



“Just the Tip”

A perspective of intact penis piercings.



aka:

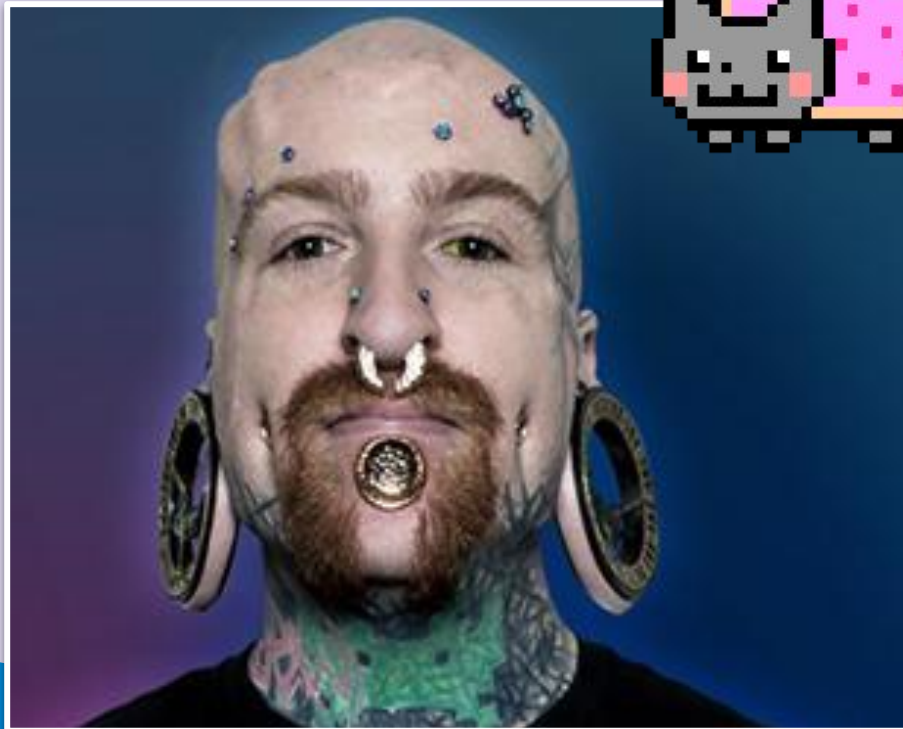
- Intact facts
- Hooded ninja
- FOREskin clovers
- Boyz in the hood

- **Opal Heart Piercing** (Perth, WA, Australia)
- **Stone Heart Body Art** (Sydney, NSW, Australia)
- Has been piercing 17ish years
- APP Member for 9 years, AUPP Board Member
- Touches lots of wieners, mostly intact



joeltron

- Proudly intact bepis
- Coder and n3rd who loves kitties ☐Ⓞ∪Ⓞ☐



Meat and greet

- **The Powers That Be** (Vancouver, Washington)
- Has been piercing professionally since 2003
- Worked at Infinite Body Piercing, a noted genital piercing shop, from 2007–2015.
- Has handled many penises, mostly circumcised



Kellan Smith

- Circumcised since 1981
- Is cool b/c he has a gif
- Isn't able to attend APP :(

Meat and greet

Disclaimer!

- The views in this class come from professional body piercers and might not reflect on the APP's values or standards
- Everything is correct to our best ability
- We apologize if any content offends anybody, our sole intention is to simply educate fellow piercers
- I have and will continue to put forth my best effort to refer to genital anatomy without gendered language, and welcome any conversation and critiques regarding this topic



Disclaimer!

Attending this class does NOT mean:

- You are qualified to perform the piercings we cover today
- You have “training” to do these piercings
- You are a “foreskin piercing wizard”



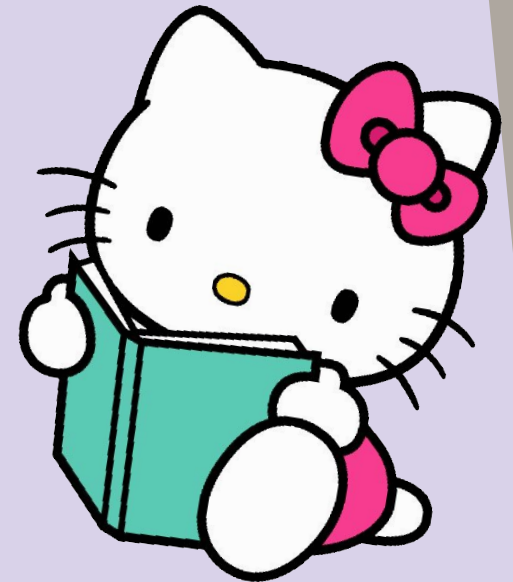
Rights and stuff

- You are welcome to freely distribute the information (including images and videos) for the purposes of piercing education
- You are not permitted to share or reproduce the information in this presentation for the purpose of profit or teaching a class yourself
- A QR code with this presentation in PDF will be shared at the end of the class so don't stress about trying to take photos



Whatcha learning?

- We will include basic facts that may be known to experienced piercers
- Take what works, leave the rest
- The content is based on our own extensive experience
- There will be a Live Q&A at the end, so submit questions in CrowdCompas



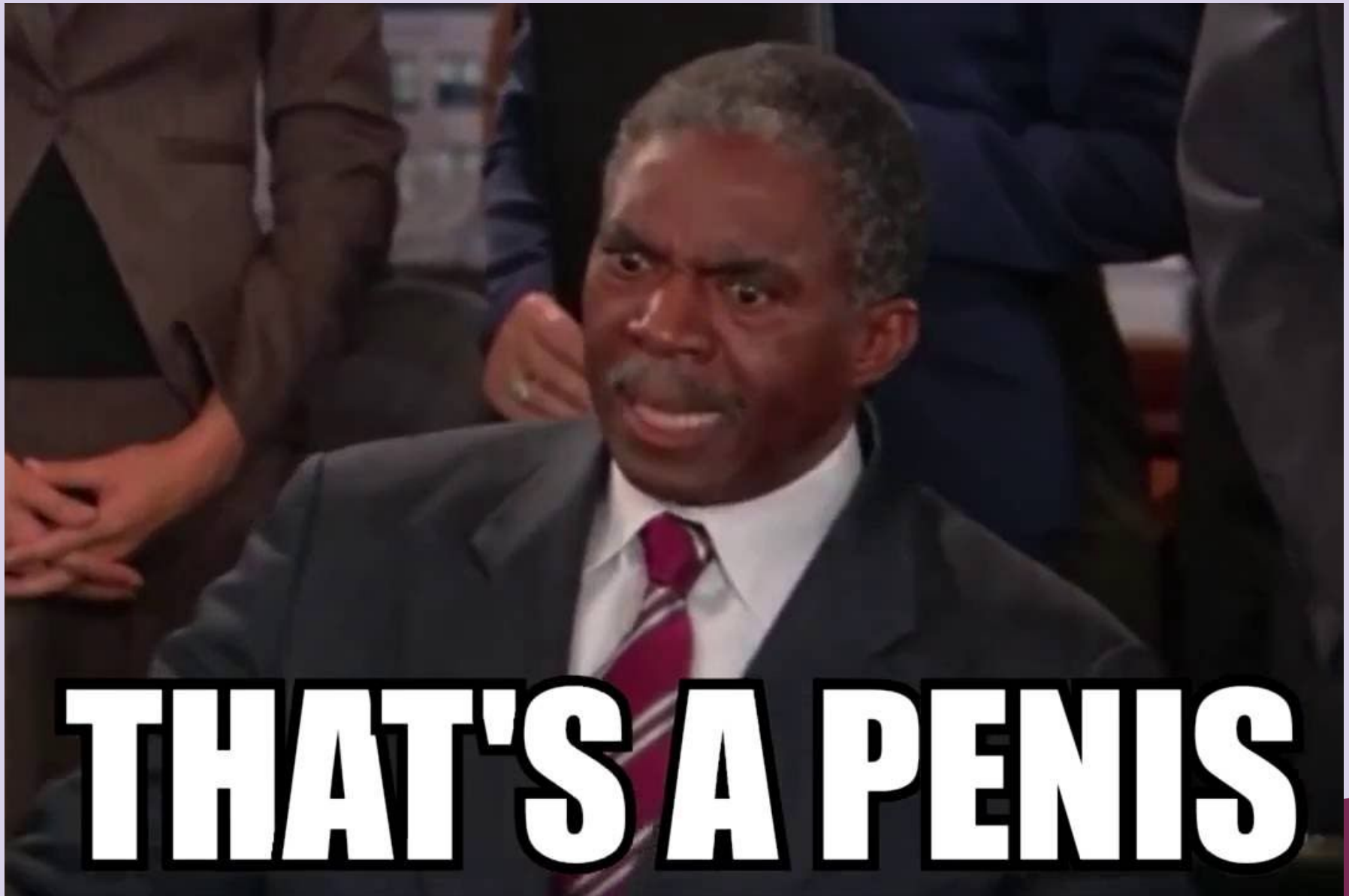
Holla back y'all?

Now that you know all about me,
let me find out a little about you all!



- Raise your hand if you perform penis piercings.
- Keep your hand up if you've ever performed a piercing on an intact penis.
- Keep your hand up if you frequently perform intact penis piercings (1 or more a month)

WARNING: Genitals ahead



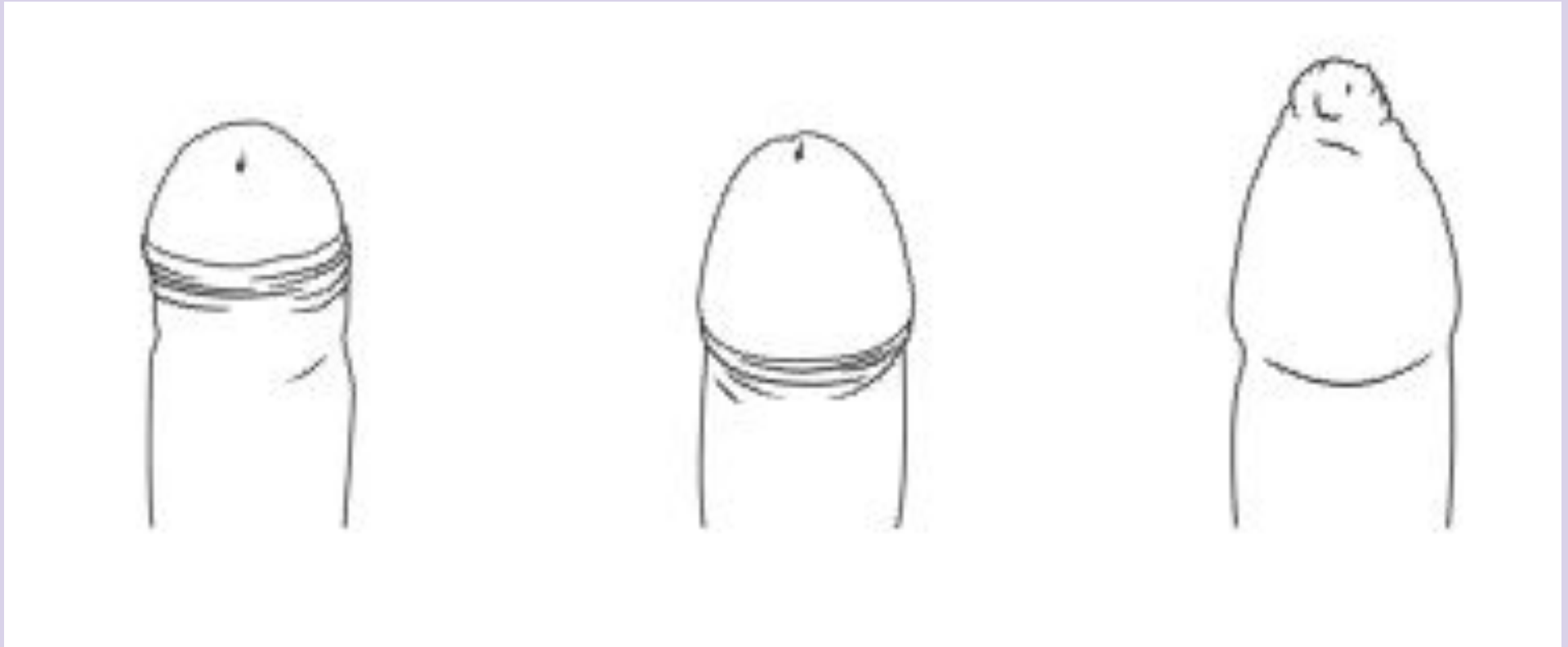
(duh)

Upon completion, you will be able to:

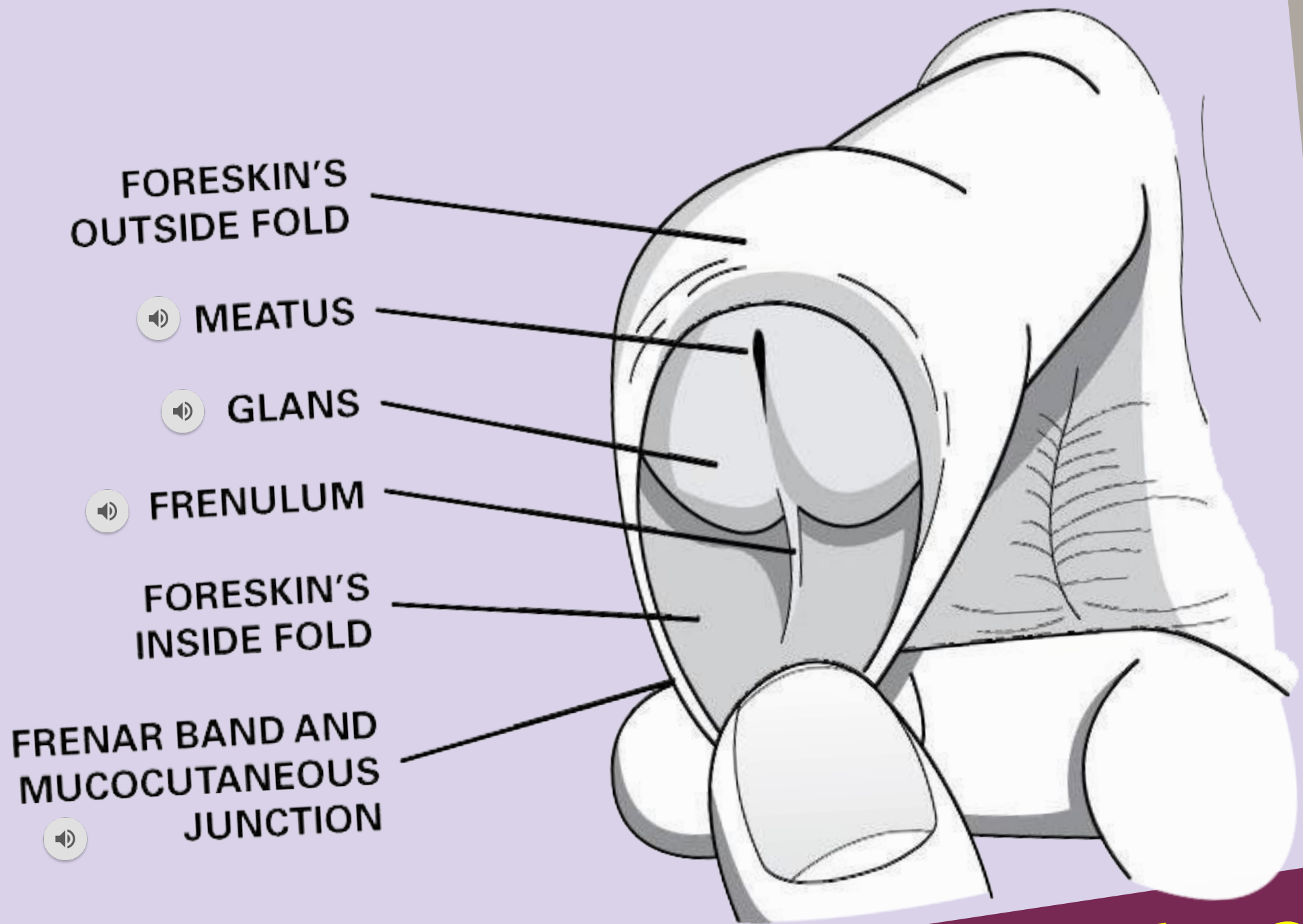
- Demonstrate knowledge of international circumcision statistics and how it will affect your practices when performing piercings
- Identify the differences in procedure when piercing a circumcised and intact penis
- List the complications that can arise from incorrect placement or aftercare

Class goooooals

The foreskin is the sheath of skin that covers the head (glans) of the penis



W.T.F. is that?



