



MEN

The Men Who Want Their Foreskins Back

Some try to manually stretch their skin into place. Others are turning to experimental surgery.

By Bianca Bosker, journalist and bestselling author of
Get the Picture and Cork Dork.

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Daniel Floyd loves a long, droopy foreskin, but his own was cut off when he was a baby. Around his fourth birthday, he started having recurring nightmares of being strapped to a table with his limbs splayed out while a doctor or neighbor cut off his genitals, sometimes with garden shears. The dreams continued until middle school, which is when the feeling of the tip of his penis rubbing against his underwear started to drive him crazy. It was irritating and uncomfortable, and it filled him with rage.

Through online forums, he discovered the concept of foreskin restoration: trying to recover the head of the penis — essentially, undoing a circumcision — by consistently stretching the remaining skin using tape, devices, or the hands God gave you. Erroneously thinking he couldn't purchase the equipment as a minor, the day Floyd turned 18 he bought himself a "TLC Tugger" kit, which he used to clamp the skin on his penis between two plastic cones placed around the tip of his penis. He attached the cones to an elastic strap that the manufacturer recommended wearing wrapped around his leg for 8 to 12 hours a day.

Over the next decade, Floyd, now 30, also tried pumping his foreskin with air to inflate it like a balloon, pulling his skin with his hands, stretching it with a tiny tension rod, and

doing red-light therapy on his crotch to encourage new skin to grow. While reading, working in construction, seeing clients as a massage therapist (his current profession), and sleeping, Floyd experimented with wearing several different gadgets on the head of his penis. They gradually stretched the skin, but after 12 years, the round, pink tip of his penis — the glans — remained stubbornly uncovered. Floyd began to consider more drastic measures.

Last fall, Floyd underwent surgery to fix the problem: A doctor in Burlingame, California, sliced open the flesh on the underside of his penis, separated the skin from the shaft, and pulled the loosened skin forward, which the surgeon then sewed together with more than 60 stitches, including four sutures at the tip of Floyd's penis to cinch the flesh so the glans would stay snug within. Floyd was so thrilled with the results that the first time he and his husband were intimate after the surgery, "I cried. Tons," he told me. "I got to be like, 'Oh my God, you're holding my actual foreskin for the first time.'"

Over the past few years, doctors and scientists have been quietly tiptoeing into the field of foreskin-restoration surgery, drawn by growing demand, the proliferation of gender-affirmation care (which has helped surgeons hone their skill in reshaping genitals), and circumcision itself falling out of favor. In the United States, circumcision reached its zenith in the mid-1960s, when an estimated 80 percent of males had their foreskins cut off. More recently, however, the popularity of the procedure has dropped to lows not seen in recent history: 49 percent of male infants were circumcised in 2022, the most recent year for which data is available. That some physicians are now helping to reverse a procedure their peers long touted as a boon for patients' health is raising fresh tensions over the merits of circumcision and emboldening men to challenge whether the procedure's toll is greater than doctors have typically recognized. Though the majority of restorers still opt to take matters into their own hands, procedures like Floyd's — and the growing body of research into the mechanics and merits of uncircumcision — suggest professional help is finally arriving.

The online restorer community is populated by dick connoisseurs who parse the anatomy and aesthetics of the male sexual organ with the exactitude of Westminster Kennel Club Dog Show judges. They have developed a scorecard to measure their progress, called the Coverage Index, which ranges from CI-1 (no loose skin

on the shaft) to CI-10 (skin that droops over the glans like loose pantyhose — affectionately referred to by some as a “wizard’s sleeve”). Skeptical of a medical Establishment that took away what they now hope to regrow, these men — who post under monikers like “Going Hooded” and “MrAnteater” — have long relied on peer-to-peer advice to achieve their goals, sharing work-in-progress photos of their penises and exchanging tips on using cut-off baby-bottle nipples to regain their lost sleeve of skin. There are few limits on how far restorers will go. “If I could grow a foreskin that hung down to my knees, I’d totally do it,” wrote one restorer on [his blog](#). A 1990 paper in the *British Journal of Psychiatry* described how another man, allegedly refused assistance by several surgeons, sliced open his own penis — without anesthesia — then tried to sew it back together in the hopes of refashioning a foreskin. (He “ring barked” the base of his shaft, bled profusely, then gave up and went to the emergency room.)

