

WHAT IS VASECTOMY?

A simple, safe and permanent form of male contraception.

WHAT DOES THE OPERATION ENTAIL?

The vas (the tube carrying the sperm from the testicles to the penis) is divided and the two ends separated. The procedure is done through one small incision in the scrotum, using a local anaesthetic. The operation takes about 20 minutes.

DOES IT AFFECT YOUR SEX LIFE?

No. There is no change in the nature of sexual intercourse and fluid comes out exactly as before. The testicles continue to produce hormones and the couple should not notice any change in their sex life.

HOW SOON CAN NORMAL SEX LIFE BE RESUMED?

You may resume intercourse after 2-3 days. The operation does not immediately make you sterile since there are millions of sperms in the storage space between the cut tube and the end of the penis. Time must be allowed for these to be flushed out. Sperm tests are done 16 weeks after the operation and you must continue to use contraception until you learn that the sperm tests are all clear.

IS IT REVERSIBLE?

When deciding on a vasectomy you must consider the operation to be permanent and irreversible. A reversing operation is at best about 50% successful and may not be funded by the NHS.

CONSENT

Your written, informed consent is required prior to operation.

PREPARATION

On the the day of the operation you may have eat as normal. Please shave the entire groin area and scrotum and shower prior to arrival.

AFTER THE OPERATION

It is advisable to arrange to be collected from the surgery and taken home but you ought to be fit to drive yourself home if necessary. Spend the remainder of the day and night at rest. This prevents unnecessary bruising. It is advised that you refrain from heavy work or strenuous exercise

for a further 48 hours. Wear tight underpants day and night for 1 week to minimise bruising

If you experience a great deal of discomfort or throbbing in the testicles please get in touch with the surgery or your GP. Some bruising and swelling of the skin around the site of the operation is usual. Keep the area dry for 48 hours. The skin stitches (if used) do not have to be removed though they can take up to 6 weeks to dissolve and come away.

EARLY COMPLICATIONS

- **Bruising, Swelling and Bleeding** occur in up to 10% of patients, usually within the first week. It can be severe enough to delay going back to work for up to 6 weeks
- **Infection.** The risk is small, about 1-2% and may require antibiotics.
- **Pain.** Up to 30 % of men notice mild discomfort after the operation and about 5% complain of troublesome discomfort lasting up to one year

LATE COMPLICATIONS

- **Pain.** About 2% of men complain of long-lasting pain. The cause of this is unknown but has been found to be more likely in men who have the following, prior to operation:
 - a) urinary symptoms
 - b) tender testicles or tubes
 - c) abnormalities of the testicles or tubes

In such circumstances consider carefully whether you wish to go ahead with the operation

- **Cysts and Swellings in the Scrotum.** It is now recognised that up to 30% of men may develop a swelling associated with the tubes after having had a vasectomy. If you develop a scrotal swelling and consult your doctor do not forget to mention that you have had a vasectomy as it may help the doctor to decide how to proceed.

FAILURE RATE

Vasectomy is the most reliable form of contraception (only abstinence is more reliable). However it does have a small failure rate of about 0.5-1%. Most failures are detected at the time of the sperm tests. There is, however, the possibility of a late failure, (natural reversal) even after negative sperm tests. This happens to about 1 in 2000 men and must be accepted as a known risk of the procedure.

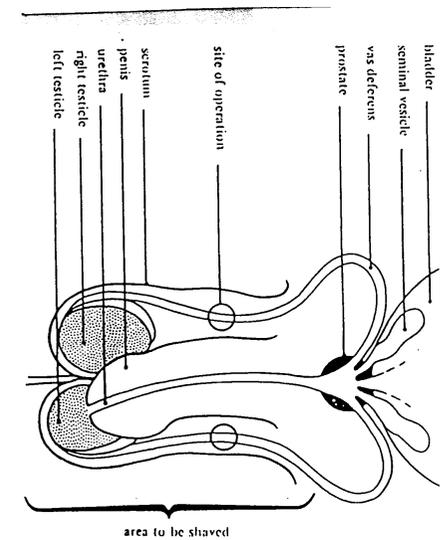
LONG TERM EFFECTS

There is no conclusive evidence of vasectomy causing any long term problems. Publicity has been given to:

- **Cancer of the Prostate.**
- **Cancer of the Testicle**

A 15 year US study compared 10,590 vasectomised men with age matched controls. The results showed no difference in the incidence of disease or mortality between the two groups (*J Clin Epidemiol* 1993;46(8):697-958).

Procedure date:



Herts

VASECTOMY CLINIC