Tower Bridge Hospital London

Tower Bridge Hospital London
97–99 Whitechapel Road, London E1 1DT
020 7916 0029 · Open 7 days, 9am–7pm
towerbridgehospital.co.uk

PATIENT INFORMATION · UROLOGY

Tight foreskin and balanitis
including the one thing never to do to a boy's foreskin

Foreskin problems are common at both ends of life — in young boys, where a non-retractile foreskin is normal and frequently mismanaged, and in adults, where tightness and inflammation have specific causes and specific treatments.

Go to an emergency department immediately if

- the foreskin has been **pulled back and will not go forward**, with a swollen, painful tip — this is paraphimosis
- there is **inability to pass urine**, or the foreskin balloons and urine only dribbles
- the glans is **dusky, blue or cold**
- there is **spreading redness, fever** or severe pain
- there is a **non-healing ulcer, lump or bleeding**

Paraphimosis is a urological emergency — the retracted foreskin acts as a tight band, swelling builds, and blood supply to the glans is compromised within hours. Do not wait. In an emergency call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

Never force back a boy's foreskin

At birth the foreskin is naturally fused to the glans. It separates on its own, gradually, over years — only about half of boys can retract it at ten, and most can by seventeen. **Forcing it back tears the tissue, causes bleeding and pain, and creates scarring that produces the very tightness it was meant to prevent.** It can also cause paraphimosis. Wash the outside only, with water. Do not clean underneath. When it separates naturally, teach gentle retraction, washing and — importantly — putting it back forward.

In boys

- **Physiological phimosis** — normal non-retractility. Needs nothing at all.
- **Ballooning** during urination is common, usually harmless, and settles as separation occurs.

- **Smegma pearls** — white lumps under the foreskin. Normal shed skin cells, not infection or cysts. Leave them.
- **Balanitis** — redness and soreness at the tip, common in nappies and in young boys. Usually settles with simple care.
- **When it is not normal**: a white, scarred, thickened ring that will not stretch; recurrent infections; painful urination; or persistent inability to retract in an older teenager. These need assessing.

Balanitis in adults

- **Irritant** — soap, shower gel, over-washing, or not drying properly. The commonest cause, and made worse by more washing.
- **Candida** — itchy red patches, sometimes with a partner who has thrush. Also a recognised presentation of **undiagnosed diabetes**, which is worth excluding in recurrent cases.
- **Bacterial**, and occasionally sexually transmitted infection — testing is sensible if there is any risk.
- **Skin conditions** — psoriasis, eczema, lichen planus.
- **Lichen sclerosus (BXO)** — a white, scarred, thickened foreskin that progressively tightens. This one matters: it is the commonest medical reason for adult circumcision, it does not resolve with creams alone in established disease, and it carries a small long-term cancer risk if left.

Self-care

Do

- Wash once daily with warm water only, and dry thoroughly
- Retract gently to wash, then always return the foreskin forward
- Use a plain emollient as a soap substitute
- Change condoms if latex or spermicide seems to trigger it
- Check blood glucose if it keeps recurring

Do not

- Do not use soap, shower gel, antiseptics or wipes
- Do not over-wash — twice a day makes irritant balanitis worse
- Do not leave the foreskin retracted
- Do not use a steroid cream long term without review
- Do not force a tight foreskin during sex

Treatment for a tight foreskin

- **Topical steroid cream** with gentle daily stretching resolves a large proportion of cases in boys and many in adults, over four to eight weeks. It is the first thing to try.
- **Treating the underlying cause** — antifungal, antibiotic, diabetes control, or treatment of a skin condition.
- **Circumcision** where steroid treatment has failed, where there is lichen sclerosus, recurrent infection, paraphimosis, or difficulty passing urine or with sex.
- **Preputioplasty** — a smaller operation that widens the foreskin without removing it — is an option for some.

Why come to us. This is a subject people put off raising for years. We offer discreet appointments seven days a week for boys and men, with examination, swabs and **diabetes screening and sexual health testing in-house**, prescription steroid and antifungal treatment, and **circumcision performed here** where it is genuinely indicated — with aftercare reviews included and fees published in advance. No referral needed.

Where to get help

Tower Bridge Hospital London
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020 7916 0029

WhatsApp **07903 284 189**
info@mhwclinic.co.uk
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In an emergency
Call 999, or go to the Royal London Hospital Emergency Department, Whitechapel Road, London E1 1FR.

When we are closed and it is not an emergency
Call NHS 111 or visit 111.nhs.uk.

Related: **Circumcision** · **Urology** · **Sexual Health** · **Paediatrics** · **All patient leaflets**

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This leaflet is based on current NHS, NICE CKS and British Association of Urological Surgeons guidance on phimosis and balanitis. It is general information and does not replace advice from a clinician who has assessed you. If your symptoms change or you are worried, contact us on 020 7916 0029, call NHS 111, or call 999 in an emergency.