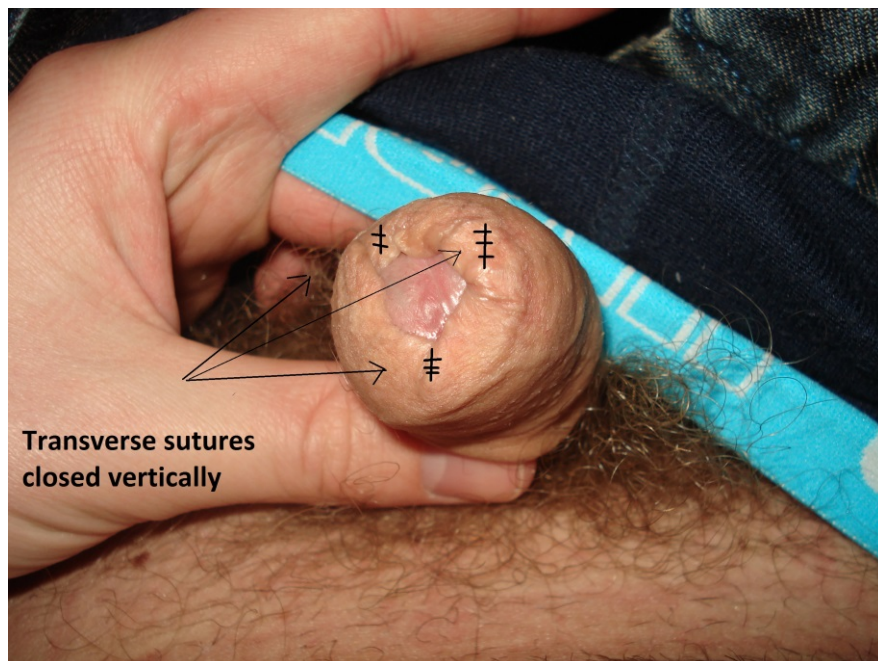


Finishing Touches to the Restored Foreskin

Written by Alex



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Living with an unruly foreskin

The most of the restoring men want to restore the foreskin to as close as the intact state as possible. Unfortunately, a restored foreskin tends to creep back and expose the glans both too often and at inopportune times than the individual would like. The main reason for that phenomenon is based on the fact that a restored foreskin lacks what is referred to as *the ridged band* or *frenar band*. In an intact foreskin, this feature does that the end of the foreskin constricts when the penis is in its flaccid state, and expands when the penis becomes erected – much like the fashion of a rubber band.

But however, there are several ways to help make a restored foreskin behave. The reason I have written this, is to show you, restoring guys, which possibilities that exist today in the way to recreate the function of the ridged band.

Information at even Internet today, remains scarce about touch up surgeries. I hope, with this, that you can see the existing options today and the pros and cons of the methods itself. The illustrations are my own penis and some information is based on my own experience of this field, but much of the information is found in chapter 19 in the book «*The Joy of Uncircumcising*», written by Jim Bigelow (2002).

As you know, I have undergone several different touch up surgery procedures over the last years. These methods, and the results I achieved from them, are well explained in my site section of foreskinrestore.com. I will mention them again here for a neater overall information, but first and foremost I will focus on the other available methods that exist today. I will also discuss pros and cons of surgery itself, and which non-surgical methods one can use to hold the foreskin over the glans

Non-surgical methods of keeping the glans covered

«It hasn't gone without notice that some men are willing to take the effort to wear an o-ring or a tape-ring on a permanent basis to keep their glans covered, rather than submit to any surgical touch up to the restored foreskin,» Bigelow claims. This is actually quite understandable, given that a touch up surgery is indeed an additional surgery, with all the potential risks and costs involved with that.

