<http://www.harcourt-international.com/journals/ejvs>

This is a peer-reviewed publication entitled *Varicose Veins on the Internet* (*Eur J Vasc Endovasc Surg* 2000; **20**: 386–9). Its aim was to analyse the quality of information available to patients on the Internet concerning varicose veins. Various search engines were used to find the sites of interest. The conclusion was that longer documents presented by non-profit making organisations are more reliable than short documents offered by private medical groups. The article is rigorous, statistically sound and has been subject to the peer-review process. It ranks 41 web sites in terms of their educational value and usefulness to patients, the best of which is mentioned below. This adds a scientific edge to what would be an otherwise random selection of world-wide sites. It will appeal to clinicians with a specialist interest but is of limited value for the patient.**

www.gvg.org.uk/vvinfo.htm

This is a magnificent information resource for patients. It has been designed by the Gloucestershire Vascular Group and gives extensive information and advice. There are very good sections on 'complications of operations' and 'postoperative care' – sections that seem to be deficient in many other sites. This site is bright and easy to navigate with good, clear diagrams and photographs. It was cited as containing the best overall information on varicose veins available on the Internet and this seems to be well deserved. This is certainly a site of choice for patients.*****

Cultural circumcision

RICHARD CRANE, PHILIP MCCANN, SIMON EVANS

Department of Urological Surgery, Cheltenham General Hospital,
Cheltenham, UK

CORRESPONDENCE TO

Richard Crane

E: richard.crane@glos.nhs.uk

Opinion within the medical profession is deeply divided as to whether circumcision for religious or cultural reasons should be offered on the NHS, or performed at all by medical practitioners. Medically unnecessary circumcision is almost routine in the US, but is on the decline. Whilst circumcision has always been a feature of Judaism and Islam, uptake even within these religious groups is now the subject of far greater debate. In recent years, a number of major studies in developing countries have strongly suggested that circumcision has a protective effect against the transmission of HIV. On the back of this evidence, in March 2007, the World Health Organization acknowledged that skilfully performed male circumcision has a role in preventing the spread of the disease (<<http://www.who.int/hiv/mediacentre/news68/en/print.html>>). The effect this will have on circumcision rates world-wide remains to be seen. In the West, however, where the risk of HIV is

relatively low, most circumcisions are still likely to be performed for other reasons. What resources are there on the internet to aid parents when making this decision, and what guidance is there for surgeons who may find themselves faced with the dilemma of whether or not to perform a medically unnecessary circumcision?

Netdoctor

www.netdoctor.co.uk/menshealth/facts/circumcision.htm

This page discusses circumcision in general and handles the topic of cultural circumcision in an extremely thorough and sensitive manner. It summarises the arguments of the major religions well, but also explains comprehensively the reasons for retaining an intact foreskin, as well as potential complications, including reduced sensation, bleeding and damage to the urethra or glans. The author is a qualified doctor, who writes in language which is extremely accessible to patients and parents. The writer concludes with the wish that the page: 'Might be a useful stimulus to thoughtful reflection on such a long-established traditional practice'. Overall, an excellent resource for those contemplating or facing circumcision.*****

Circumcision Information and Resource Pages

<http://www.cirp.org>

This site is the home-page of an antircircumcision group and is, therefore, rather one-sided. Some of the material is also emotive rather than constructive in its approach. Examples include phrases such as 'the practice of male genital mutilation is far older than recorded history' and 'the trauma of the experience is injurious. It can have long-term deleterious effects later in life.' That said, there are some links to some useful medical articles and there are also graphic photographs of a non-anaesthetised child being circumcised. There is so little debate on this site that it is unlikely to be of benefit to anyone looking for information to help them to clarify their viewpoint. It does, however, make sober reading for anybody planning on having their child circumcised in the 'traditional' way, and has some useful educational resources for the non-specialist.**

Family Medicine

<http://www.familymedicine.co.uk/features/circum.htm>

Family medicine is the home-page of a now out-of-print medical journal. Its website persists however, including this interesting debate on circumcision which incorporates the perspectives of doctors from the Jewish and Muslim communities, as well as a paediatric surgeon. The pages cover both the religious arguments for circumcision, potential complications and the medical indications in good detail. The page also includes a graphic description of a Jewish ceremony of circumcision, performed without anaesthetic. As one of the writers says: 'The foreskin of the penis arouses emotions among its supporters and opponents but health professionals must examine the issue objectively so as to play fair in dealing with their patients'. There is a page documenting the arguments against routine circumcision, which draws on evidence from several well-respected journals. Excellent for surgeons, patients and parents alike.*****

