

# Vasectomy: What You Need To Know



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## Vasectomy

A vasectomy is a minor surgery that makes you unable to father children.

A vasectomy is considered a permanent form of birth control. The surgery works almost every time. Fewer than 1 out of 500 men who have had this surgery will still be able to father children. A vasectomy can be reversed but success rates of pregnancies vary.

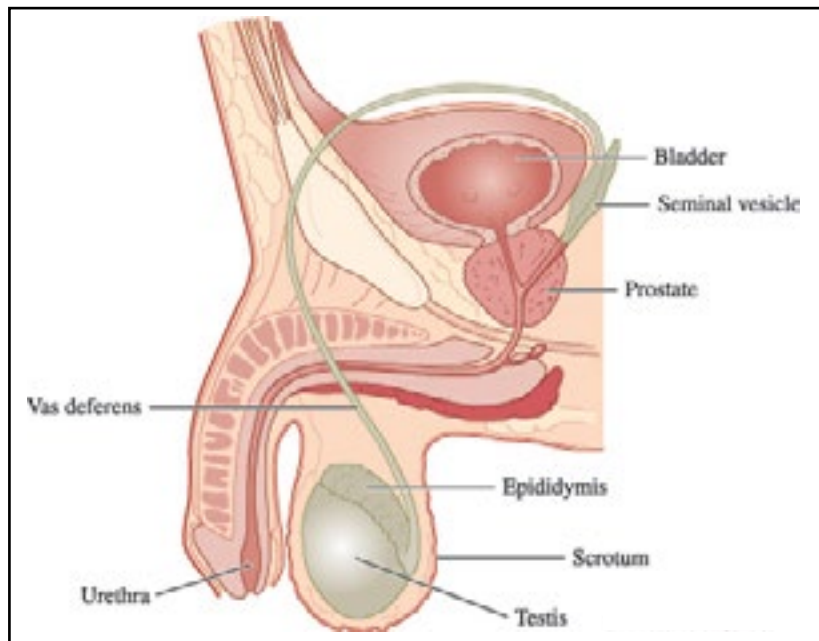
A vasectomy is a safe, effective and permanent birth control method. It will not:

- interfere with your sex life
- change either your hormone levels or your ability to have an erection
- cause health problems (such as prostate cancer or heart disease)
- protect you against sexually transmitted diseases (STDs).

## Your Reproductive System Before a Vasectomy

It is helpful to know the parts of the male reproductive system to understand how a vasectomy works.

- **Vas deferens:** long tubes that carry sperm to your penis.
- **Urethra:** the canal that allows urine to pass from your bladder to outside your body.
- **Bladder:** a muscular sac that stores urine.
- **Seminal vesicle:** a tube-like gland that squeezes fluid into your urethra during sexual climax to produce semen.
- **Prostate:** a walnut-sized gland that squeezes fluid into your urethra during sexual climax to produce semen.
- **Epididymis:** a soft, tube-like structure that holds sperm.
- **Scrotum:** a sac-like pouch that holds your testes.
- **Testes (testis):** two egg-shaped sacs that produce sperm and testosterone.

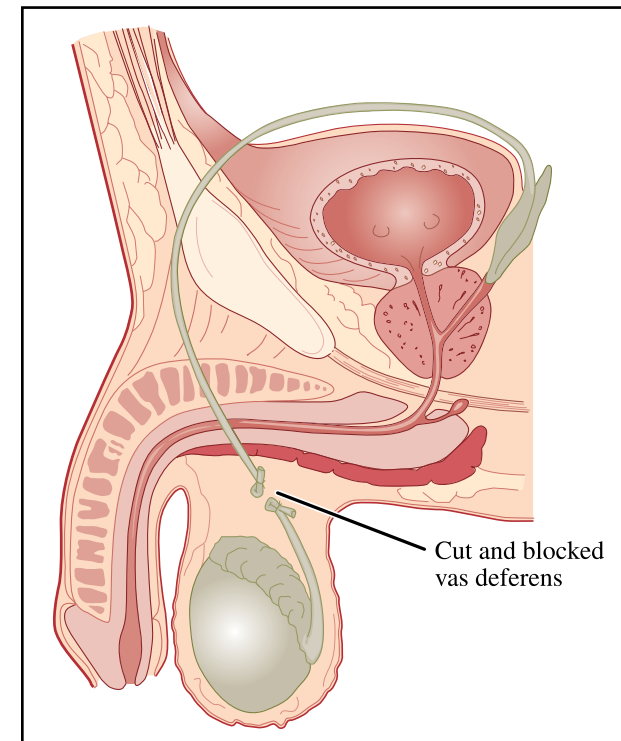


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## Your Reproductive System After a Vasectomy