There are several non-surgical methods that one can use to keep the glans covered without surgery. Please take into account that neither of these mentioned methods create a permanent taper foreskin. *The only way to get a restored foreskin permanently taper, is to undergo a touch up surgery.*

Here are the non-surgical methods you can do, suggested by «*The Joy of Uncircumcising*»:

1. **Develop a longer foreskin.** The advantage of this is obvious. The individual acquires a better functioning foreskin without any of the risks involved with even minor surgical procedures. The disadvantage of this is that expanding the additional needed length of the foreskin may add months, or even years, to an already lengthy process. Further, it seems obvious that there are individual differences in how amenable any given person's skin is to indefinite expansion. *At some point, the individual need to set realistic goals for himself, in the terms of the cost in time, effort and frustration, should he determine to develop a long enough foreskin to assure reliable coverage of the glans.*
2. **Retainer ring.** An o-ring is remarkable useful in keeping the glans covered by the foreskin. The advantage is that these rings are very cheap and exist in many sizes. An o-ring is also quick to attach and remove when needed. The disadvantage is that the ring is conspicuous while nude in public areas.
3. **Tape ring.** Much similar to the o-ring. With a small strip of inconspicuous skin colored tape, the tape ring can be worn when using public facilities without the tape-ring being embarrassingly visible. The disadvantage is that the tape can irritate the skin, and that it is more effort to attach and remove the ring.
4. **Thighter fitting underwear.** Many restoring men find that they can pull the new foreskin in place over the glans and then hold both the foreskin and penis in place by wearing the thighter styles of underwear. The advantage of this is that it gives a fairly reliable coverage. The disadvantage is that retaining the foreskin over the glans by this method is neither certain nor foolproof. Further does this nothing to keep the new foreskin in place while nude in public places.

Surgical touch up methods

To remove excess foreskin in a sense that makes the end of the restored foreskin tighter, is one of the main techniques permanently to get a tighter foreskin. Another method, the circular purse string suture, does not involve any actual surgery, but an insertion of a circular thread in the end of the foreskin. I have already in detail discussed my experience with this particular method at foreskinrestore.com. I will therefore only mention shortly about this method below..

The surgical touch up surgeries that I have undergone personally are:

- The circumferential purse string suture*
- V-plasty method*
- The single elongated diamond incision*

All these methods were performed by the same surgeon in the period 2011-2018. For more detailed pictures and information of my own circumferential purse string suture and V-plasty method, please proceed to my site-section of foreskinrestore.com.

The methods for touch up surgery can be categorized as follows:

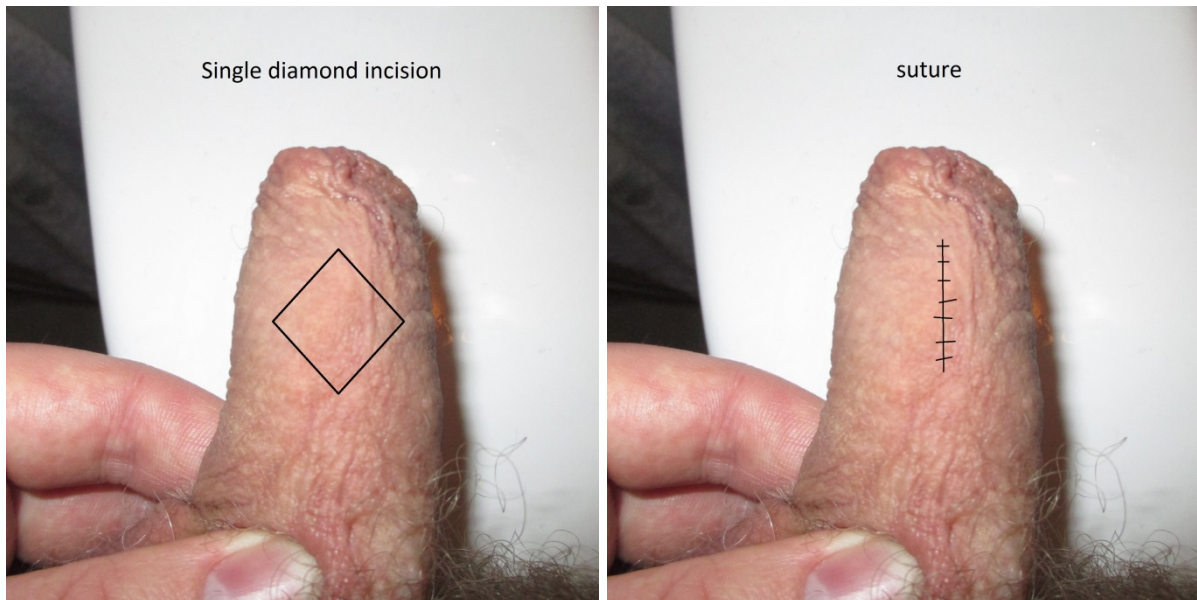
1. Tissue removal techniques
 - a. Single section reduction
 - b. Elongated single section reduction (also called «diamond incision»)
 - c. Multiple section reduction
 - d. V-plasty