Most men seeking restoration are intimately familiar with the multifaceted character of foreskin — which includes nerve endings, smooth muscle tissue, and mucous membrane — and are prone to rattle off, with evident awe, the crucial roles they see it playing in everything from intercourse to immune defense. They know that once snipped, tissue such as the ridged band (a ring at the tip of the foreskin with nerves like those in our lips) and the frenulum (which connects the foreskin to the glans) cannot be regrown. “This foreskin isn’t extra, it’s essential,” Eric Clopper, a prominent member of the “intactivist” movement that opposes circumcision, has said. Restorers’ enthusiasm for their genitals’ natural casing also makes foreskin-restoration circles one of the more supportive corners of the internet, with an unexpectedly high dick pic-to-politeness ratio. “Congratulations on your success!!! 🍆 You put in the time and earned it Brother! 💪,” wrote a redditor to someone who’d achieved a CI-4 — skin partway covering the glans, like the pate of a bald man emerging from a sleeping bag. A favorite refrain on message boards: “KOT,” short for keep on tugging!

The very first foreskin-restoration community in the U.S. came into being in 1989. That’s when the National Organization of Restoring Men, which credits itself as being the nation’s inaugural formal support group for uncircumcisers, began hosting in-person meetings at a church in San Francisco; men would trade tips and hear from invited speakers. Since then, the restorer community has expanded into a larger and more diffuse network that includes social-media groups, online forums, podcasts, and Zoom meetups.

Bob, a retired engineer who moderates a 28,000-member-strong sub-Reddit and asked to

be identified by his first name only, told me his group includes men, women, and trans individuals from all over the world, ranging from 13-year-olds to septuagenarians. (Bob says that among other precautions to protect teens, the forum's moderators warn anyone they identify as a minor that they can't direct message with other users, although there are undoubtedly serious risks of hosting a forum where teenagers are chatting with adults who are discussing, and trading pictures of, their genitals.) He told me his personal penchant for tugging stemmed from simple curiosity. "I got started, I got hooked," he explained.

Other men's yearning for their foreskins has more complex psychological and ethical underpinnings. Besides preferring the look of an uncircumcised penis, Floyd abhorred his circumcision for violating what he calls his "bodily autonomy" and saw restoration as a way to refashion his genitals so they reflected his own values. Some cut men vent their fury with their parents for having had them circumcised: "I'm suicidal over my circumcision," wrote one. "I lost a piece of myself that I can't get back." Veteran restorers also promise that with foreskin comes sexual satisfaction the likes of which no circumcised man can conceive. One satisfied tugger posted about his post-foreskin orgasms, "I found myself explaining it and the value of restoring by using analogies like: Night vs Day, Like a single instrument vs an Orchestra, Like Black and White Photos vs Color, Like mono vs Surround Sound, etc."

While most circumcised men don't register many sexual complaints, Aaron Grotas, an assistant professor of urology at Mount Sinai's Icahn School of Medicine, says that a botched circumcision or one that heals incorrectly can lead to painful, overly tight erections. Although this complication occurs in less than one in 1,000 cases, the grievance surfaces frequently on restoration forums. Other men, while largely pleased with their circumcised penises' performance, are haunted by the thousands of nerve endings that got lopped off with their foreskin and the additional pleasure they may be missing. In its uncut state, the flesh at the tip of the penis more closely resembles the mucous membrane inside a mouth than the epidermis on, say, an arm. After a circumcision, the glans builds up a thicker, dryer layer of skin as a defense against clothes and other sources of abrasion — a mild callus, basically, like the rough patches on our knees and elbows.