FORESKIN'S
OUTSIDE FOLD

MEATUS

GLANS

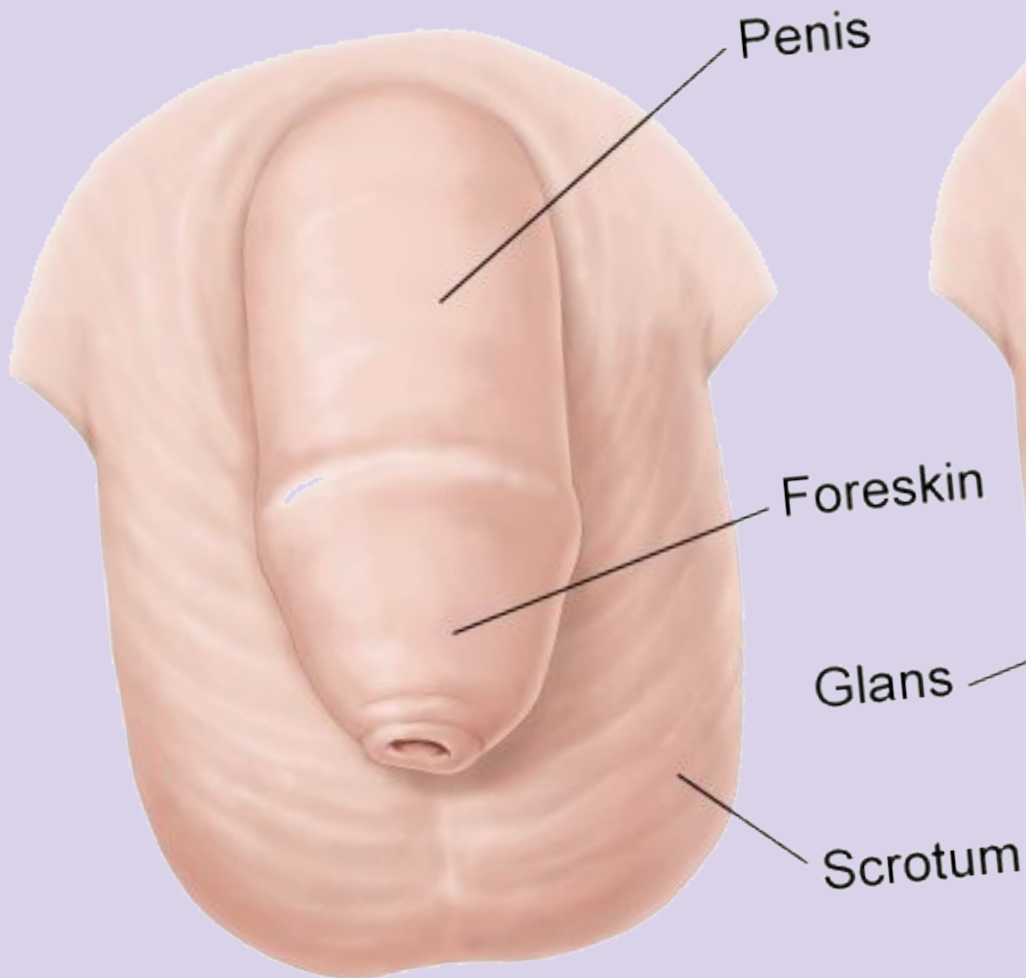
FRENULUM

FORESKIN'S
INSIDE FOLD

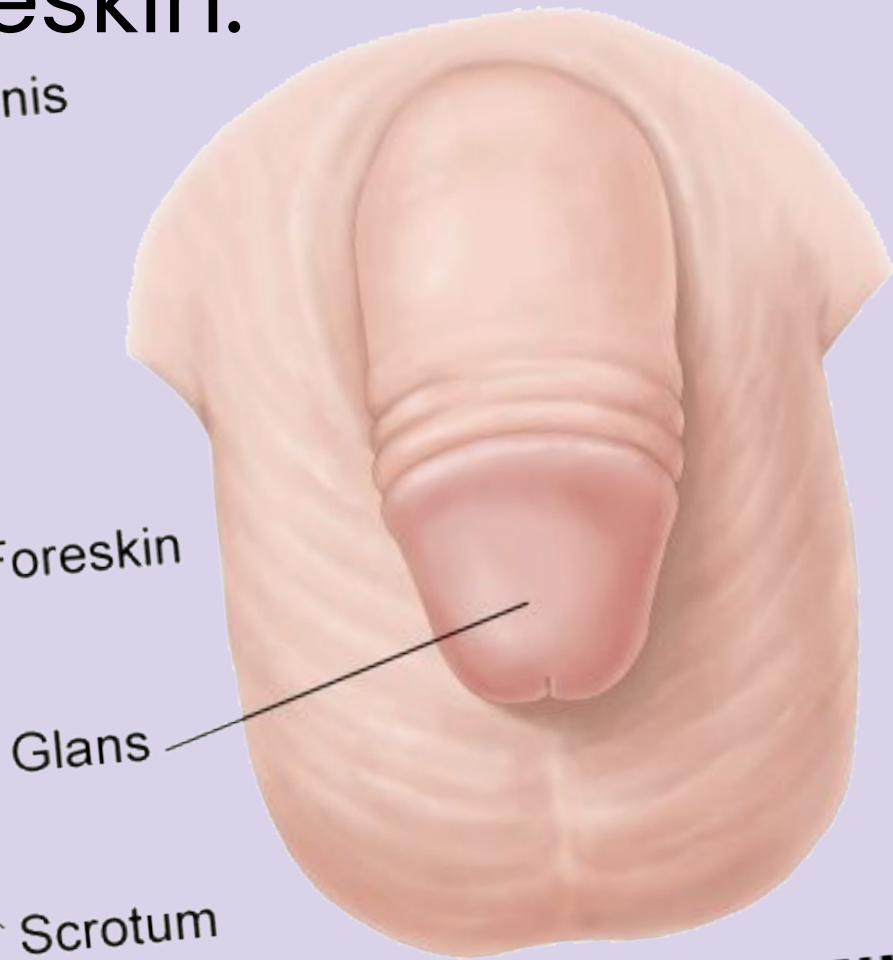
FRENAR BAND AND
MUCOCUTANEOUS
JUNCTION

Peek-a-boo!

Circumcision is the surgical removal of the foreskin.



INTACT PENIS



CIRCUMCISED PENIS

What is that?

The term "uncircumcised" suggests that to be circumcised is the standard, which is an assumption made by a culture that practices penis circumcision as a standard.

We really should be saying
"intact" or **"natural"** instead.

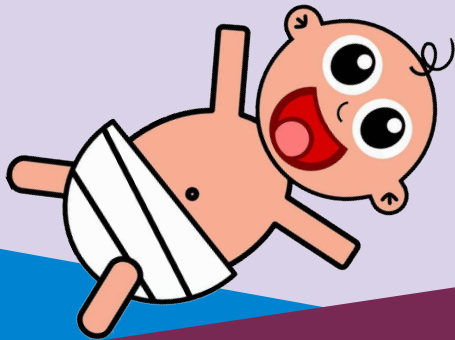


Correct terminology

Circumcision is typically done as soon as the baby is born, or within the first month of birth.

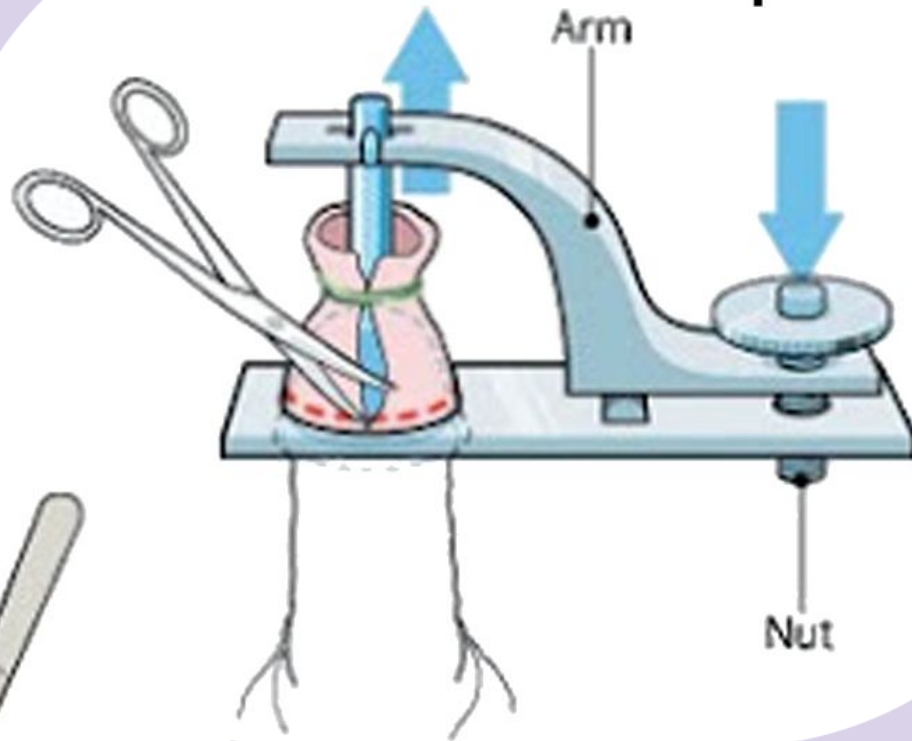
Local anesthetic is used to numb the area and the surgery is performed while the baby is still awake.

Infant circumcision doesn't require sutures, the healing is quick, cosmetic outcome is usually excellent, and it is usually quite cheap (under \$500 up to 11 weeks old).

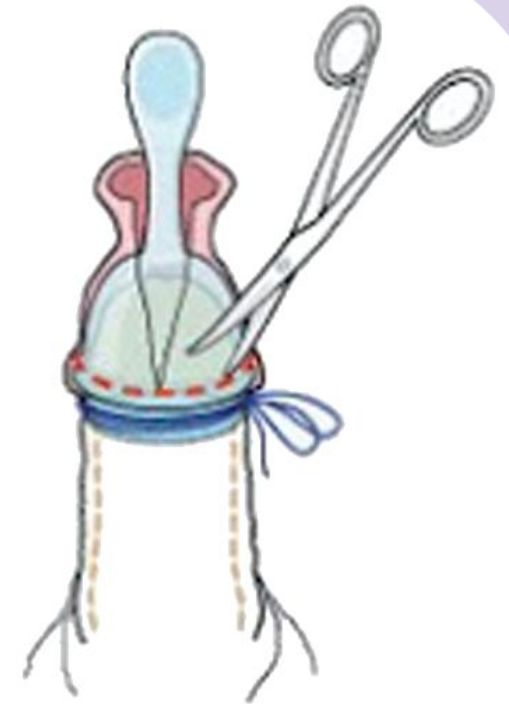
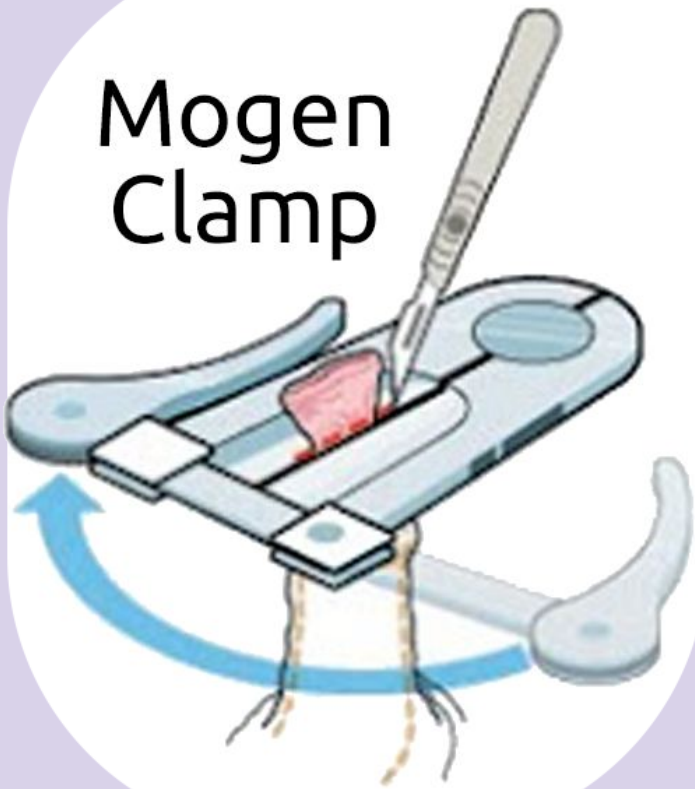


