



Vasectomy

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WHAT IS A VASECTOMY?

If you are thinking about getting a vasectomy, you are not alone. Each year, more than 500,000 men in the U.S. choose vasectomy as permanent birth control. During vasectomy, each vas deferens (the two tubes that move sperm) are sealed off. This blocks sperm from reaching the semen that is ejaculated from the penis. After a vasectomy, the testicles still make sperm but they are absorbed by the body. A vasectomy prevents pregnancy better than any other method of birth control, except abstinence. Only 1 to 2 women out of 1,000 will get pregnant in the first year after their partners have had a vasectomy.

THE PROCEDURE

Your doctor can perform a vasectomy in an office or hospital. Vasectomy is a minor surgery that should take about 20 minutes. One urologist who performs vasectomies tells his patients: "take a long hot shower the morning before with a lot of soap. And make sure you have a bag of frozen peas and a couple of rented movies at home."

Before the vasectomy, your scrotum will be shaved and cleaned. Usually local anesthesia is used. So you will be awake but should not feel any pain. Some patients may also be given medicine to reduce anxiety. With a standard vasectomy, the urologist makes one or two small cuts in the scrotum. One vas deferens tube is cut and tied or sealed with heat. The tube is replaced inside the scrotum. The procedure is then repeated on the other side. Lastly, the skin

is closed with stitches that dissolve and do not have to be removed.

Another popular option is a no-scalpel vasectomy. In this procedure, a small clamp with pointed ends is used to puncture the skin. Then each vas deferens is lifted out, cut, sealed and then put back in place. A no-scalpel vasectomy works just as well as a standard vasectomy. Some benefits of a no-scalpel vasectomy are less bleeding, swelling and pain. There is also a smaller hole in the skin.

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RISKS

Up to 20 in 100 men may have ongoing pain or discomfort after a vasectomy. Most often, it is due to congestion of sperm in the system behind the blockage. This usually resolves with time. The pain is most often treated with anti-inflammatory drugs, like ibuprofen. One to 6 men in 100 may need more treatment to ease their pain.

Otherwise, the risk of bad side effects after a vasectomy is very low, but may include:

- Bleeding under the skin, which may cause swelling or bruising. (Call your doctor if your scrotum swells a lot soon after your surgery.)

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- Infection at the site of the cut. It is rare for an infection to occur inside the scrotum.
- A small lump forming because sperm leaks from a vas deferens into nearby tissue. This is usually not painful. If it is painful, it can be treated with rest and pain medicine. Sometimes, surgery may be needed to remove the lump.
- Swelling of the vas deferens
- In rare cases, the vas deferens may grow back together, which would allow the man to have children again.

Older studies suggested a risk of prostate cancer and heart disease years later in men who have had vasectomies. But many years of research since then have found no link between vasectomy and these health problems.

More than 500,000 men have vasectomies in the U.S. each year.

HEALING

Your scrotum will be numb for one to two hours after a vasectomy. Put cold packs on the area. (The bag of frozen peas mentioned before works well.) Lie on your back as much as you can for the rest of the day. Mild discomfort or pain is normal after a vasectomy, and should be treated with pain relievers. Wearing snug underwear or a jockstrap will help ease discomfort and support the area.

You may have some swelling and minor pain in your scrotum for a few days after the surgery. You may be able to go back to work in one or two days. It depends on how you feel. But you should avoid heavy lifting for a week. You can have sex again as soon as you are comfortable, usually within a week.

But keep in mind that the vasectomy is not effective from day one. Sperm may still be in the semen for many months after a vasectomy. It takes about 20 ejaculations or three months to clear the sperm from the tubes. However, results vary for different men. Most often, your urologist will test your sperm count three months later. This is done to make sure your semen is clear of sperm. Until the sperm count is zero, sex without another method of birth control may lead to pregnancy.

After recovering from a vasectomy, a man and his partner should notice no difference during sex. An uncomplicated vasectomy does not cause erection problems. Ejaculation and orgasm should feel the same. The amount of semen does not decrease more than five percent. The only change your partner may be able to feel is a lump at the vasectomy site if one has formed.

THINGS TO THINK ABOUT

The choice to have a vasectomy is a very personal one. Talk with your partner, and think about what is best for you and your family. Be sure to bring up any questions you may have with your health care provider.

Below are some things to keep in mind:

- Vasectomy is safer and cheaper than tubal ligation (blocking the fallopian tubes to prevent pregnancy) in women.
- The one-time cost of a vasectomy may be cheaper over time than the cost of other birth control methods, such as condoms or the pill.
- A vasectomy does not protect against sexually transmitted diseases (STDs). Use condoms to protect against STDs.

Lastly, it is important to note vasectomy is a **permanent** method of birth control. This may be a plus or a minus based on your own situation. You should not have a vasectomy if you may want to father children in the future. While it is possible to have a vasectomy reversed, this is more complex and costly. Also, reversing or “undoing” a vasectomy does not always result in pregnancy. So it is important to think through all your choices carefully before deciding to have a vasectomy.