The downside to restoring a foreskin manually is that the process is long and hard. It can take less than five minutes to slice off a foreskin and, according to Bob,

around three to five years, at minimum, to get one back. (He estimates it's possible to gain around one coverage index a year.) All of the traditional techniques rely on the same basic premise of applying gentle tension to the shaft skin of the penis until it stretches. The manual method (a.k.a. tugging) requires you to just reach down and pull the head and base away from each other, albeit with discipline. There's also T-taping, which involves folding a strip of medical adhesive with origami-like precision, then sticking it on the penis and tugging the tape forward using an elastic bedsheet strap — a contraption that, if properly assembled, can be worn for three days at a time. Some opt to hook up what's left of their foreskin to devices whose names suggest inventions best kept far, far, away from one's genitals: MySkinClamp, VacuTract, Foreclip, Foreskinned Air, and Foreballs, tiny metal dumbbells that can be stuffed into the shaft skin. More enterprising restorers have jerry-rigged their own skin-stretching creations out of pill bottles, ball bearings, aquarium pumps, film canisters, trombone mouthpieces, toilet-seat-hinge bolts, baby bottles, binder clips, a pig-castration device, and baby socks.

Restorers insist the process doesn't hurt unless it's done wrong and that since some of the manipulation mimics masturbation, it can actually be pleasurable. Grotas says though he'd caution his patients not to expect more than cosmetic changes, he doesn't see great harm in people trying to elongate their foreskin, with the caveat that they should stop if they experience pain, bleeding, or tearing, all of which do occur.

For all the positivity in various foreskin-restoration communities, surgery like Floyd's has typically attracted ire. "You know the right answer: Keep restoring. You will regret that surgery. So be patient and KOT," one user advised someone exploring a surgeon in Tokyo, a typical response to people thinking of going under the knife. Many restorers distrust doctors with their genitals, blaming them not only for unnecessarily removing their foreskins in the first place but also for enabling circumcision by failing to take their sense of loss seriously. "Medical professionals have had strange reactions to me bringing this up," Floyd told me. "I had a therapist who — it actually broke our relationship when I discussed this."

But as Floyd lurked on restoration forums and dutifully stuffed his foreskin into a miniature plunger, he began to wonder why surgery couldn't work. Occasionally, restorers displeased with the looseness of their new foreskins — which do not always pucker or stay pulled forward like an uncut penis — will do a "tip tightening" to keep their glans covered; a urologist or plastic surgeon may stitch together some of the flesh toward the top the shaft

or thread sutures around the end of the foreskin to cinch it closed like on a drawstring bag. With help from a friend he hired to scour forums and studies for leads on physicians to query, Floyd was pleased to discover that a number of doctors had devised ways of reconstructing a foreskin. He and his friend reached out to a handful, including Sven Gunther, a plastic surgeon specializing in gender-affirming care. “I’ve actually been waiting a long time for this,” Gunther told Floyd when they first spoke. He told me later, “I would say I probably have an obsession with giving people the genitals that they want.”

The penis is an unusually temperamental organ for cosmetic surgeons to handle. Unlike breasts, a penis can change size in seconds. Unlike noses, it’s covered in skin that’s stretchy and moves. Foreskin-elongation surgery has proceeded by fits and starts since the second century AD, when the ancient Greeks, who encouraged tugging for infants, were wild about long foreskins. There was an uptick in demand amid the persecution of Jews during the Nazi era. (Jewish and Muslim males are routinely circumcised at birth as part of their faith.) Yet only recently have doctors taken restorers more seriously by studying their predicament and developing surgical fixes. Even then, physicians who are sympathetic recognize that skepticism is rampant. “Regardless of the healthcare professionals’ personal stance in the ethical debate on circumcision, we strongly encourage an open attitude towards these patients,” wrote two plastic surgeons in a 2020 paper in the *International Journal of Impotence Research*. “Their wish for foreskin reconstruction is a persistent one and is rooted in a sense of loss and should therefore not be taken lightly.” A group of physicians and psychiatrists who authored a 1981 paper on foreskin restorers noted, “Most of our colleagues assumed that these patients must be psychotic when we initially discussed the subject.” The patients were not, the doctors felt the need to clarify.