Infant Circumcision

Gomco Clamp



Mogen Clamp



Plastibell

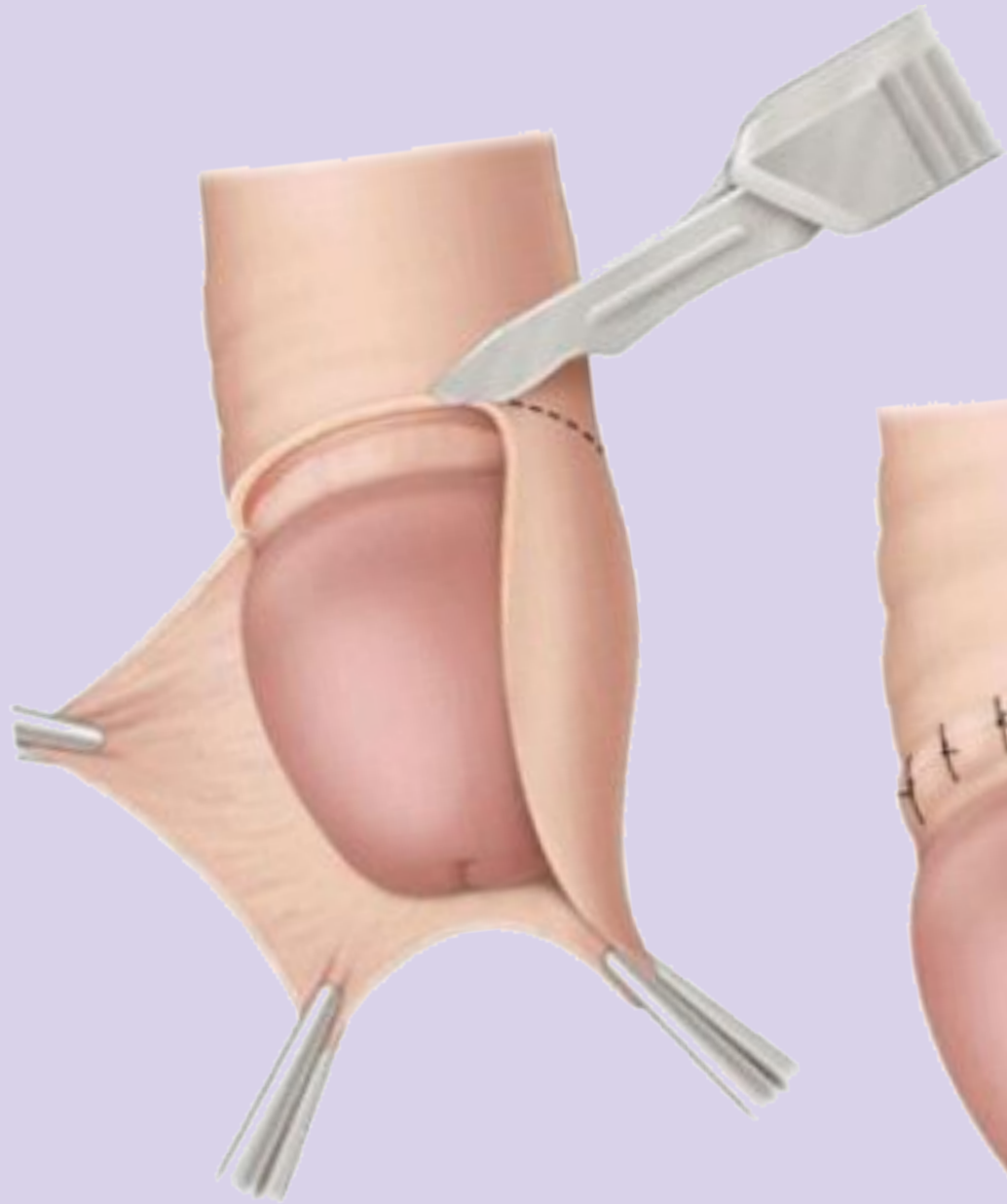
Infant Circumcision

Adult circumcision is most common in the late teens or early 20s as they move out and start becoming sexually active.

Typically, a cut is made from the top tip of the foreskin down and is extended both ways around the head. With the excess tissue removed, the skin from the penis and the the two remaining edges are stitched together.

This procedure is done under general anesthetic and takes around an hour and costs upwards of \$2000. Discomfort is usually easily manageable during healing and sensitivity usually lasts 2-3 weeks.

Adult Circumcision



Adult Circumcision

What are the benefits of circumcision?



Why snip the tip?

What are the benefits of circumcision?

- An ancient practice that has its origin in religious rites
- A mildly decreased risk of urinary tract infections
- A reduced risk of some sexually transmitted diseases in people with penises
- Prevention of **balanitis** (ba·luh·nai·tuhs), the inflammation of the glans
- Prevention of **balanoposthitis** (ba·luh·nao·pos·THI·tis), the inflammation of the glans and foreskin
- Prevention of **phimosis** (fai·mow·suhs), the inability to retract the foreskin
- Prevention of **paraphimosis** (para·fai·mosis), the inability to return the foreskin to its original location

Why snip the tip?

What are the benefits of being intact?



Intact facts

What are the benefits of being intact?

- Increase in your sensitivity during sex, as the foreskin slides back and forth over the glans
- Increase in your partner's sensitivity during unprotected sex, as it can act as a natural version of a ribbed condom
- It protects the glans (head of the penis) against urine, faeces, and other types of irritation
- It protects against infection or scarring of the urinary opening (although this is rare)
- Most importantly - more skin to get pierced!

Intact facts

What are the risks of circumcision?



Risky business

What are the risks of circumcision?

- Pain (uhh duhhhh)
- Risk of bleeding and infection
- Irritation of the glans
- As with any surgical procedure, serious health issues or death
- Increased risk of meatitis (inflammation of the opening of the penis)
- Scarring and other unexpected issues, Skin bridges
- Risk of injury to the penis



Risky business

**What happens if you are circumcised,
but wish you weren't?**

REGENERATE

(v.)
to regrow

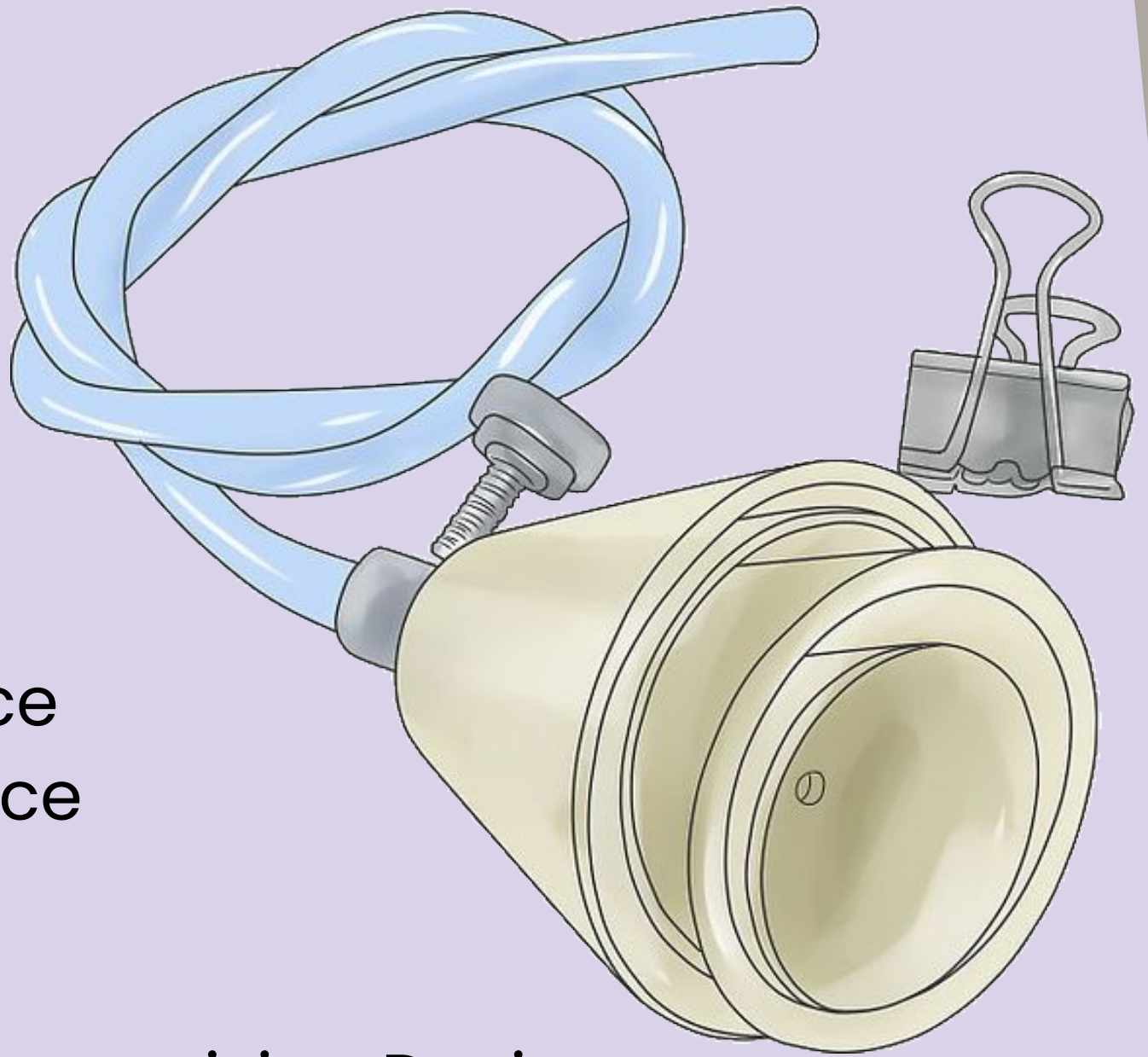


Can it grow back?

Many circumcised people are discovering that they can return their bodies to a more natural, intact state. Working on the principle that skin will grow when gently but continuously stretched, the process can be very effective, although it may take several years to complete.

While a "restored" foreskin may never regain the level of sensitivity of an uncircumcised foreskin, many restored people report great satisfaction with the process in terms of sensitivity, appearance, and emotional completeness.

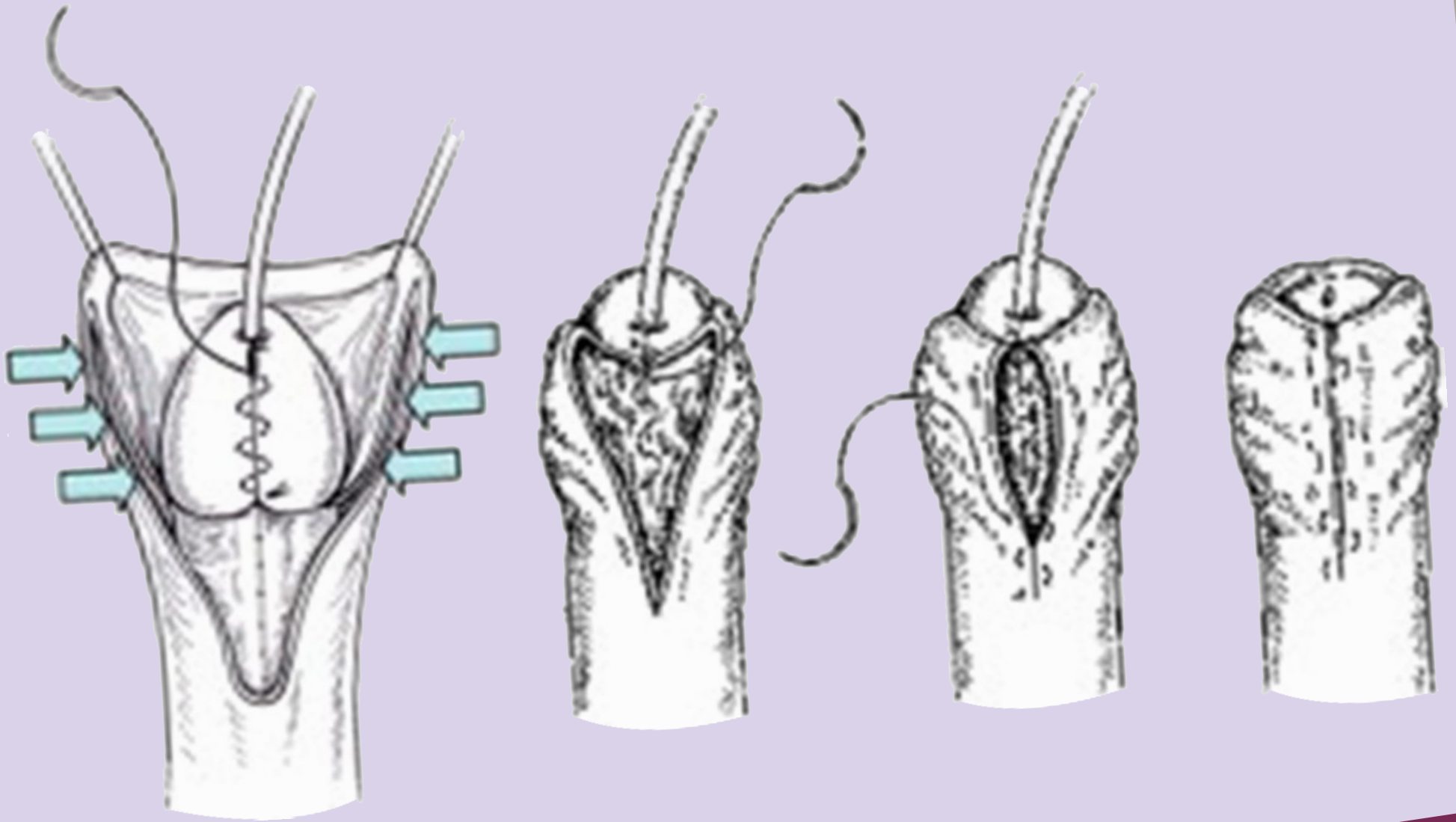
Can it grow back?



Examples:

- TLC tugger
- TLC-X device
- CATIIQ device
- DTR device
- Foreballs
- Penile Uncircumcising Device

Restoration Devices



Good old surgery!



Statistics!!!!

- The circumcision rate in newborns in the US has declined from 83% in the 1960s to 77% in 2010 [Dr. Brian Morris & colleagues]
- The circumcision rate among US males age 14-59 is 81% [Centers for Disease Control and Prevention]
- The United States has the highest rate of non-religious circumcisions of male infants in the world at 54.7%. This rate peaked around 1965 at approx 85%
- Statistics presented at the International AIDS Conference in Vienna in 2010 state that 33% of infant males were circumcised, a large drop compared to 2006 at 56% [New York Times]
- In contrast, most Western European countries have circumcision rates less than 20% [wikipedia]
- Estimated 229 deaths per year from circumcision in the USA [Robert Baker]

Statistics!!!!



