

Patients I think I might have...

Tight Foreskin (phimosis)

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Pages in this section contain graphic images (including genitalia) that some may find upsetting.

What should I do if I have a tight foreskin?

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If you are unable to retract your foreskin fully, especially if it becomes red or painful, you should contact your GP. If a tight foreskin has been retracted and cannot be brought forward again, you should seek urgent treatment in your local hospital

In adults, tightness of the foreskin may cause no symptoms for most of the time. Problems usually become more obvious (and troublesome) when you get an [erection](#) and attempt sexual intercourse.

What are the facts about tight foreskins?

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- In most children, the foreskin cannot normally be retracted completely before the age of 5. In some, full separation may not take place until the age of 10;
- Injury or infection of the foreskin may contribute to tightening;
- Ballooning of the foreskin (blowing up when passing urine, pictured) does occur with a tight foreskin but may also occur in children with a normal foreskin;
- Tightness of the foreskin may interfere with the normal passage of urine and can, in severe cases, cause acute retention of urine; and
- Tight foreskins may encourage tumours of the penis to develop but tumours never arise in patients who have been circumcised in childhood.



What should I expect when I visit my GP?

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Your GP should work through a recommended scheme of assessment for men or boys with a tight foreskin. This assessment will normally include some or all of the following:

1. A full history [▼](#)

2. A physical examination [▼](#)

3. Additional tests [▼](#)

What could have caused my tight foreskin?

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In children, a tight foreskin is usually congenital but, in adults, it is often due to a scarring disease known as balanitis xerotica obliterans (BXO, sometimes called lichen sclerosus). We do not know the cause of BXO

What treatments are available for this problem?

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If simple conservative measures fail to improve the tightness, your GP will normally recommend referral to a urologist for further advice

General measures

Stretching of a diseased foreskin is best avoided. There is no scientific evidence that it produces a cure and it can actually precipitate further tearing and scarring. This may worsen a [phimosis](#) which then requires surgical treatment later in life. Forcible retraction of the foreskin in children should be avoided.

Steroid creams may soften your foreskin if the scarring is mild; stopping the cream, however, may result in a return of the condition.

Antibiotics may be needed if swabs show any evidence of infection

Using a condom during sexual intercourse may make the penis more comfortable

Surgery

Circumcision is the mainstay of treatment if the foreskin is scarred by [balanitis xerotica obliterans](#). This is one of medicine's oldest operations and has often been depicted in ancient and religious art (pictured above right; by Signorelli). [Download a leaflet about circumcision.](#)



Prepuceplasty is effective in children with congenital tightening of the foreskin. Several incisions are made into the tip of the foreskin to expose the head of the penis. The foreskin then needs to be retracted regularly until it has healed completely. Prepuceplasty is totally ineffective in adults.

Frenuloplasty is the best option if the tightness is due to a short penile [frenulum](#), rather than a tight foreskin. However, a short frenulum may also be associated with some scarring of the foreskin, so full [circumcision](#) is still needed in some patients.

[Download a leaflet about frenuloplasty.](#)

Partial removal of the foreskin is not recommended. Scarring may return in the foreskin remnant and the cosmetic results, particularly during [erection](#), are often unacceptable.

More resources on Tight Foreskin (phimosis)

Some/all of these resources are links to external sites, the content on which BAUS accepts no responsibility for.

[Wikipedia - the foreskin](#)

Everything you wanted to know about the foreskin but were afraid to ask. Includes information about restoration of the foreskin following circumcision