One issue that has continually vexed surgeons is where to source the new skin. Sewing flesh onto the tip of the penis is ill advised, as it’s likely to rot from a lack of blood flow. Some physicians simply rearrange the penis’s existing flesh by dissecting it and pulling it forward over the glans; a team of doctors in India suture shaft skin directly onto the head of the penis. Other physicians have grafted flesh taken from the patient’s thighs, groins, or love handles onto the base of their shaft and then advanced the skin past the tip of the penis. Aref El-Sewefi — a urologist in Germany who has developed a reputation for reconstructing foreskins and whom Floyd’s friend queried on Floyd’s behalf — prefers to

take skin from the scrotum.

Three years ago, after noticing more patients seeking help recovering their foreskins, El-Seweifi, who mostly elongates penises and enlarges testicles, began to offer what he touts as a pioneering foreskin-reconstruction surgery (although a team of doctors described using a similar technique in a paper published in 1982). During the first of two hour-long surgeries, El-Seweifi creates an incision around the circumference of the shaft, slides the dissected skin about a centimeter toward the glans, then pulls the penis through an opening in the front of the scrotum, created by making two parallel, horizontal slits into the ball sack. “It is a sort of burying the penis in a tunnel in the scrotum,” he told me. The penis remains buried for three months, during which the patient can pee normally (only the shaft is ensconced, leaving the tip exposed) but erections are limited. (They hurt, so they go away.) After a month of healing, patients must apply clamps to their ball sacks for 20 minutes a day for up to three weeks to restrict blood supply and encourage the flap of scrotum on the shaft to develop blood vessels that connect to the skin on the penis. In the second and final surgery, El-Seweifi cuts the penis out of its tunnel and sews up the scrotal skin so it’s snug around the shaft. With this new tissue in place, El-Seweifi slides everything forward toward the glans, thus yielding a solid impression of a foreskin. The procedure costs around 5,000 Euros (about \$5,700).

Assuming the patient heals properly, the only further complications are cosmetic. Grafted skin can be a different color than the rest of the penis; one restorer, who transplanted thigh skin onto his shaft, spent decades tattooing his penis in an effort to make the hues match. Unlike the penis itself, scrotal skin also tends to be quite hairy, which physicians suggest addressing with lasers, depilatory creams, or tweezers. El-Seweifi told me one of his patients was actually grateful for the new fuzz: “He said, ‘No, leave it. Because it makes a very good stimulation to my girlfriend.’”

Ultimately, Floyd decided to work with Gunther over El-Seweifi, even though Gunther had never done a foreskin reconstruction before. Confident he could apply techniques he’d honed performing labioplasties and phalloplasties on his nonbinary patients, Gunther pitched Floyd on his plan: He’d dissect and then slide forward the skin on Floyd’s penis — bringing just a smidge of the scrotum onto the shaft — then reshape the skin from a column into a cone so it would keep the glans covered. (Floyd’s years of tugging gave him enough loose skin to work with; the procedure would be unlikely to succeed otherwise.) “Compared to how difficult my other surgeries are, this one’s kind of an easier one,”

Gunther told Floyd. Even so, Gunther warned that the nearly two-hour procedure carried with it the risk of bleeding, infection, scar tissue, ripped stitches, numbness, and necrosis. Floyd would need to take antibiotics and erection suppressants and abstain from sexual activity for four to six weeks. I'll do it, Floyd decided: "I will submit myself to an experimental surgery so that we can advance the science forward." He trusted Gunther's skill as a surgeon and preferred flying to California over making multiple trips to Germany to see El-Seweifi.

