



To: Chief Directors: Rural and Metro
Executive Director Health: City of Cape Town
Director: District Health Services
Heads: All Hospitals, Community Health Centres (CHC's) and Clinics

Circular H.18.7/2020

Transition from the forceps-guided technique to the dorsal slit technique within the Voluntary Medical Male Circumcision (VMMC) Programme

Purpose:

National Department of Health (NDoH) has not come forward with any formal stance on moving to the Dorsal Slit method only. This was only done verbally, with no change to our guidelines. This circular, therefore, informs the services of the transition from the forceps-guided technique to the dorsal slit technique.

Background

Voluntary medical male circumcision (VMMC) remains an important component of the Department of Health combination HIV prevention strategy. The priority population for VMMC in the Prevention program remains men age 15-29 years for maximum prevention benefit. Boys age 10-14 may be circumcised but because most have not reached full sexual maturity, VMMC in those under age 15 years and those age 15 years and over with immature penile anatomy precluding glans palpation must NOT be done using the forceps guided method.

Several cases of partial and complete glans amputation using forceps guided VMMC method in boys under age 15 years have occurred; this reiterates the WHO and PEPFAR guidance on VMMC techniques for those with immature penile anatomy and all boys under age 15 years, understanding that this is not the priority age group. For providers being newly trained in VMMC techniques, consideration should be given to training only in the dorsal slit technique, since unlike

the forceps-guided technique, it is applicable in all settings including in young boys and in the presence of foreskin adhesions. We will also be reiterating this policy with our implementing partners in the province

Way forward for the Province

For forceps guided kits that are not expired, districts can order additional instruments to allow the surgeon to perform the dorsal slit method. The additional instruments are as follows:

- Dissecting Scissors slightly curved X1
- Mosquito clamps straight X3
- Haemostatic Clamps X2

With regards to the expired VMMC kits, please note that the kits are made up of various items. The disposable instruments are fine to re sterilise. However, the suture has an expiry date on the packaging, so does the paraffin gauze within the kits. These items would need to be replaced in the kit before they are re sterilised. There would need to be new steri indicators inserted within the kit before sterilisation takes place. There is also the possibility that the gloves in the kit could become sticky, therefore it is not advisable to re sterilise gloves that have been in a kit for over 24 months.

Training:

The training regarding the Dorsal Slit Method will be provide as follows; the metro will be supported by the metro VMMC partner which is JHPIEGO and; for the rural districts, CHAPS is offering training. The only requirement is for districts to able to source a suitable venue for the training and possible catering for participants for the duration of the training. Please liaise directly with the Provincial VMMC Coordinator (naeema.hoosain@westerncape.gov.za) should your district require any form of training.

Yours sincerely,



.....
Mr JA Kruger

Acting Chief Director: Health Programmes

Date: 25/09/2020