

**Unnecessary Circumcision**

Beginning in the 1960s through to its final issues, the debates about circumcision seem
to shift in *Sexology*. In the April 1961 issue, Williamson (1961) writes,

> Doctors are far from being agreed on whether or not circumcision should be done as a
routine procedure in the case of the child. In the adult, it may be required in rare cases as
a hygienic matter. If any male has a question about whether he should undergo this
operation, he should consult a physician and be guided by his advice. (p. 605)

This shift in perspective might suggest that as circumcision is reaching its highest
points of adoption in medical spaces, and thus being entirely normalized, the debates
about its value are increasingly becoming more and more important. After all, one is
making a medical decision that cannot, as Newman noted, be reversed. The foreskin
does not grow back (Newman, 1943, p. 760). The articles that appear in the late issues
of *Sexology*, its final decade, mark a pretty clear shift. In the December 1966 issue,
readers found an article by Reidman (1966), which asked “Should all male babies be
circumcised?” which concludes by noting that “there are differing opinions coming
from different researchers on the advisability of routine circumcision” (p. 350). Such
a claim about differing opinions is as prevalent today as it was when this article was
published. We are overwhelmed by the number of scholarly and scientific studies
advocating for one position or the other.

In the May 1969 issue, Rosenhouse (1969) published “Is Routine Circumcision
Necessary?” The biographical note describes Rosenhouse as “a Communicable
Disease Investigator, primarily in the field of VD control, for the Sacrament California
County Health Dept., [and he] has written extensively for many publications” (in
Rosenhouse, 1969, p. 671). In his article in *Sexology*, Rosenhouse (1969) notes that
“there is a growing reaction against the surgical procedure, especially among young
medical practitioners” (p. 672). This argument is interesting because it shifts the nar-
rative toward “modernization” and “age,” that is, circumcision is what older physi-
cians might prescribe, but the newer, younger generation knows better. Rosenhouse
(1969), like so many before and after him, will conclude that “the controversy pro and
con will continue and, until further scientific data is accumulated, decisions for and
against it must be based on personal judgment and preference” (p. 673). What is so
striking about this article is that this is not Rosenhouse’s only article on the topic; indeed, a year later Rosenhouse (1970) produced “Can Circumcision be Undone?” in *Sexology*, in which he concluded: “Uncircumcision thus remains more of a medical rarity and curiosity at the present time” (p. 69). Moreover, Rosenhouse took his arguments elsewhere, for instance, in 1975, he published an article titled, “A Foreskin is Missing,” which appeared in *Hustler* (see Allan, 2018, pp. 308–310) and this article argued against circumcision, just as the article in *Sexology* did. The difference between these articles, perhaps, is that the opinions become more certain in *Hustler*.

The July 1970 issue included an article by Dr. Wright, which commented on the British decision against circumcision. The article titled, “British MD’s Say No to Circumcision,” thus reflected on the divided opinions amongst the medical profession, a recurring theme in *Sexology*. In May 1973, Kirk (1973) published an article called “What’s so good about circumcision?” which declared from the outset that “one doctor calls it ‘the rape of the phallus’” (p. 25), a phrase which appeared in the epigraph to Rosenhouse’s article. The phrase itself is taken from Morgan’s article, “The Rape of the Phallus,” which appeared in *Journal of the American Medical Association* in 1965. This publication itself is less a scholarly article and more a commentary, indeed, it is farmed in *JAMA* as a “critical commentary.” The article by Kirk, like other articles that appeared in *Sexology*, seems to rely on a kind of psychological reading of circumcision, noting that Morgan (1965) suggest that parents “lop it off with the Joneses,” (Kirk, 1973, p. 26) wherein, one does this merely out of custom. Another potential reason noted by this same expert is that mother seems to endorse the practice because “it is one way an intensely matriarchal society can permanently influence the physical characteristics of its males” (p. 27). Kirk’s article is thus an exposé of Morgan’s critical commentary which appeared in *Journal of the American Medical Association*, and ultimately offers very little in terms of the benefits of circumcision.

Finally, in the May 1978, which is beyond the microfiche’s holding (but of which I have a personal copy), Leitsch (1978) published “Is circumcision really necessary?” which concluded that “it is clear […] that the wholesale butchery of baby boy’s foreskins does need to be reexamined,” and further, that “performing unnecessary surgery has become an unfortunate fad in America today” (Leitsch, 1978, p. 39). This final article, thus, is clear in its repudiation of circumcision, and this is happening at a time when the majority of neonates were being routinely circumcised. Importantly, this article asks, “aside from religious reasons, what are the grounds for routine circumcision?” (p. 36). This would seem to be a question that we might continue to ask, the answer for some, of course, is prophylactic, but others remain unconvinced.

**Conclusion**

Undoubtedly, *Sexology* can be described as “sensational,” (Meyerowitz, 1998, p. 182, n. 25) and its articles may have tackled “ludicrous subjects” (Yoe, 2008, p. 11) including Louis XVI’s foreskin (January 1934), but there was, I contend, a genuine interest in circumcision across its publication history. Even the seemingly sensational articles
are doing a lot of work, and those dynamics unfold across a range of articles. This interest in circumcision corresponds to ongoing debates about the medicalization and normalization of routine neonatal circumcision. Reading these articles today, I am struck by a realization, where might a reader today find such an ongoing and sustained interest in circumcision? Perhaps, we might find these debates in medical textbooks and journals, but *Sexology* was written for a general public. Today, I suppose, our answers are found online in forums. These documents, then, speak to a part of the circumcision debates history in the United States of America.

A magazine like *Sexology*, while certainly “sensational”—and we cannot deny this as undoubtedly this is part of why it sold—was, we might suggest, also responding to ongoing societal and cultural concerns about circumcision, amongst a range of sexual topics. These same concerns continue to appear in magazines, for instance, *Hustler* published articles on circumcision (Allan, 2018), and a range of gay male pornographic publications have also taken up the issue (Allan, 2019b). This article, however, is one of the first to consider as much of a print run as possible and to look at how the debates shifted over the course of several decades. In my earlier articles, the focus is on articles that appeared in pornographic magazines; in this article, I have paid attention to the history of the debate, and tracked its shape and contours. Circumcision debates are not going anywhere, but we would do well to study their histories to see how, for instance, ideas are recycled; or, we might look at those older arguments and reframe them in our current context. Parents continue to debate with one another about whether or not they should circumcise their newborn. The Medical and Scientific communities continue to debate the medical benefits and harms of circumcision. Inactivists and anti-circumcision activists continue to draw our attention to arguments against circumcision. *Sexology* aptly demonstrates how our current and contemporary debates have historical antecedents that span the 20th century.

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Notes

1. This article is only interested in the articles that appeared in *Sexology*. In future work, I will attend to the question and answer sections. To date, I have read and catalogued more than 100 Questions and Answers that appeared in *Sexology* on topics from the need for circumcision, tight foreskin, infant foreskin, benefits of circumcision, excess foreskin, circumcision and intercourse, circumcision methods, circumcision and age, circumcision fetish, circumcision scars, the frenulum, circumcision and sterilization, false claims about circumcision, foreskin hygiene, circumcision and religion, circumcision and cancer, how to disguise circumcision, repairing and restoring the foreskin, the costs of circumcision.

2. For a larger discussion of the language surrounding circumcision, see Allan (2019a).

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