## May Anesthetics be Used for Infant Circumcision?

May a local anesthetic be used prior to infant circumcision and, if so, should rabbis be encouraged to recommend its use?

The question regarding the use of general or local anesthetics prior to circumcision has resurfaced following the publication on March 12th, 1988 of a study on the subject in the *Journal of the American Medical Association*. Dr. Howard Stang and four colleagues report that available pain killing drugs are not used for circumcision—techniques that could reduce pain and stress measured by cortisol levels in the blood. The drug used in Dr. Stang's study was a local anesthetic, lidocaine.

Rabbi Meir Arik was the first to deal with this issue shortly after anesthetics were first introduced. His second volume of responsa *Imre Yosher*, no. 140, was published in Krakow in 1925. Rabbi Arik rules that neither a general nor a local anesthetic may be used prior to circumcision. He argues that since such drugs were known in the Talmudic period (see *Baba Kama 85a*; *Kiddushin 21b*) for use in certain surgical procedures but never mentioned with regard to circumcision, the use of pain killing drugs for circumcision must have been proscribed. Rabbi Arik further adduces the case of Abraham who is applauded by the Midrash for bearing the pain of adult circumcision (*Genesis Rabbah 47*:9).

Additional support for this general prohibition is mentioned by the author of Sefer Koret haBrit (cited by Rabbi Bezalel Shafran, Responsa RaBaZ, no. 125) who writes that the accepted practice among mohalim is to wake a sleeping infant, lest the infant be stricken with epilepsy. Also citing this reason, Rabbi Yehiel Yaakov Weinberg (Resp. Seridei Esh, vol. 3 no 96) mentions a further justification, namely that the infant, like an adult, should be brought into the covenant knowingly and alert. A sleeping child is like a stone, says Rabbi Weinberg, and one cannot

make a covenant with a stone. Most people would regard cutting the foreskin of the sleeping child as an act of assault (*habala*) and not an initiation into the covenant of Abraham.

There appear to be two main questions: 1) does the *brit* require the person being circumcised to actually feel pain? and 2) does the person being circumcised need to knowingly accept entry into the covenant through circumcision?

If circumcision requires feeling pain, then even a local anesthetic that allows the person being circumcised to remain awake and alert would be prohibited, since no pain would be felt. And if circumcision required an intent to enter the covenant, then all infant circumcisions would be invalid in that, though the baby may be awake and alert, the baby has neither comprehension of the *brit* nor the conscious intention to accept the covenant it represents. Since this is patently absurd and contrary to the Torah that commands infant circumcision, a distinction may be drawn between adults being circumcised for conversion (who according to some opinions must be awake) and infants circumcised on the eighth day of life (who need not be awake). Rabbi Weinberg, in fact, does draw this distinction, and Rabbi Bezalel Shafran (*Responsa RaBaZ*, *loc. cit.*) rules that, contrary to the author of *Sefer Koret haBrit*, sleeping infants need not be awakened prior to circumcision.

Later authorities are unanimous in their opinion that there is no halakhic demand to feel the pain of circumcision (Rabbi Judah Leib Zirelsohn, *Responsa Ma'arkhei Lev*, no. 53; *Seridei Eish*, *loc. cit.*) and while Abraham's ability to endure the pain of circumcision without anesthetics is laudatory for him, it is not mandatory for us (Rabbi Gedalia Felder, *Nahalat Zvi*, p. 57). Rabbi Ovadia Yosef, former chief Sephardic Rabbi of Israel, writes that local or general anesthetics may be used for adults or children ("be'Inyan Hardamah Bishe' at haMilah", Noam, vol. 12, pp. 1–10) concluding that a person being circumcised needs neither to feel pain nor to be conscious.

While the consensus of the *posekim* is to permit anesthetics, especially local anesthetics for infants, *mohalim* have not adopted this practice. Perhaps they base their reticence on the hesitations of Rabbi Yehiel Ya'akov Weinberg who, in disagreeing with Rabbi Judah Leib Zirelsohn, writes that the customs of Israel are Torah and should not be taken lightly. Thus, even though there are grounds to permit the use of anesthetics, the final decision should be left to a qualified *mohel*. If the parents and the *mohel* agree, and there is substantial evidence that anesthetics will significantly reduce the level of pain the child may feel, then local anesthetics may properly be used on infants.

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