% of circumcision of USA male newborns

Snip-tistics!!!!

What does all this mean to me?

People aged 18–20 and older (born after 2002) will have a significantly higher chance of being intact.

That means if you offer genital piercings, you **WILL** have intact clients coming in and if you aren't ready, you may get caught with *YOUR* pants down!

get to the point!

What shouldn't (generally) be done



Don't be naughty!

What shouldn't (generally) be done

- **Dydoes** - generally not advised as the glans are far less defined and don't protrude enough
- **Non-traditional frenums** (not directly behind the glans) - the tissue is often too thin and movement is high which can lead to migration
- **Apadravyas** - when the client's foreskin is too tight to accommodate the extra barbell size
- **Ampallangs** - significantly harder to heal than Apadravyas as they can't "tilt back" when the foreskin is in returned state

Don't be naughty!



They see me rollin'
(back your foreskin)

What if I hurt my client's foreskin?

At birth, most or all of the foreskin usually remains attached to the head of the penis. Around the age of 5 the foreskin will begin to detach from the penis tip and gradually be able to be retracted without tightness or discomfort.

Parents will generally teach their children correct hygiene and instruct to do this in the shower while cleaning with a mild soap. It's not uncommon for some foreskins to only become easy to fully retract between the age of 10-17.

Masturbation and sexual intercourse will naturally also stretch the foreskin and allow it to be retracted easier.

Generally speaking, you shouldn't have issues by the time they are of age to get pierced.

They see me rollin'
(back your foreskin)

How to retract a foreskin

While holding the base of the penis in one hand, use your thumb and index finger of the other hand to grip the foreskin over the head of the penis.



Gently slide your fingers towards the pubic mound to expose the head of the penis. If they have a tighter-than-average foreskin, you may need to go slower and with deliberate motion.

If they feel pain (not just discomfort), stop and ask if they would like to show you how they retract their foreskin. They may simply not be able to and they may wish to see their doctor for treatment.

Usually you will need to hold the foreskin back manually while piercing, but try not to leave it retracted for too long as the area is sensitive and can dry out quickly.

They see me rollin'
(back your foreskin)

How a client can correct a tight foreskin

If you are unable to retract your client's foreskin without pain, they may need to stretch the tissue prior to getting a piercing done.

It's recommend to partially retract the foreskin under running warm water in the shower or bath as the heat and humidity will aid in the softening of the skin and make the process more comfortable.

They should then gently retract the foreskin until mild discomfort is felt and hold it there for a short period of time, usually 30-60 seconds. Suggest repeating this once or twice a day for several weeks until it becomes easier and more comfortable to pull back.

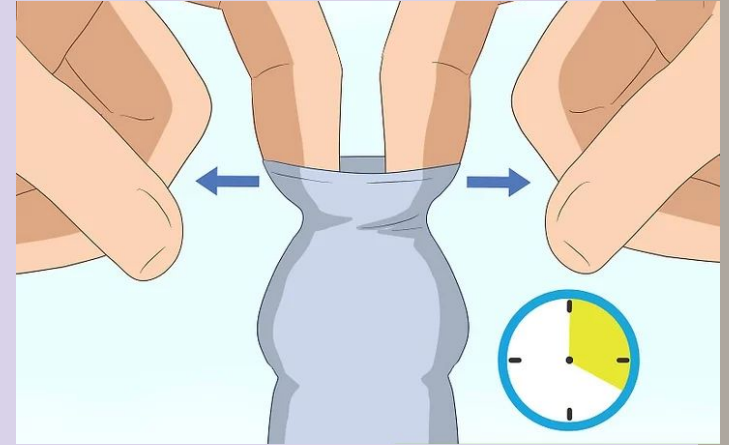
Tell them to stop the exercises and see their doctor if they experience excessive pain, redness, or bleeding.



They see me rollin'
(back your foreskin)

How can a doctor help?

The doctor may suggest more intensive exercises to stretch the opening up by gently pulling with their fingers for 20-30 seconds at a time for 3-5 minutes and up to 3 times per day over several weeks.



Alternatively they may suggest a silicone "flesh tunnel", which is placed under the foreskin for a few hours a day to stretch it out.

Frenuloplasty: The surgical cutting of the foreskin on the underside of the penis, if partially attached, to allow for easier retraction.

Preputioplasty: The medical cutting and manual stretching of the foreskin to keep the appearance the same in a less-invasive procedure than circumcision.

They see me rollin'
(back your foreskin)



Pierce different.

What's different?

Don't be scared of it

- Remember, it won't bite!
- Use Iodine (no chlorohex/ alcohol)
- For piercings that are partially or totally covered by the foreskin, you should include cleaning the entire foreskin
- Your jewellery selection may need to change slightly to accommodate for the foreskin itself (not too big!)
- Chat to your client, ask them if they are intact or circumcised at the start of your consultation. This will make them much more comfortable if they are



What's different?

Then what should we pierce?

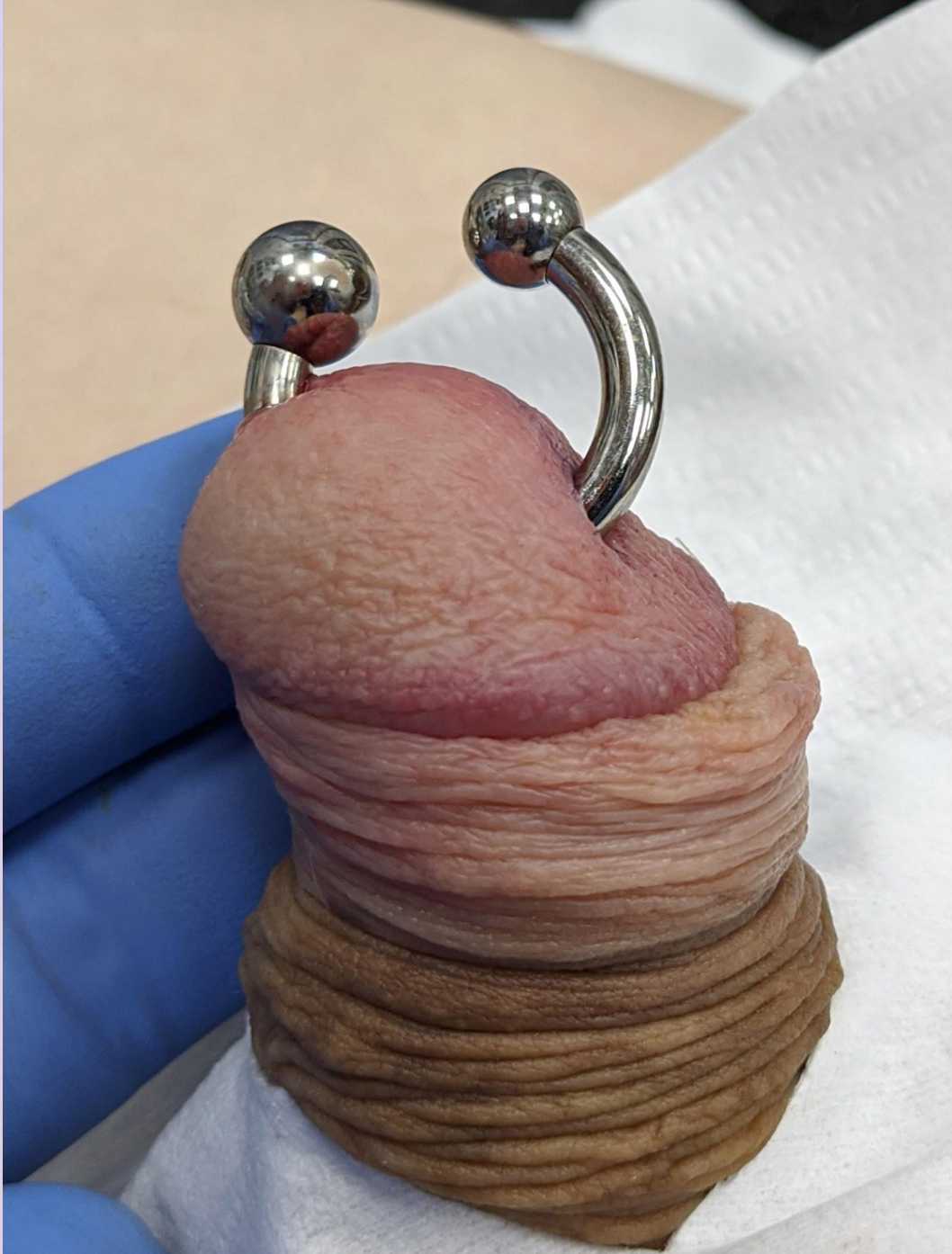


Cockrings ahoy!



by joeltron dot com

Prince Albert



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Reverse P.A.



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Traditional Frenum



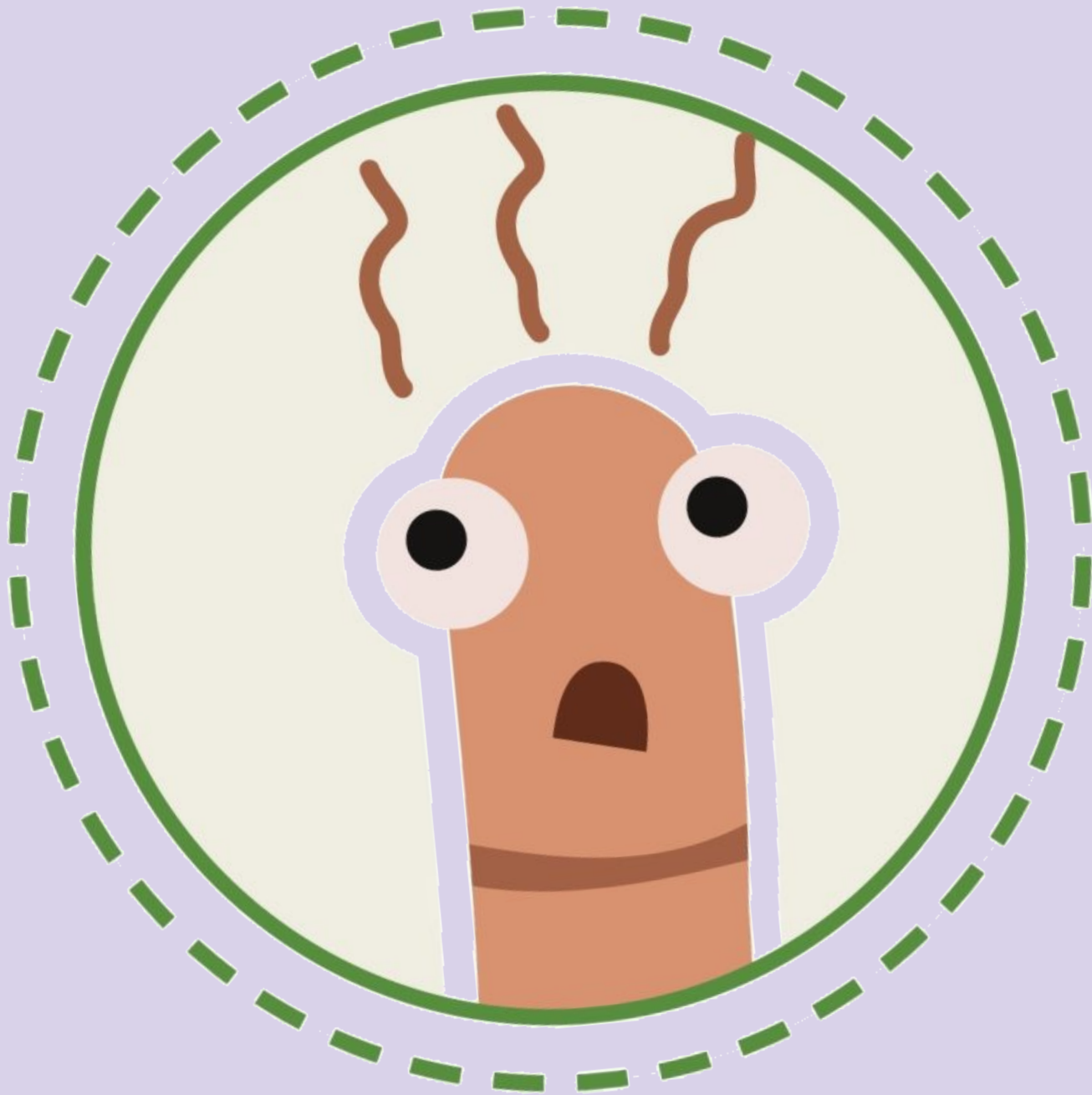
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Apadravya



by joeltron dot com
& Bree Montgomery

Foreskin! aka: the Kudo



Possible Problems

Possible problems:

● Paraphimosis

When the foreskin is pulled back behind the tip of the penis and it becomes stuck there. This causes it to swell and a buildup of fluid occurs, leaving it unable to return to its natural state.

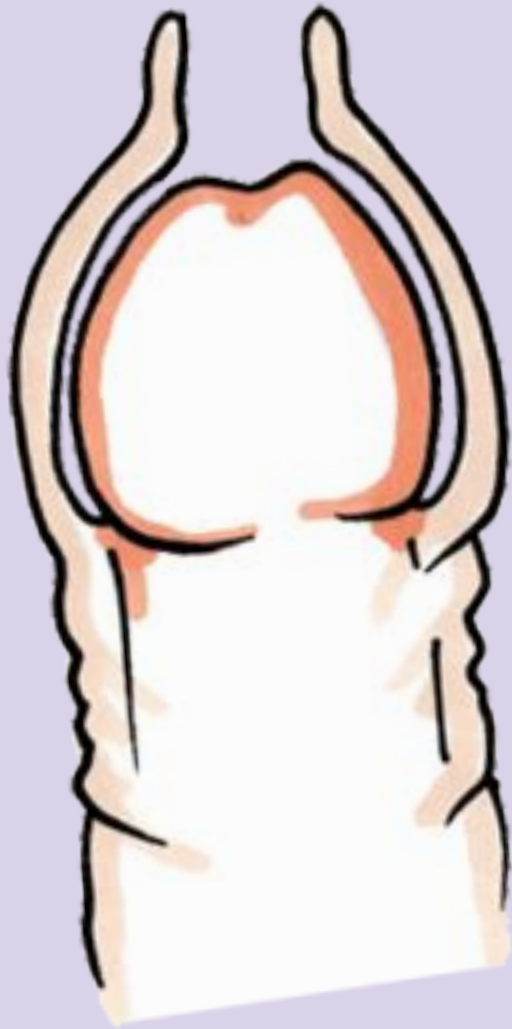
It can be fixed by:

- wrapping a bandage tightly around the penis
- draining of the pus or blood by needle
- injection of hyaluronidase to reduce swelling
- applying ice to the area

Possible Problems

Possible problems:

- **Paraphimosis** (scary!)



