Author's response to reviews

Title: Circumcision during manhood initiation rituals in the Eastern Cape, South Africa: a prepost intervention evaluation

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Author's response to reviews: see over
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Title: Traditional circumcision during manhood initiation rituals in the Eastern Cape, South Africa: a pre-post intervention evaluation

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Version: 2 Date: 19 January 2008
Reviewer: Anthony Caldamone
The introduction is a historical article in and of itself. As interesting as it is, it adds little to the scientific paper. It would be useful as a whole separate article. It can be shortened to a single paragraph without detracting from the substance of the article.

R: The introduction is shortened to a single paragraph

The authors compare their results to that of other series on similar population circumcised in a similar tradition, however, it would be helpful if their results were compared to a western population of traditional newborns circumcised by trained physicians or for that matter mohels. Right or wrong, this is the standard that the results needs to be compared to for validation.

R: The 1989 review of the American Academy of Pediatrics’ Task Force on Circumcision reported that the rate of postoperative complications of male circumcision was approximately 0.2% to 0.6% in the United States. The majority of complications were minor, the most common being local infection and bleeding.

Needs some language corrections before being published

R: Language corrections have been made.

Reviewer: Robert Van Howe
Reviewer's report:
1. Needs an abstract. (either that or I couldn't find it)
Abstract

Background: Circumcisions undertaken in non-clinical settings can have significant risks of serious adverse events, including death. The aim of this study was to test an intervention for safe circumcision in the context of initiation into manhood among the Xhosa, Eastern Cape, South Africa.

Methods: Traditional surgeons and nurses registered with the health department were trained over five days on ten modules including safe circumcision, infection control, anatomy, post-operative care, detection and early management of complications and sexual health education. Initiates from initiation schools of the trained surgeons and nurses were examined and interviewed on 2\textsuperscript{nd}, 4\textsuperscript{th}, 7\textsuperscript{th} and 14\textsuperscript{th} day after circumcision.

Results: From 192 initiates physically examined at the 14th day after circumcision by a trained clinical nurse high rates of complications were found: 40 (20.8\%) had mild delayed wound healing, 31 (16.2\%) had a mild wound infection, 22 (10.5\%) mild pain and 20 (10.4\%) had insufficient skin removed. Most traditional surgeons and nurses wore gloves during operation and care but did not use the recommended circumcision instrument. Only 12\% of the initiates were circumcised before their sexual debut and they reported a great deal of sexual risk behaviour.

Conclusion: Findings show weak support for scaling up traditional male circumcision.

2. In the discussion section need to emphasize the danger of the procedure, even with their intervention of additional training.

3. In the discussion section need to give recommendations for making the intervention safer. Elaborate on where to go with the information gathered in this study.

R: Above comments regarding danger, recommendations and way forward are now included in the discussion/conclusion

There are a couple of typographical errors. "ha" instead of "had" and a "\]" missing after a citation.

R: Typographical errors have been corrected