2. Non-tissue removal techniques
 - a. Transverse incisions
 - b. Circumferential purse string suture

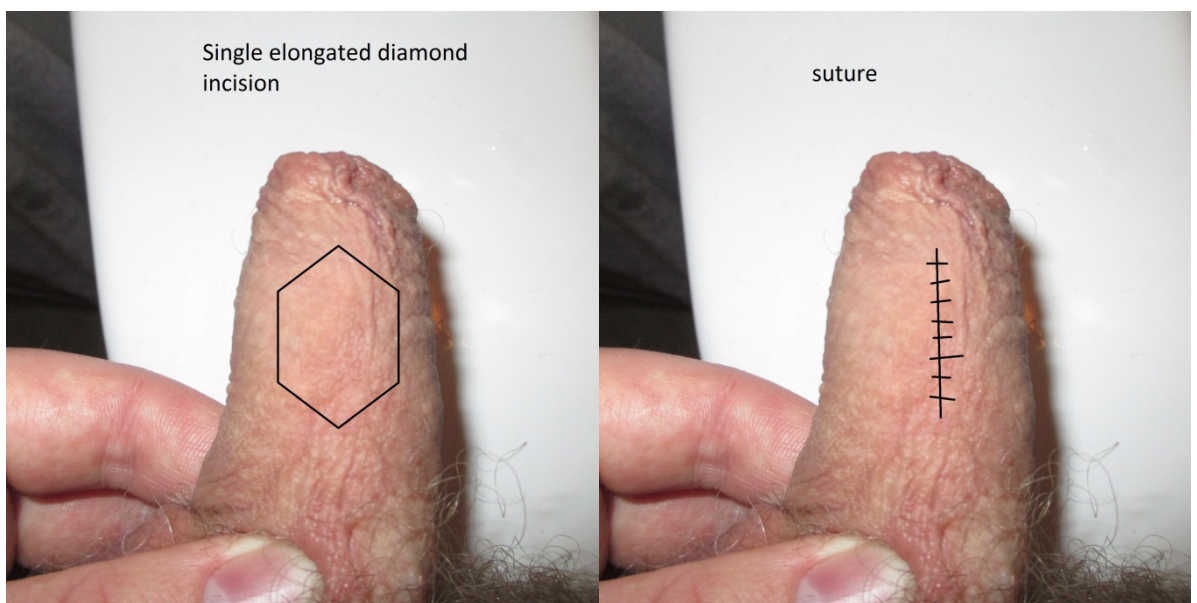
Tissue removal techniques

In «*The Joy of Uncircumcising*», written by Jim Bigelow (2002), it is mentioned several tissue removal techniques. As an illustration to every particular method, I have simply used a foto of my own penis to illustrate the methods.

1. **Single section reduction.** This simple removal of a diamond-shaped section of skin is suggested for the individual whose new foreskin is not too long, but will cover most, if not all, of his glans. Further, this pattern is best suited for the individual who needs a relatively little reduction in the orifice of the foreskin



2. **Elongated single section reduction.** This pattern is suited for the individual who has a longer foreskin and wishes it to taper out past the glans. Under local infiltration anesthesia, the incision is done as the illustration below shows, and then sutured:





My own personal experience from the single elongated diamond incision is that the results are very promising. It created full erect coverage and the foreskin seems and appears very neat at the end of the foreskin. This method was performed as the last touch up surgery in 2018 and I am delighted with the results. For me, actually I feel this method gave the best results both when it come to effectiveness of the thightning and the cosmetic results.

However, since my foreskin was relative narrowed from the two other procedures, it might became slightly too tight after this method. But this was easily corrected by gentle manual stretching with applied topical steroide cream over a period of one week.