Possible Problems

Possible problems:

- **Paraphimosis** (oh damn!)



Possible Problems

Possible problems:

- **Phimosis** (very tight foreskin)

A condition where the foreskin is too tight to be pulled back over the head of the glans.

If forced back, not only is it painful, but it can get easily get stuck there and restrict circulation



This can be fixed over time by manually stretching the skin, using steroid creams or with surgery

Possible Problems

Possible problems:

- **Skin movement**

Watch how much the lines change when retracted



Possible Problems

Possible problems:

- **Incorrect jewellery** (ie: too long Ampallang)



Possible Problems

Possible problems:

- **Incorrect jewellery** (ie: too small gauge)



=



Possible Problems

Possible problems:

- 🔊 **Paraphimosis** – Foreskin stuck behind the head
- 🔊 **Phimosis** – Too tight foreskin
- **Skin movement** – Not checking for movement
- **Incorrect jewellery** – Too thin, short or long
- **Incorrect piercing** – A piercing done incorrectly for intact anatomy

Recapping Problems



How to pierce

How to pierce an intact Prince Albert

- Usually 6g (or at least 8g) and 5/8" to 3/4" diameter based on size and foreskin tightness
- Circular barbells are generally more comfortable and allow for the skin to 'tuck' in between the beads
- A C-ring (opened CBB) is often used to give a longer wearing surface without added volume
- Curved barbells can embed and cause ulcerations against the soft inside tissue
- Can be done with mild phimosis, but should be explained with extra care

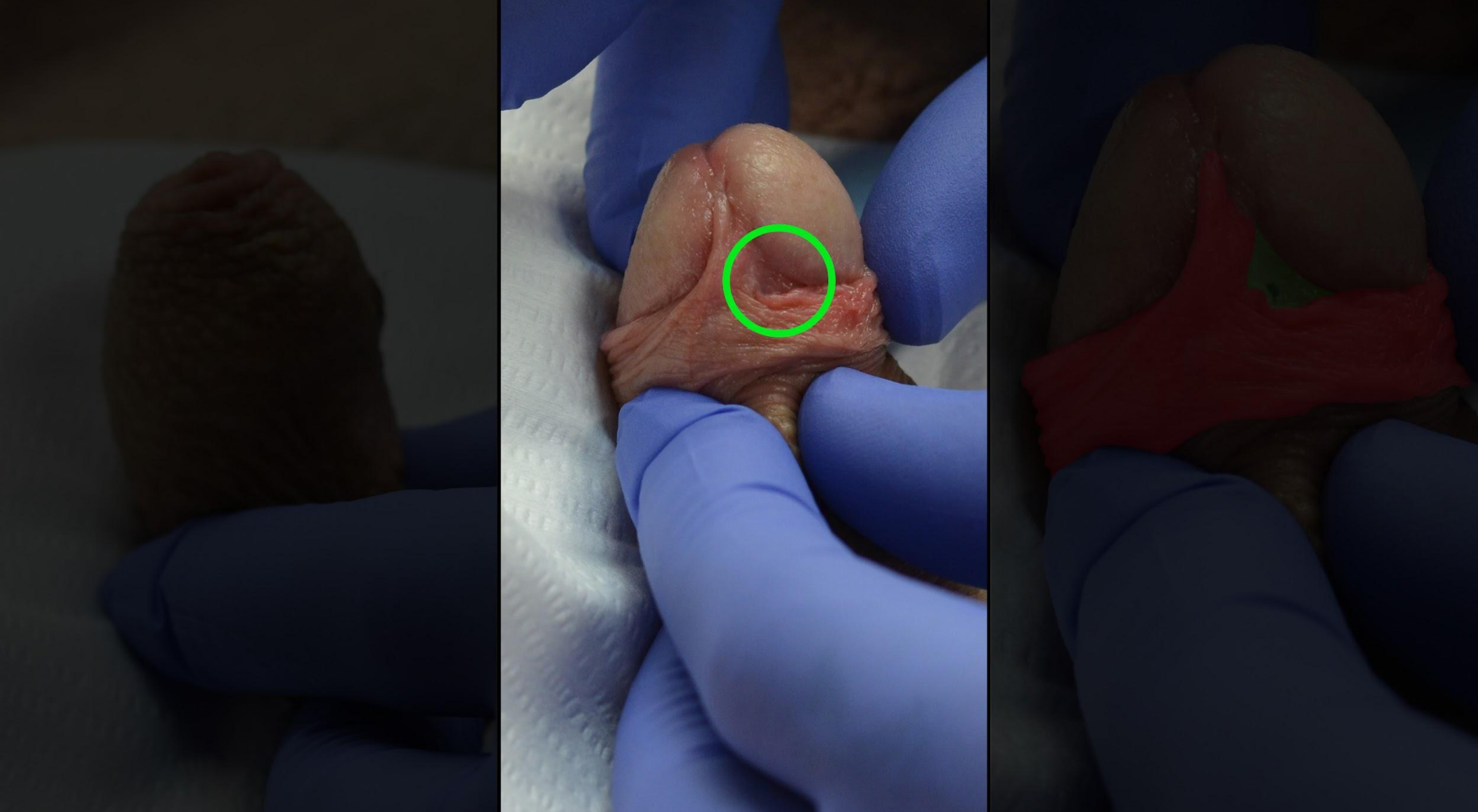
Step 1 - Jewellery



Retract the foreskin enough to see the end of the glans, but not tight as it will distort

by joeltron dot com

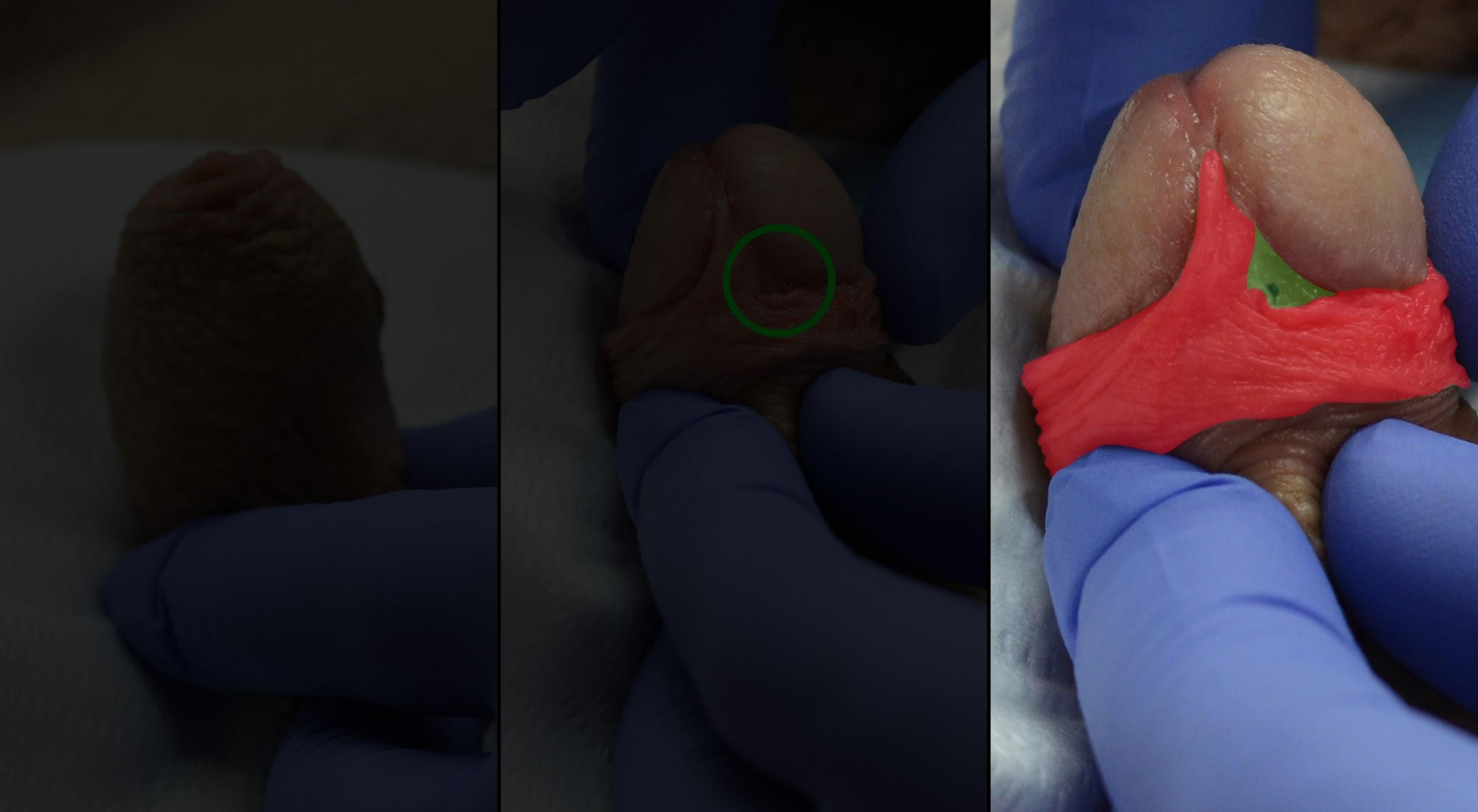
Step 2 - Placement



Check for natural folding or a 'pocket' for an ideal placement to the side of the frenum

by joeltron dot com

Step 2 - Placement



Deeper is better, but you do NOT want to exit on the foreskin whatsoever

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Step 2 - Placement



Imagine the client standing, whichever way their penis rotates - you want to try to have your mark on the side of the frenulum which is towards their body.

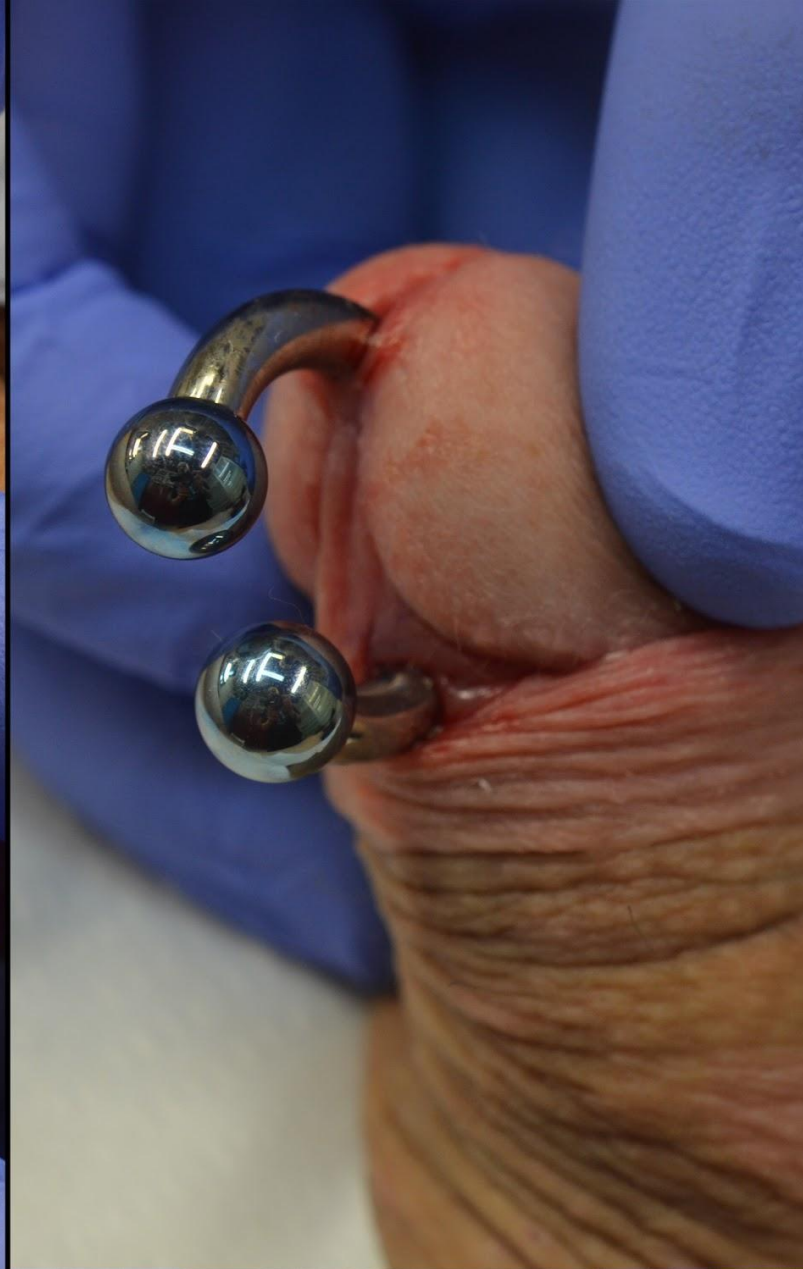
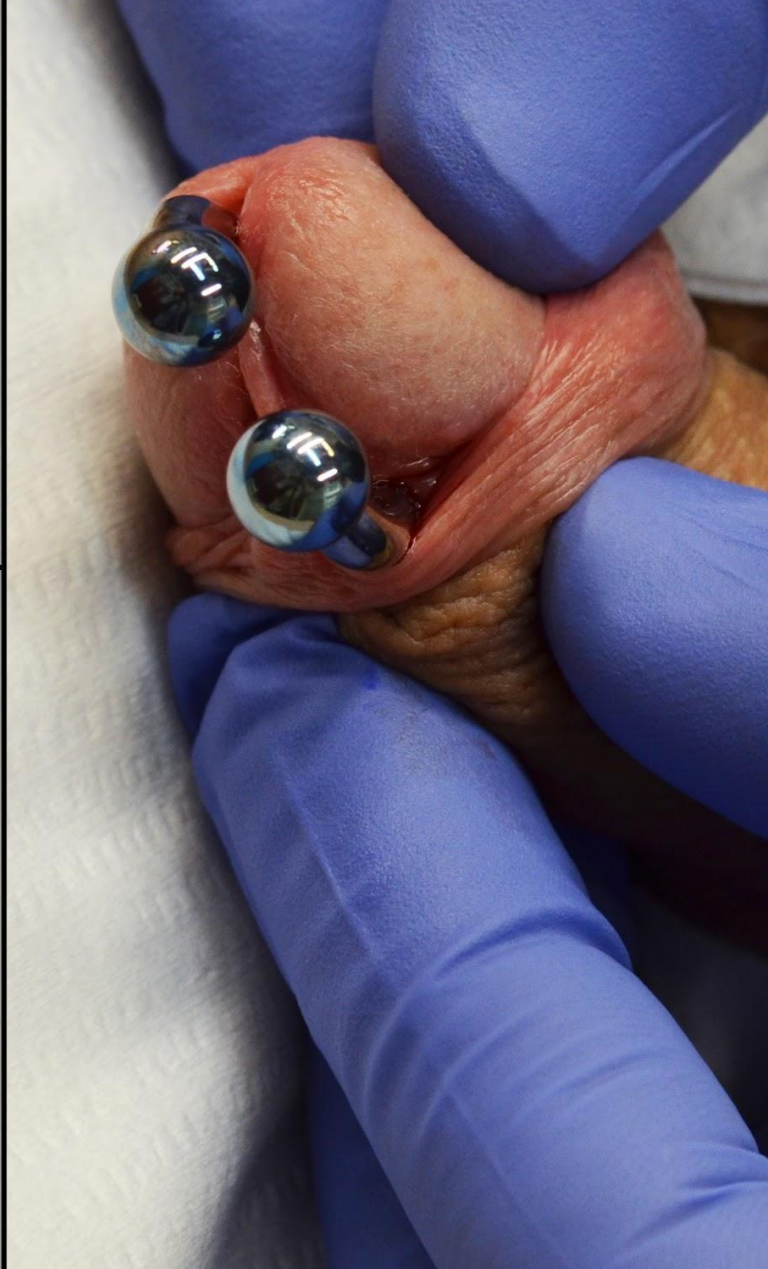
Step 2 - Placement

joeltron.com



VIDEO TIME!