Wary of insurance delaying the process, Floyd paid out of pocket for his new foreskin, which cost him \$25,000, including flying to California from his home in Pennsylvania and more than a week's stay in a hostel during his recovery. "I am in a significant amount of debt now," he told me. Still, he gained 17 millimeters of foreskin — enough to cover the head of his penis when flaccid — and immense satisfaction. "I look in the mirror and I'm just like, 'Holy shit, that's the body that I've always really wanted to have,'" he added.

Three days after the surgery, he went on a five-mile hike. "I was actually legitimately astonished at how not painful the procedure was," he told me. Too excited to wait, he also masturbated earlier than Gunther advised. When we spoke about six weeks after his surgery, he hadn't yet put his foreskin to the test by having penetrative intercourse with his husband. Despite other doctors' skepticism, Gunther considered it probable that Floyd's new foreskin would help him regain sensitivity in the head of his penis by protecting it from the elements. Gunther has observed that when a patient's glans is newly re-covered with skin, such as in a vaginoplasty, the rough layer sloughs off. "It can just peel off like a sunburn peels," Gunther said. "Underneath, it's fresh, pink, shiny skin." Though the additional flesh gained through tugging or surgery isn't technically foreskin, restorers swear by the extra lubrication and stimulation it offers, a phenomenon they glowingly refer to as "glide."

Even if the functional changes of restoring are negligible, the ecstasy can be real. To Gunther, adding a few millimeters of skin to a penis, though labeled a cosmetic procedure, addresses serious issues. He says that circumcised men are "reporting functional problems: pain during intercourse, sensitivity loss, hygiene issues, and psychological distress. If there's a procedure that measurably improves someone's quality of life, it can't be dismissed." And restorers' reviews of life with a foreskin can be quite tender: They feel "whole again," "empowered." Bob, the retired engineer, credits his new foreskin with bringing him an unparalleled sense of well-being. "The benefits start the moment you

reach down, grab your dick, and start tugging,” he said on a recent podcast.

For those unsatisfied with tugging and surgery, there is another solution on the horizon: foreskin transplants. Foregen, a nonprofit founded in 2010 by an Italian artist, has poured hundreds of thousands of dollars — almost all from crowdsourced donations — into researching ways to attach cadaver foreskins onto circumcised penises. Results from the nonprofit’s most recent study, published in November, were promising: When researchers buried foreskins from human corpses into rats’ backs, the transplants were not rejected by the rodents’ bodies, which actually began to support the foreign tissue. More recently, scientists repeated the experiment with sheep, either burying cadaver foreskins into the tissue by their shoulder blades or attaching them externally, with more mixed results.

Before realizing that surgery was an option, Floyd, desperate for a foreskin fix, donated around \$10,000 to Foregen and another \$5,000 to Akroprint, a two-year-old company founded by former Foregen staffers that aspires to regenerate foreskins by 3-D-printing them. Akroprint’s founders are convinced foreskin transplants will be so popular — they estimate 18 million American men will want them — that demand will overwhelm the supply of cadaver foreskins, hence the need to manufacture their own. Already, more than 12,000 volunteers have expressed interest in Foregen’s human trials, which the nonprofit’s chief science officer told me they were getting close to applying for in Europe. (Foregen has developed a reputation for continuously promising its clinical work is poised to begin: In 2024, it estimated human trials would start this year.)

Floyd is so pleased with his new foreskin that he’s been sharing pictures of his penis — before, after, and mid-surgery — to Reddit in the hopes of providing an alternative option to restorers who, like him, don’t want to keep on tugging. Since first posting about his procedure, he has received dozens of inquiries. For his part, Gunther now has around one foreskin surgery each week. “I am making this my new obsession,” he told me.

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