My own resultstwo months after the single section elongated diamond incision:



My own results today, two years since the single section elongated diamond incision

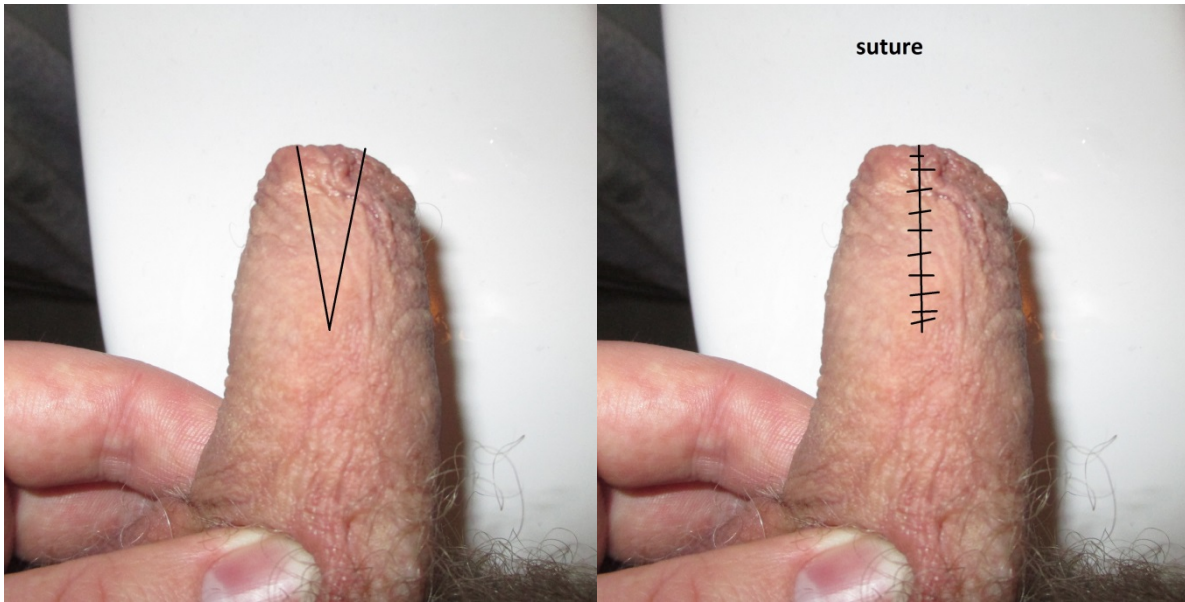


- 3. Multiple section reduction.** There are doctors who suggest the removal of multiple, smaller diamond-shaped sections to achieve orifice reduction. Some have suggested two reductions at the 4 and 8 o'clock positions at the foreskin, or at 6 and 12 o'clock positions. One doctor Jim Bigelow spoke with, suggested three reductions at 4, 8 and 12 o'clock positions. In each case, the intent is to make multiple smaller reductions which will result in the finished orifice having a more natural line. In another case, like the fotos below illustrate, one doctor modified the design of the incision to resemble a narrow, elongated leaf – symmetrically tapered at both ends. He made two such incisions at 4 and 8 o'clock positions, according to the information in the book.

Here is an illustration of the multiple section reduction



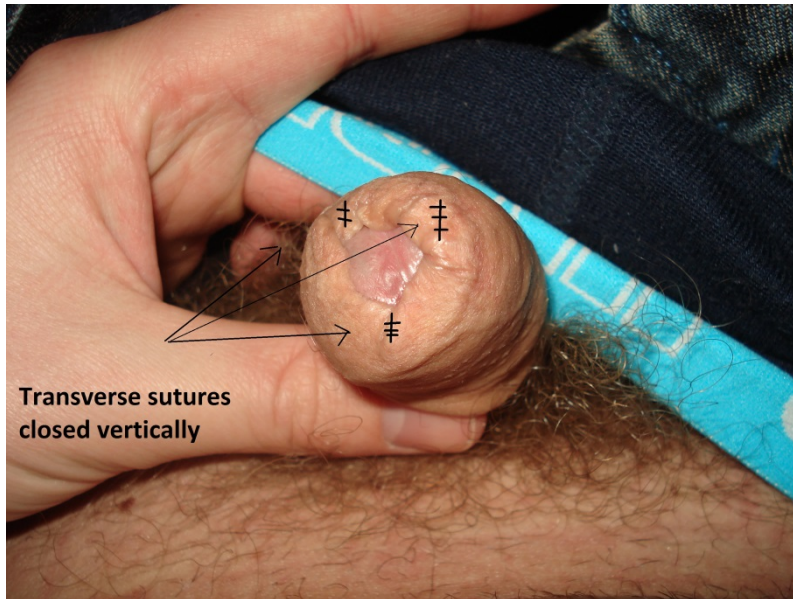
- 4. V-plasty.** I have taken this particular method, and it's well documented in my site-section of foreskinrestore.com. It involves removal of a V-shaped skin section.