During the surgery, your doctor removes a piece of each vas deferens and stitches the ends. These tubes normally take sperm and hormones from your testes to your penis.

After the surgery, your testes will continue to make sperm and hormones. However, the sperm and hormones will no longer be able to move from your testes to your penis because the vas deferens has been cut.



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The doctor will cut and remove a portion of the vas deferens and seal each tube end.

## Before the Surgery

- Avoid taking aspirin, ibuprofen or other anti-inflammatory medicines 10 days before surgery. They may cause bleeding after the vasectomy.
- Follow your doctor's instructions to shave your scrotum.
- Bring snug-fitting underwear (briefs, not boxers) to the appointment to wear when you are ready to leave.

## During the Surgery

- Your doctor will inject a numbing medicine into your scrotum. You will have three injections.
- The numbing medicine will keep you from feeling any pain.
- Your doctor will make a small hole in your scrotum. Both vasectomies will be done through the same hole.
- Your doctor will cut and remove a portion of the vas deferens and seal each tube end with cautery or stitches, or both.
- You may feel some movement and tugging. The surgery should not be uncomfortable.
- The surgery takes up to 45 minutes.

## After the Surgery

- Your genital area will be sensitive and sore for a few days. To reduce discomfort:
  - You may wear snug-fitting underwear or a scrotal support.
  - You may apply an ice pack (wrapped in a tea towel) for 20 minutes at a time.

- You may take acetaminophen (Tylenol®). Follow package directions.
- If your doctor prescribed pain medicine, take it as directed. Do not drive or operate machinery if you are taking prescription pain medicine (it may make you drowsy).
- Avoid heavy lifting, twisting or bending for 7 to 10 days.
- Follow your doctor's directions for returning to work or school.
- Do not have sex for 7 days.

## A Special Note About Birth Control

A vasectomy will not prevent pregnancy right away. It takes about 25 ejaculations to empty the leftover sperm which could still cause pregnancy.

You will receive information on testing your semen to make sure it is free of sperm. **Before this test, you and your partner will need to use another form of birth control.**

## Surgery Risks

Like all surgeries, a vasectomy has possible risks.

- You may get an infection.
- You may feel some pain for a few days or weeks.
- You may feel lots of pain if there is a slow leak of blood in your scrotum. If this happens, part of your scrotum can become swollen, firm and tender. This happens in about one in 20 cases. In rare cases, this may require more surgery.
- You may get a sperm granuloma. This is a nodule (about the size of a pea) that forms at the end of the cut tube. It is your body's immune system reaction to the cut. This is usually not painful.

The following are rare risks.

- Your cut tube ends may grow back together. This is called recanalization. This is rare.
- Sexual problems (such as lack of interest or erection problems) affect less than 1 percent of men who have had vasectomies. There are no physical or medical reasons why a vasectomy should cause any negative effects on your sex life.

## Vasectomy Reversal

It is possible to reverse a vasectomy if you decide you would like to have more children. This surgery is called a vasovasostomy. During this surgery, your doctor reconnects your vas deferens. This allows the sperm to move from your testes to your penis.

It is important to think carefully about getting a vasectomy. Attempts to reverse the surgery are not very successful. It is not usually covered by insurance.

Talk to your doctor if you have any questions or concerns about either surgery. You, your partner and doctor can decide what is best for you.

## When to Call Your Doctor

Call your doctor right away if you have:

- bruising or a growing lump
- pus-like drainage, increasing redness, swelling, tenderness or warmth at the incision site
- a temperature of 101.5 F or higher
- chills
- problems urinating
- any questions or concerns.





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