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## **Letter to the Editor JAMA Pediatrics: In Reply to Undertreated and Untreated Pain Should Be Considered an Adverse Event of Neonatal Circumcision, by Sofia Bisogni et al. *JAMA Pediatr.* 2014;168(11):1076–1077. doi:10.1001/jamapediatrics.2014.1653**

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We would like to thank Bisogni et al., for their comments about intra- and post-operative pain as an adverse event (AE) to male circumcision (MC). Use of appropriate analgesia for pain management is a good practice that should be the standard of care during and after any surgical procedure as it can substantially control pain<sup>1</sup>. In a prospective study of 583 neonatal circumcisions performed between December 2005 and December 2008, when appropriate analgesia was applied, 93.5% of neonates circumcised in the first week of life showed no indication of pain on an objective standardized neonatal pain rating system used by the authors<sup>2</sup>.

The recently published manuscript<sup>3</sup> which found a low incidence of adverse events (AEs) (< 0.5%) associated with male circumcision in U.S. medical settings during 2001–2010 is based on data from a healthcare reimbursement claims database. This database captures only diagnoses and procedures billed to third parties. The analysis studied the association between 41 AEs, not including pain, and male circumcision. A search of the same healthcare reimbursement claims database for the ICD9 codes 338.18 (other acute postoperative pain) and 338.19 (other acute pain) detected one patient with pain associated with the male circumcision procedure among 1,400,920 circumcised males. Taking into consideration the possibility that pain may be an underreported AE in the healthcare reimbursement claims database used for this analysis, a more thorough analysis of the association of pain and male circumcision would require additional data sources, including information related to use of and type of pain control methods. As previously recommended<sup>3</sup>, future researchers studying the association between AEs and male circumcision should consider using additional data sources to ascertain AEs that are not captured in data from reimbursement claims.

## References

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