The Joy of Uncircumcising claims that the advantage of the tissue-removal procedures is that the reducing orifice is relatively flat, smooth and circular. The major disadvantage is that these procedures involve an actual removal of tissue. This factor, of necessity, requires that a judgement be made as to how much tissue to remove and how effective the final orifice will be in terms of retaining the foreskin over the glans. These are formidable judgement calls to be made while performing a rather delicate surgical procedure. It is important for me to mention that it's always better to have too much skin rather than too little, before you proceed to a touch up surgery. There are men who have taken touch up surgeries before their foreskins were long enough in the hope of shortening the restoration time, but ended up with still having problems to permanently have their glans covered as intended.

Transverse incisions

This method involves making a number of short incisions around the orifice of the foreskin, and then suturing each incision in the opposite direction. Theoretically, a first set of incisions could be made, and after healing, the results evaluated. Later, if the first procedure has not resulted in a sufficiently reduced orifice, a second set of incisions could be made.



The advantage of the transverse incision method is that it does not involve any actual tissue removal. It is also a lesser risk of «going too far» with this method, compared to the tissue removal techniques.

The disadvantage of the transverse incision method is that the reduced orifice has a somewhat scalloped appearance and does not lay flat or circular in the neater fashion of the tissue removal techniques.

Circumferential purse string suture

This method is well explained in my site section. It involves implanting an absorbable single long suture circularly around the inside of the circumference at the very end of the foreskin, between the outer and inner foreskin. The intended function is to pierce the skin to create somewhat a constricted band.



This is some of what the surgeon, who performed this method on me, wrote in my own medical journal:

«This concerns to tight the foreskin by using an absorbable thread like a circular suture between the outer and inner foreskin layers.

By sterile washing and local infiltration anesthesia, one Vicryl 2.0 thread on needle be inserted about 12 o'clock position on the foreskin and enters the distal part of the skin so that the needle cuts through the outer and inner layers in the circumference around. Tighten and then making it a usable but tight opening compared to earlier».

The advantage of the circumferential purse string suture is that this method does not involve an actual surgery and that the circular thread can be inserted relative quick and easily. Also that this method does not create any visible scar.

The disadvantage of the circumferential purse string suture is that it takes several weeks before the remaining results become apparent. Further the effectiveness and final outcome of this method can be uncertain and hard to predict. You have to leave the thread and the foreskin in place for about six weeks, which requires a longer absence from sexual activity and that cleansing under the foreskin can be more challenging during the healing period.

Permanent implant of an elastic band

Since I originally posted this information, I have heard whispers and become aware of that it possibly could exist a method that involves a permanent implantation of an elastic band.

For I had once a consultation with an urologist in Norway who suggested an implant of an elastic band at the end of the foreskin on permanent basis, just to recreate an even more natural imitation of the ridged band. I never got the chance of actually ask this particular doctor more deeply about how he would perform this version and what kind of surgical elastic band he would have chosen for this purpose.

I have trawled the Internet around trying to get some more information about this plastic elastic surgery, but with no luck at all – at least when it comes to the purpose of foreskin restoration.

Pros and cons of surgery itself

Jim Bigelow claims in the book that «to take a touch up surgery is a very personal decision. Each individual must take into account the desired results, the cost, the pain and the risk associated with such a procedure. Furthermore, one of the biggest deterrents at the present time is the lack of doctors who will actually perform these surgeries. Many doctors who performed such procedures previously, are either retired or not currently work at the field».

Since I now has alot of personal experience from the touch up surgery field, I can certainly add that I totally agree with Bigelow about that!

In the USA, I know one particular doctor, Dr. Harold Reed, who still works on the field. His clinic, the Reed centre, is located in Miami, Florida. He performs both finishing touch up surgeries on an already restored foreskin, and also he performs a complete surgical foreskin reconstruction. His prices are prohibitive compared to many other clinics.