****CONSIDER BUYING SHARES ****TELL YOUR FRIENDS
***MAY BE USEFUL **LOOK IF YOU'VE GOT NOTHING TO DO
*BEST AVOIDED

SELECTED INTERNET VIEWING

BBC – Religion and Ethics Homepage

<http://www.bbc.co.uk/religion/ethics/malecircumcision>

As always, the BBC website is accurate and well-balanced, presenting a brief summary of the views and practices of the major religions, as well as an overview of the social convention of circumcision in the US. The page is a little thin on information, but, interestingly, includes a 27-min recording of a debate on the subject, aired on BBC radio in 2007. A reliable resource for parents, which explains the religious view-points fairly and without bias.***

Natural Family Online

<http://www.naturalfamilyonline.com/articles/412-circumcision.htm>

This article does not go into great detail on the subject of religious circumcision, but gives a good deal of background on the routine practice of social circumcision in America. It also lists the arguments for and against in table form, useful for weighing up the pros and cons in one's own mind. Of all the sites reviewed, this one is probably the most objective and constructive, offering advice such as: 'This is a decision that cannot be made overnight, and you are right to think about, research and discuss the pros and cons of circumcision well before your baby is born'. There is strong emphasis on the necessity of adequate anaesthesia and the involvement of a medical practitioner. A useful read for parents, for whom this site is clearly aimed.*****

The Circumcision Resource Center

<http://www.circumcision.org/ethics.htm>

The Circumcision Resource Center is a voluntary organisation, run mainly by members of the American Jewish community, who offer advice and support to circumcised men and parents contemplating circumcision for their sons. Despite its strongly anticircumcision view-point, the site includes an extensive explanation of the medical evidence for and against circumcision, as well as an intelligent (if again, not impartial) discussion, based on fundamental moral and ethical principles including autonomy and non-maleficence. Quoting a number of respected journals, it provides a good starting point for surgeons thinking about their own position.***

Pilonidal sinus

STEVEN J ARNOLD

Department of Colorectal Surgery, North Hampshire Hospital,
Basingstoke, UK

CORRESPONDENCE TO

Steven J Arnold, E: stevenjarnold@yahoo.co.uk

CLINICIAN ORIENTATED

World Wide Wounds (online journal)

[www.worldwidewounds.com/2003/december/Miller/](http://www.worldwidewounds.com/2003/december/Miller/Pilonidal-Sinus.html)

[Pilonidal-Sinus.html](http://www.worldwidewounds.com/2003/december/Miller/Pilonidal-Sinus.html)

World Wide Wounds is an on-line journal published by the Surgical Materials Testing Laboratory and the Medical Education Partnership.

The section about pilonidal disease is written by the Wound Healing Research Unit of the University of Wales, and offers much for the clinician. A brief introduction and epidemiological data are given, and a good section relates the various theories of the pathological development of this complex problem, including a whole paragraph devoted to the exceedingly rare risk of malignancy arising in the sinus. Techniques of management are discussed, although some are a little controversial (e.g. antibiotics alone for some acute abscesses), or largely historic (phenol ablation); no mention is made of the possibility of surgery being done under local anaesthetic or as day-case procedures. Colour photographs illustrate some wound-care issues. Referencing is comprehensive. Overall, a good site for most doctors wishing for an overview of the disease.****

Surgical Tutor

www.surgical-tutor.org.uk/system/abdomen/pilonidal_sinus.htm

This is part of Stephen Parker's excellent website for surgical revision, and contains photographs showing typical pilonidal disease. Bullet point revision is given which is ideal for candidates sitting the MRCS examination. There is a basic line drawing demonstrating the Karydak procedure, but ideally this page could be expanded to encompass management problems and more complex surgery for recurrence disease, simple knowledge of which could be expected in the MRCS examination.**

E-Medicine

www.emedicine.com/emerg/topic771.htm

This American site focuses on the treatment of acute pilonidal abscess only, with bullet points demonstrating what to look for in the history and presentation. Bizarrely, incision and drainage is classed as conservative treatment! The range of elective surgery is not covered, and complications and follow-up arrangements are barely discussed. Useful links are given to related sites.**

PATIENT ORIENTATED

Patient.co.uk

www.patient.co.uk/showdoc/27000662/

A website aimed at patients, which gives an overview of the condition in layman's terms, and would probably satisfy the quest for information in a typical patient. Some may find the information is delivered in a slightly patronising manner, but others will undoubtedly use the link to a discussion forum from other sufferers (most of whom relate tales of woe). There is little to offer the clinician.***

Pilonidal Support Alliance

www.pilonidal.org

An excellent site, that can be forgiven for blowing its own trumpet: 'this site is a gift for those suffering from this lousy disease'. Initially an American support web page, it has been comprehensively expanded to give a clear menu to each stage of the disease and its treatment, and goes into some detail about types of surgery and the