Step 3 - Piercing



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Step 4 - Admire it!



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How to: More PAs



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How to: More PAs

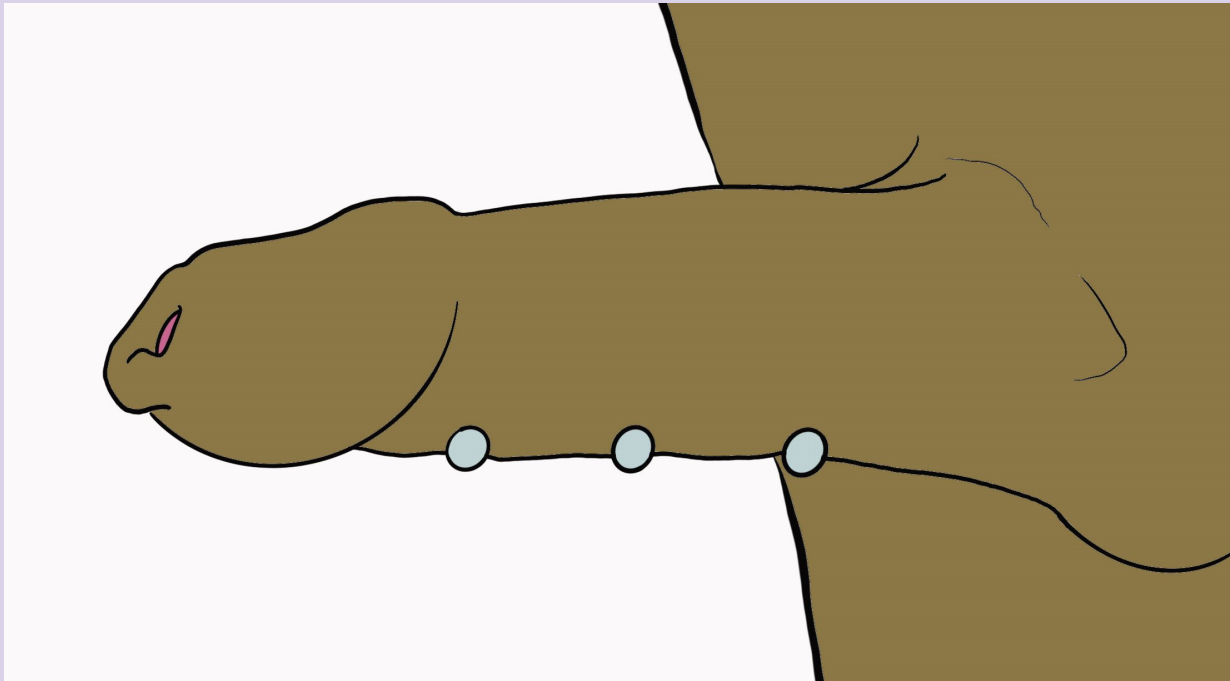


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How to: More PAs

Why are intact 'shaft' frenums bad?

- Shaft tissue is a lot thinner than you may realise
- Due to the increased amount of movement, the piercings have a much higher chance of migration and irritation during intercourse



How to: Frenum

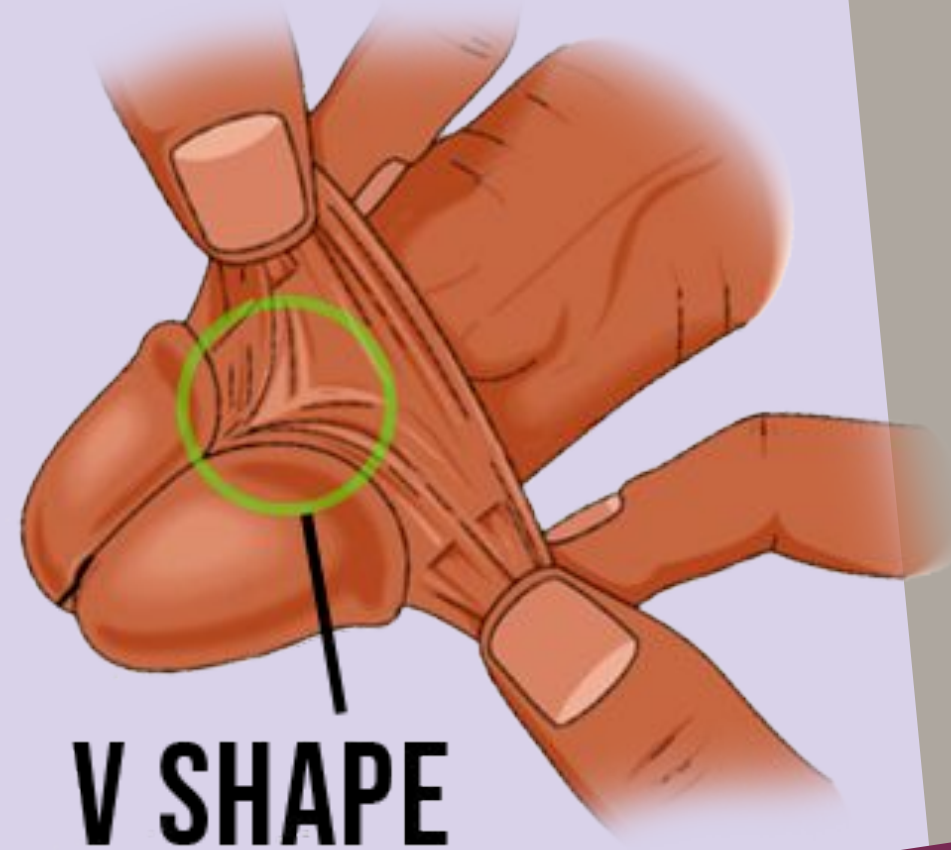
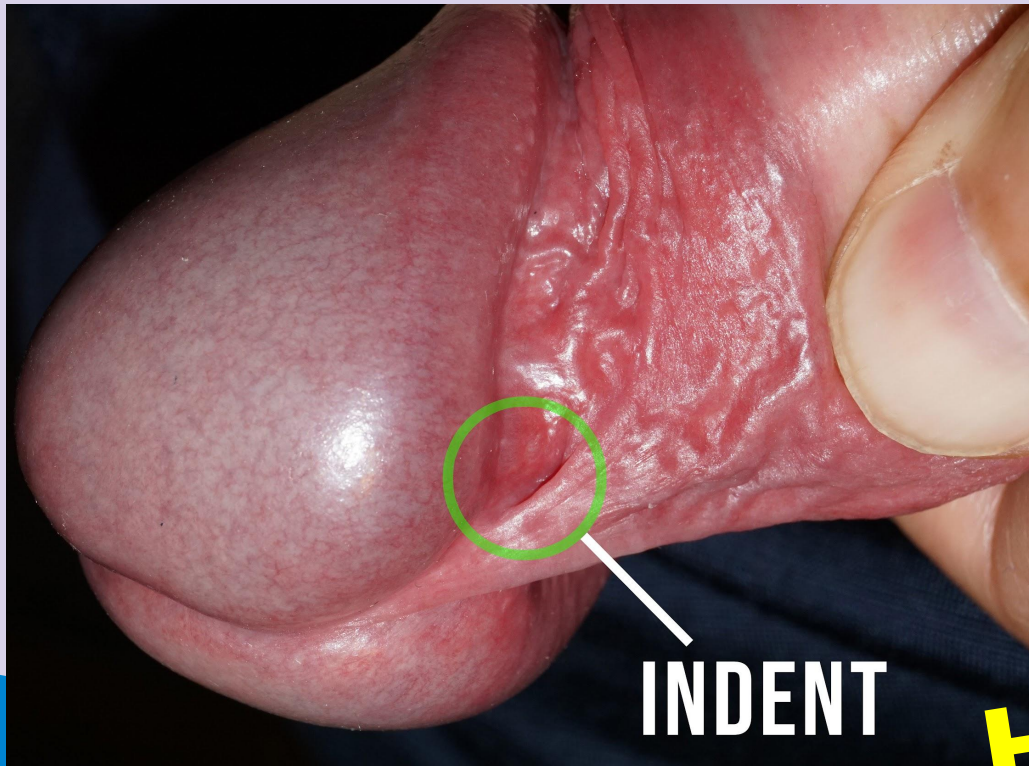
Intact Frenum

- 10g 5/16" - 9/16" barbells are ideal for healing
- Larger beads are recommended for healing
- Rings can be worn once healed if undesired stretching occurs and the barbell is at risk of falling out
- Rings are more likely to get irritated, but can add a different sensation during intercourse
- Frenum 'hoops' (over the top) should be novelty wear only

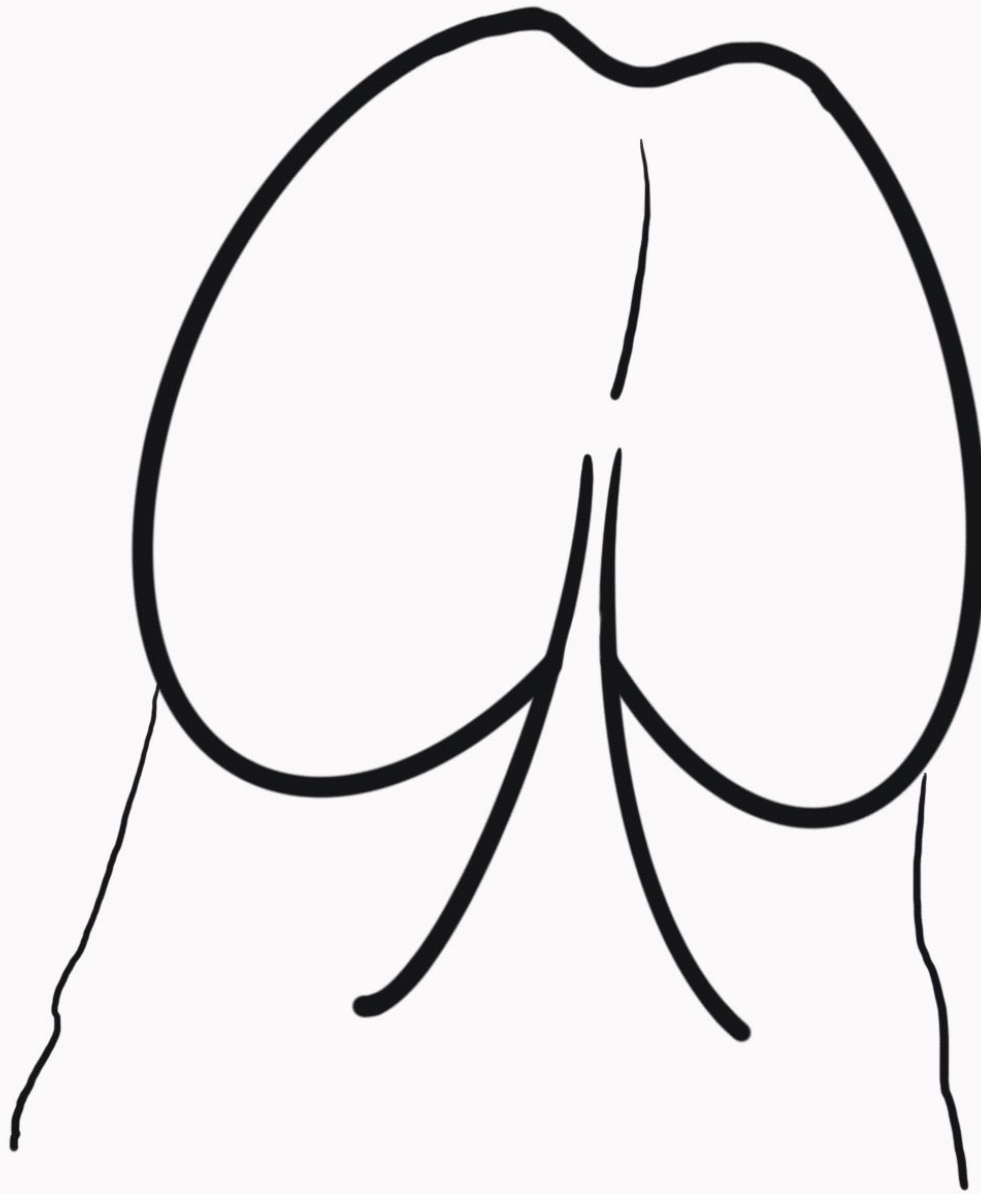
How to: Frenum

Very anatomically reliant

- Don't pierce it unless you can see the V shape
- Retract and manipulate the foreskin so you can see the indentation clearly
- Do NOT pierce shaft tissue
- 10g blank to test thickness