In Norway, and perhaps in other countries in Europe as well, currently the prices to get a touch up surgery performed, tend to be much lower for such surgeries compared to USA. Since the US\$ has been much stronger against the Norwegian krone (NOK), my impression is that it is far more cheaper to take plastic surgeries here nowadays, compared to USA. As of April 2020, the Norwegian krone collapsed entirely against many of the world's currencies, due to the Covid-19, including the US\$.

The doctor who performed the touch up surgeries on me, had a fee of only about US\$ 250⁽¹⁾ for the purse string suture and US\$ 300 to US\$ 500⁽¹⁾ for tissue removal techniques. I am sorry to say that he is not working on this field anymore.

⁽¹⁾The prices are based of the currency conversion May 2020. Please notice that prices can vary alot from clinic to clinic. I recommend to compare prices. If you consider taking surgery abroad, also keep in mind that additional costs of air ticket, transportation, lodging and so on will occur. Please also keep in mind changes in exchange rates, and what your health insurance will cover.

However, it really seems, as Bigelow also claims, that the lack of doctors who are willing to perform touch up surgeries can might be the main obstacle of finishing the restoration process by undergoing such surgery. Many doctors are neither trained nor skilled to perform such surgeries, based on the fact that it is relative unlikely to perform such surgeries and that many doctors simply are totally unaware of foreskin restoration at all. I struggled before I found that surgeon who was willing to perform this.

If one asks me if I recommend to take touch up surgeries to finish the restoration process, and to get the most realistic results, I can only say, based on my experiences, that I have achieved very promising results of the procedures – results I never would have achieved without taking such procedures. I'm feeling that it was the right choice for me, and that I am delighted with the results. I feel that it was well worth the money and effort of taking these procedures.

Another important advantage of taking a touch up surgery is not only that you will end up with a foreskin which is closer to an intact one, but potentially you will also could get the glans covered permanently, at least in the flaccid state, much faster than having to grow a much longer foreskin to achieve the same.

Since many restoring men dream about having even erected coverage, a touch up procedure can eventually makes this possible!

I have now achieved full and reliable coverage in flaccid state, and almost entirely coverage in erected state.

It is safe to say that I feel that my life has changed after I restored myself.

However I suggest to do research online and take consultations with several doctors. Please notice that it is risks with touch up surgeries also. One of the major risks – along with the general risks with every surgery – is that you may need multiple surgeries to find the perfect degree of tightness. Also it is a potential risk of going too far; that one ends up with a phimosis or paraphimosis which may require an additional surgery to correct.

If you have a penis that «grows» alot, both in lenght and thickness, from flaccid to erected state, it can complicate the appropriate degree of thightning. For me this also was especially true, since also my glans become much wider in diameter in erected state. This made it more challenging to adjust the tightness into the appropriate level. Please take into account that your foreskin shall function properly when erected also.

It is easy and tempting to think that it is better that the surgeon creates a foreskin too thight, and that one easily can widen out the foreskin by stretching techniques if one goes too far. Be aware, guys, it is not that simple. For pierced, fibrous and scarred skin is little responsive to stretching. I became aware of this when my foreskin became little too tight after the last procedure. Fortunately some gentle streching with a steroid cream was sufficient to solve the slight over-tightning problem. But belive me, in the first days of stretching it felt like trying to stretch a metal thread inside my foreskin. Gradually the phimotic ring became a bit softer and more flexible. Now the skin is perfectly tight and has some flexibility.

So my overall assessment personally is that the techniques that exist today for narrowing a restored foreskin certainly can create a neat apparence and a narrower well-functioning foreskin, but neither of the methods (probably except plastic elastic surgery) can recreate the full natural function of the ridged band, when it comes to flexibility. My personal experience is that the narrower band created from the surgeries lacks some of its natural flexibility.

However as stated before, I am very delighted with both the non-surgical restoration and the finising touch up surgeries to my restored foreskin. I feel that I have as natural and intact foreskin that it is possible to get, and I am happy that the restoration journey is over and done.

Please note that I am not a medical professional. Neither I can recommend nor discourage taking a touch up procedure, for that is a very personal decision. I recommend to seak medical advices by urologists or plastic surgeons and read much information. Also all potential risks associated with the surgery must be taken into account.

Results today, as of May 2020