How to: Frenum



by Kellan Smith

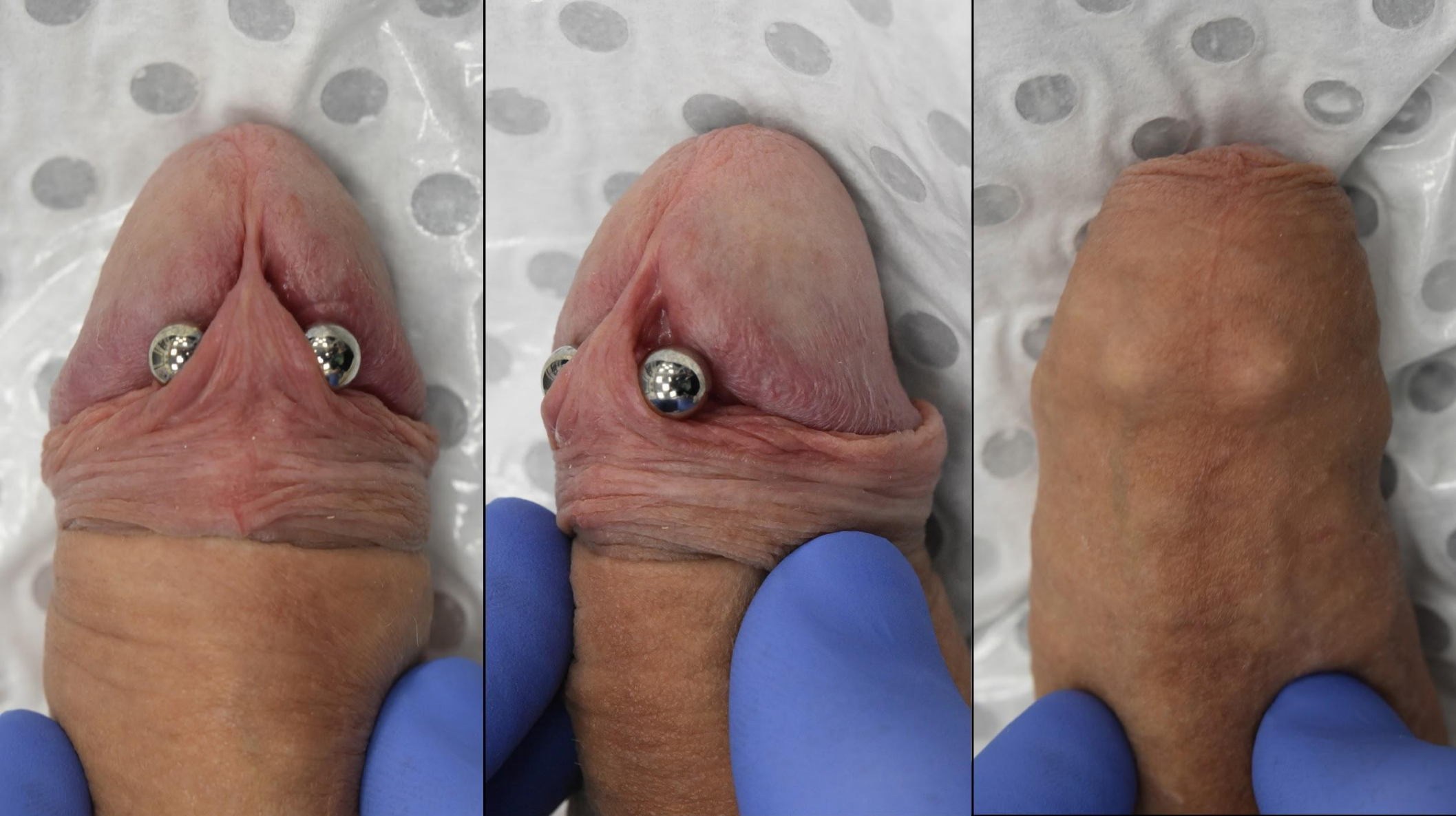
How to: Frenum



Not enough viable frenulum to sustain a typical placed frenum long-term

by Thomas Junior

How to: Frenum



by joeltron dot com

How to: Frenum



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How to: Frenum

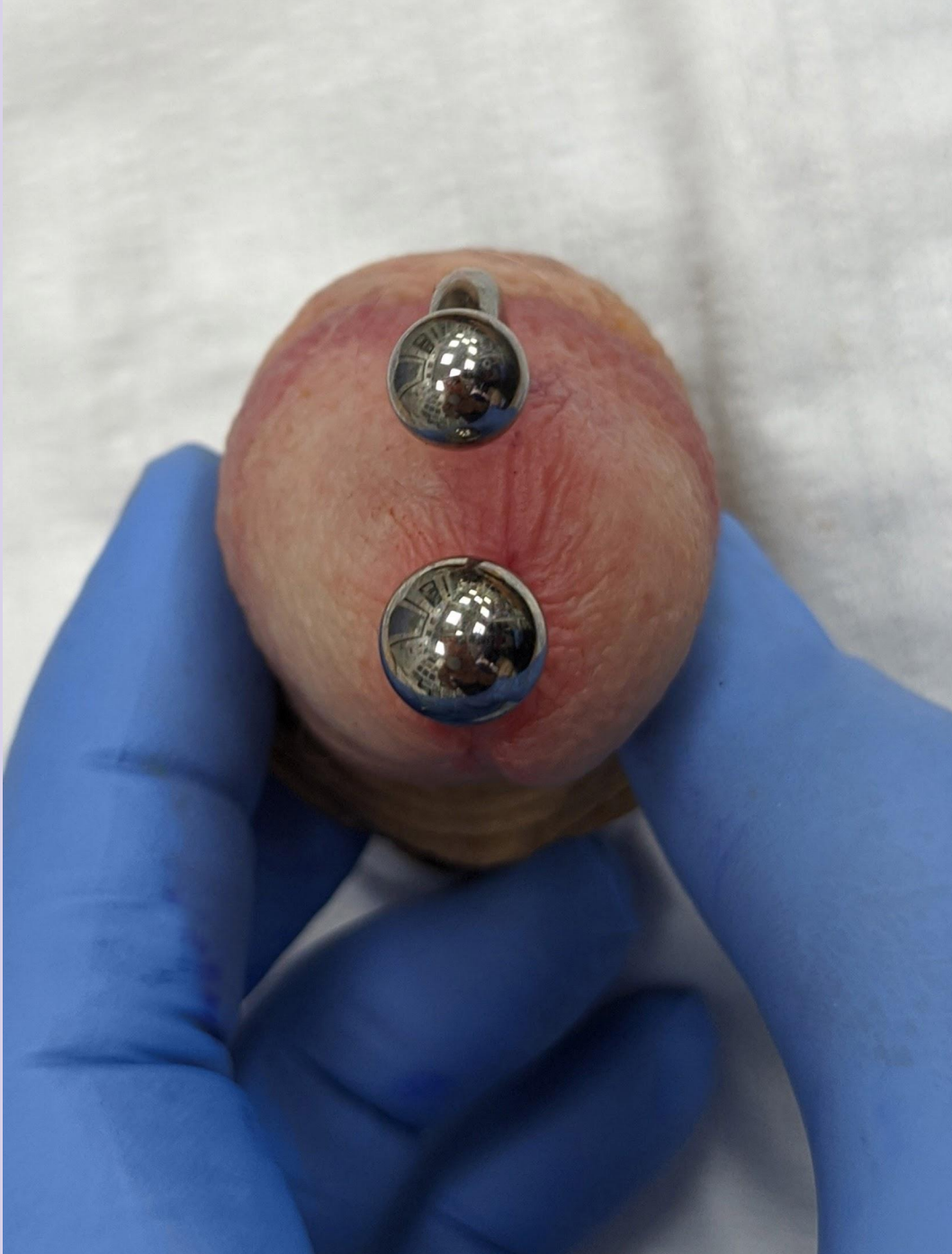
Reverse Prince Albert

- Harder to heal than PA
- Spread out 6g CBB is ideal
- You can 'slide' the foreskin between the beads to reduce pressure
- Curved barbells can be an issue, even with m&m ends
- Be CAREFUL standing up after toilet (catch!)



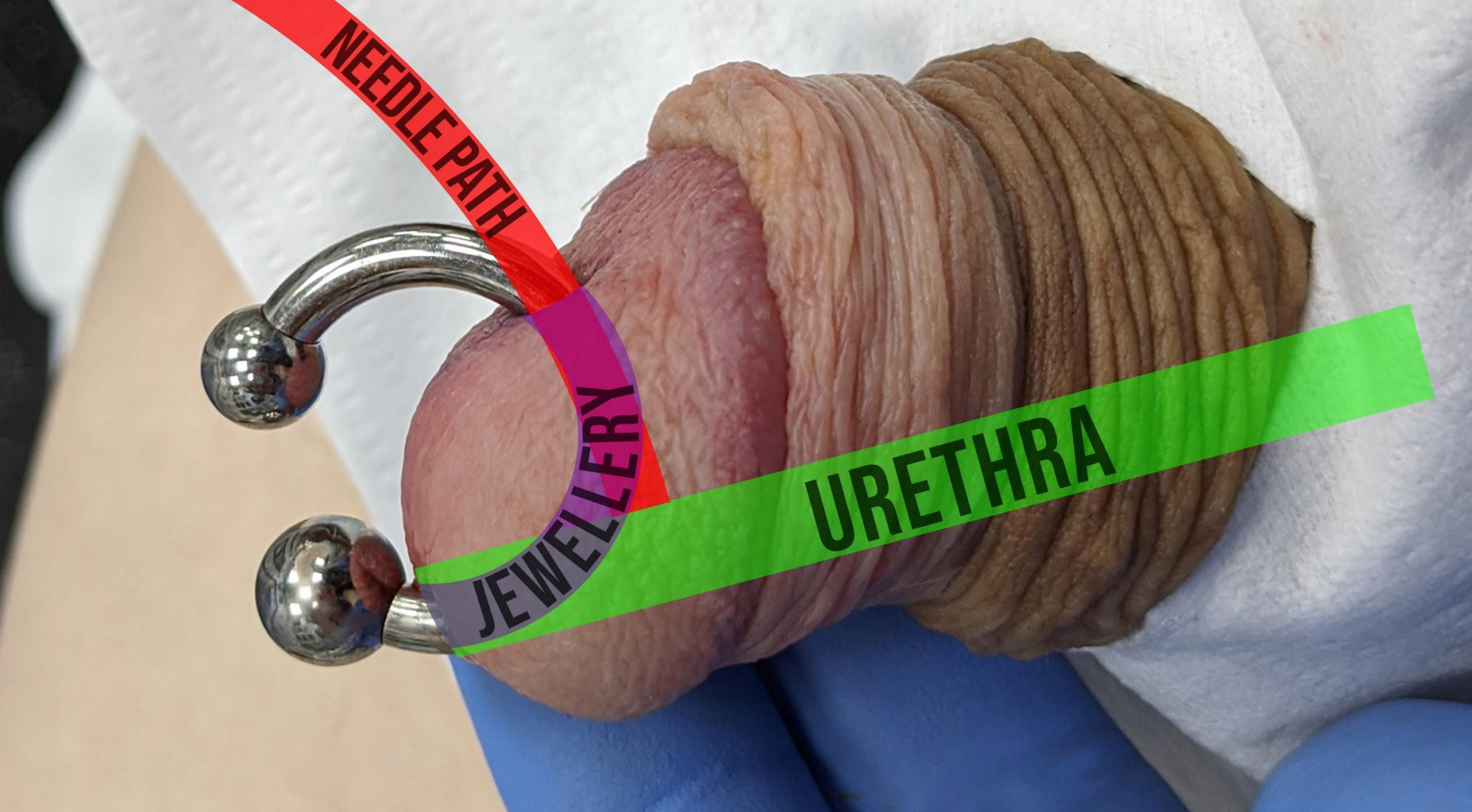
by Kellan Smith

How to: RPA



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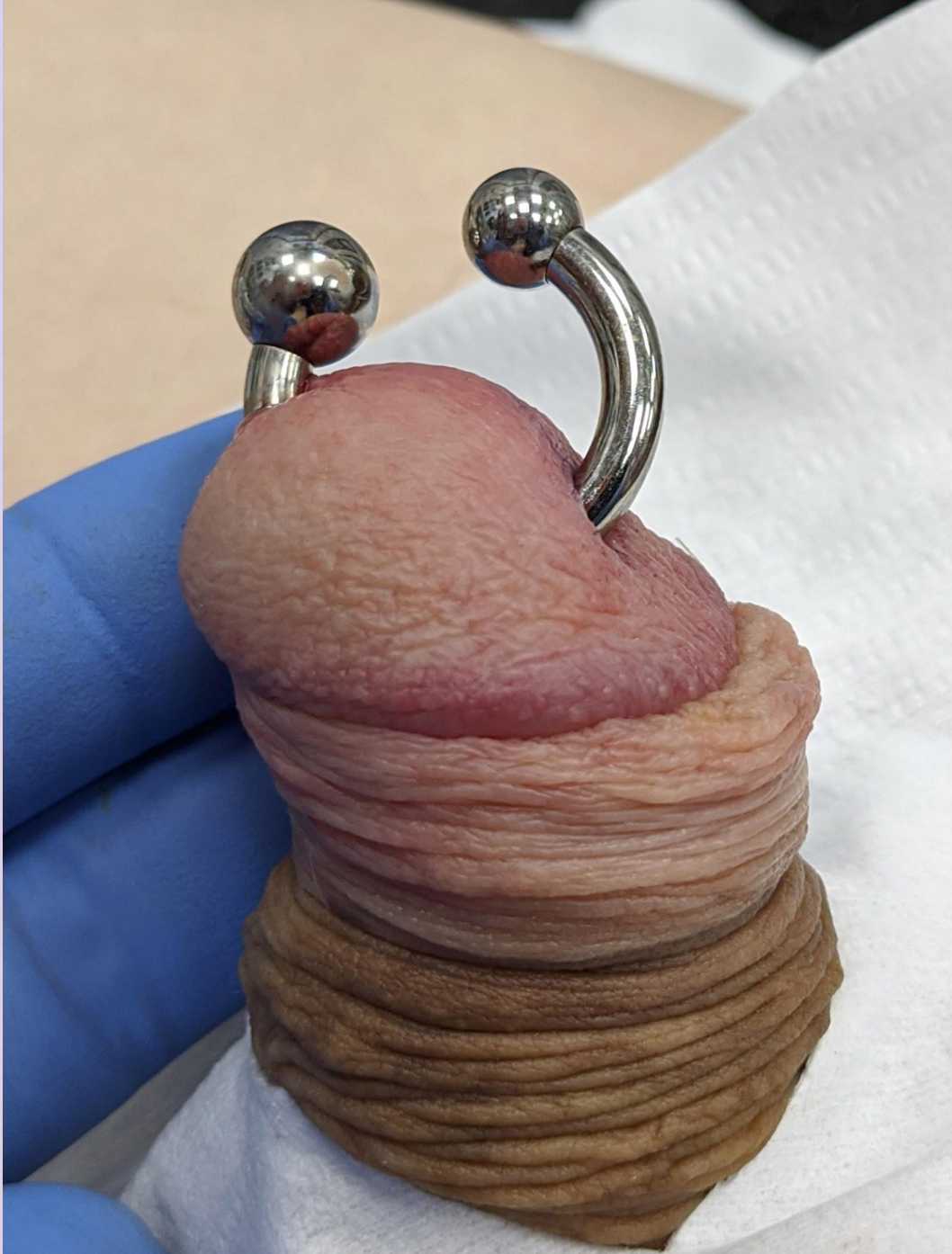
How to: RPA



6g "C" shaped (widened) CBB is ideal,
with a larger 'bottom' bead

by joeltron dot com

How to: RPA



by joeltron dot com

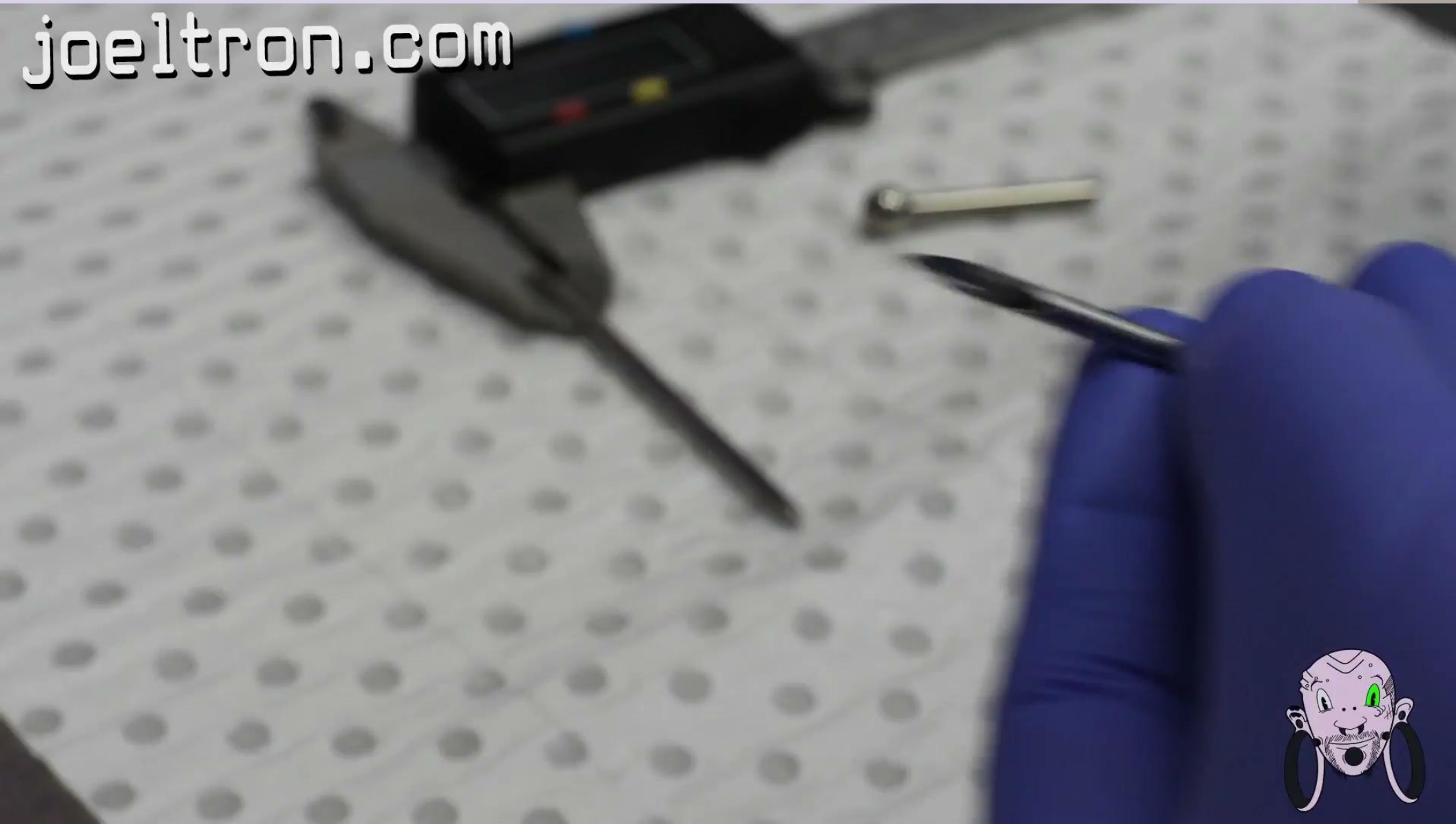
How to: RPA

Intact Apadravya

- Generally $1/8''$ to $3/16''$ longer than you would 'normally' use to allow more angle when restored
- Commonly use $1\ 1/4''$ to $1\ 1/2''$ lengths, 6g recommended
- Don't be scared to autoclave 3-4 barbells
- Mark the bottom just like an intact PA and mark the top to be 'middle' but not necessarily 'center'

How to: apadravya

joeltron.com



VIDEO TIME!

How to: apadravya

Anddddddddddd lastly...



drum roll plz

thnx

How to: Foreskins



- Mark the mucocutaneous junction (rim tip) at desired locations (typically 3 and 9 o'clock)
- These marks will be your 'center' of the piercings
- Retract & mark around $1/4''$ - $9/32''$ either side to give $1/2''$ to $9/16''$ wide

How to: Foreskins

- Pierce clamped in a restored state or freehand inside-out with care to not roll any tissue
- Check marks when retracted and restored to ensure they line up correctly and are straight
- Typically 10g 9/16" - 5/8" CBRs, never CBBs
- Intercourse should be avoided for ~2 to 4 months
- 6-12 months to heal and they don't stretch easily



Also known as a "**kudo**".

Generally difficult to heal and referred to by many as the "**snug of the penis**".

How to: Foreskins



Don't worry if they rest against each-other

by joeltron dot com

How to: Foreskins



During intercourse, they can reach the pubic mound

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How to: Foreskins



All healed now and stretched to 6g 7/16"

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How to: Foreskins



Lots of movement when retracted

by joeltron dot com

How to: Foreskins



Top view, healed and stretched

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How to: Foreskins

Some differences in care



Aftercare

Some differences in care

- The client should keep foreskin returned always unless cleaning with saline, or showering

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- The foreskin should be gently retracted during cleaning in the shower, per standard hygiene

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- The client should urinate sitting without restriction, and use a clean cup of fresh water to rinse after

Aftercare

Some differences in care

- The client should keep foreskin returned always unless cleaning with saline, or showering
- The foreskin should be gently retracted during cleaning in the shower, per standard hygiene
- The client should urinate sitting without restriction, and use a clean cup of fresh water to rinse after
- The client should use condoms as barrier protection for the first month of healing

Aftercare

Some differences in care

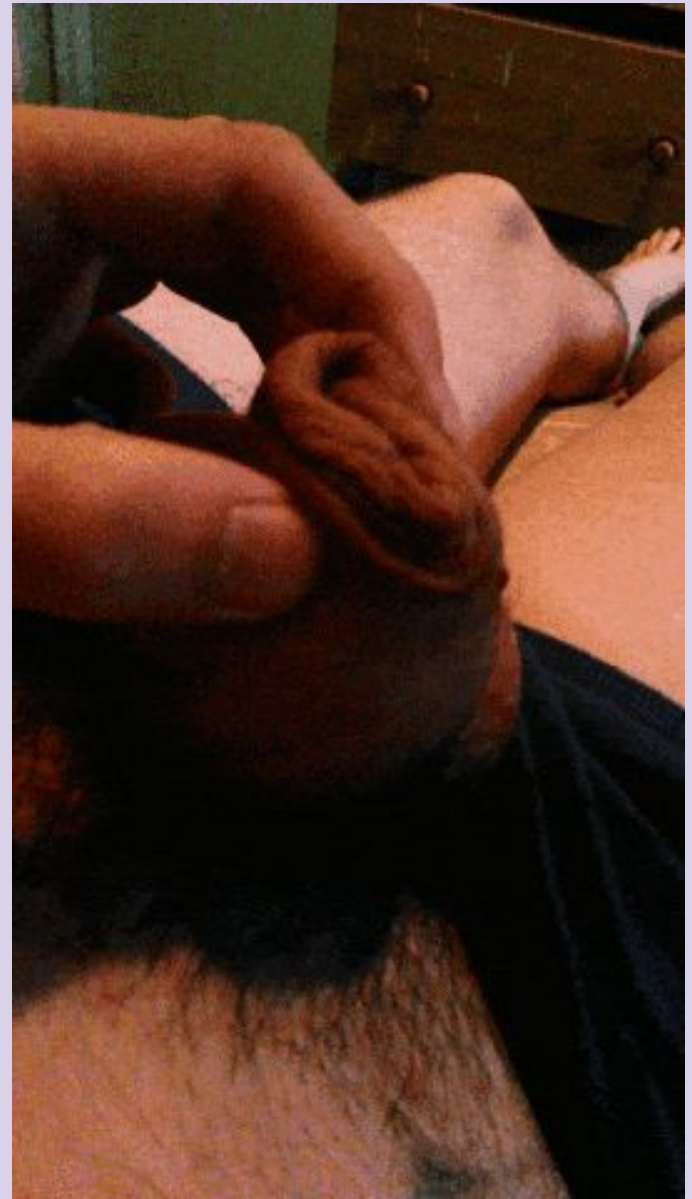
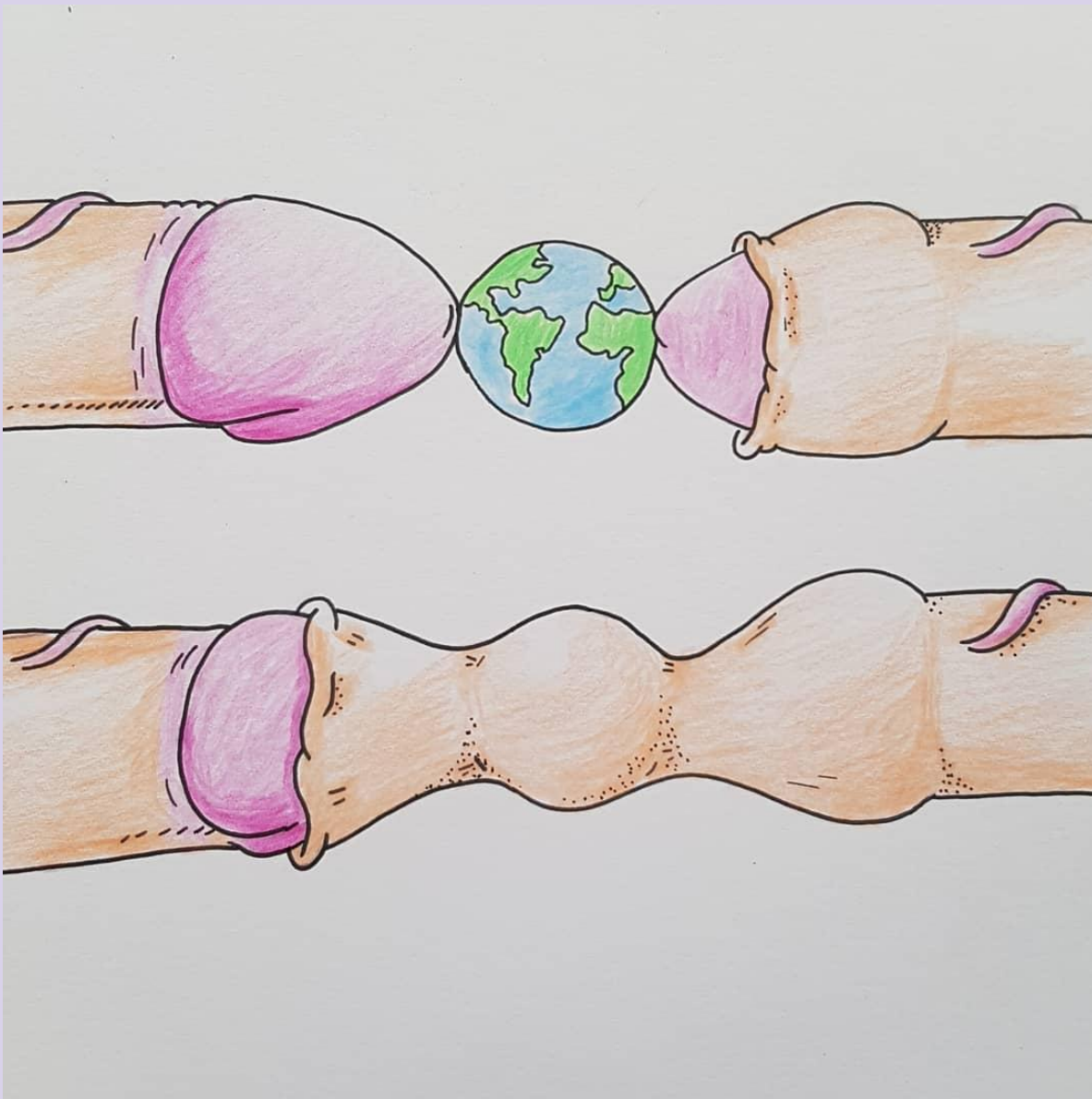
- The client should keep foreskin returned always unless cleaning with saline, or showering
- The foreskin should be gently retracted during cleaning in the shower, per standard hygiene
- The client should urinate sitting without restriction, and use a clean cup of fresh water to rinse after
- The client should use condoms as barrier protection for the first month of healing
- Initially, the foreskin can often be tight, however, it will typically loosen over time

Aftercare

Some differences in care

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- Initially, the foreskin can often be tight, however, it will typically loosen over time
- The foreskin should NEVER be restricted from returning to its natural state

Aftercare



Questions?

The image features a vibrant red background with a series of concentric circles. At the center is a solid black circle. Overlaid on this black circle is the text "That's all folks!" written in a white, cursive, hand-drawn font. The text is slightly tilted and has a subtle drop shadow, giving it a three-dimensional appearance as if it's floating above the black circle. The overall aesthetic is reminiscent of classic animation end screens.

"That's all folks!"

- **Centers for Disease Control and Prevention**

<https://www.cdc.gov/mmwr/volumes/67/ss/ss6706a1.htm>

- **Dr. Brian & colleagues**

<https://www.elsevier.com/connect/circumcision-benefits-far-outweigh-risks-finds-study-in-mayo-clinic-proceedings>

- **World Health Organisation**

http://www.who.int/hiv/pub/progress_report2011/hiv_full_report_2011.pdf

- **Wikipedia**

https://en.wikipedia.org/wiki/Prevalence_of_circumcision

- **wikiHow**

<https://www.wikihow.com/Regrow-Foreskin>

- **Robert Baker**

<http://www.cirp.org/library/death/>

Where did we learn