

Vasectomy Service at Winchcombe Medical Centre

The service is run by Dr Georgina Charlwood who is a GP partner at the Winchcombe Medical Centre. She is assisted by Hannah Owen Smith who is an experienced surgical nurse as well as another member of the nursing team.

It is very important that you read and understand this leaflet prior to your vasectomy appointment to enable us to be certain that you are in a position to give valid and informed consent. You will of course be able to ask any questions on the day of the procedure. It sometimes helps to make a note of anything you wish to ask to remind yourself on the day.

What is a vasectomy?

Vasectomy is a surgical procedure involving removal of a small section of the sperm carrying tubes (vas deferens), preventing sperm getting into the fluid you ejaculate. At Winchcombe Medical Centre we use the **No-Scalpel Vasectomy (NSV) technique**.

Key Points

- Vasectomy is the most effective method of male sterilisation
- It should always be regarded as irreversible
- You will not be sterile immediately, but will need to continue alternative contraception until you have been given the "all-clear" from you post-operative semen test at least 12 weeks after the procedure.
- Late failure due to the ends joining themselves back together occurs in 1 in 2000 men
- There is no evidence that vasectomy causes any long-term health risks eg testicular or prostate cancer.
- Troublesome chronic testicular pain is reported in up to 15% of patients and can be severe enough to affect day-to-day activities in up to 5%.

Who chooses vasectomy?

Anyone who feels that his family is complete or who is certain he will never want to have children.

We will consider anyone, regardless of whether you are married, or whether you are already a Dad. We will counsel you on the day of your vasectomy so that we can answer any of your questions and ensure that you are happy with your decision. We encourage your partner to be present for the counselling chat.

If you are under 25 years old we will recommend that you have extra counselling before you make a final decision. Whatever your age, you should consider vasectomy to be a permanent step and you should not undergo the procedure if you have any doubts. Vasectomy is NOT the answer if you are experiencing sexual problems or difficulties in your relationship.

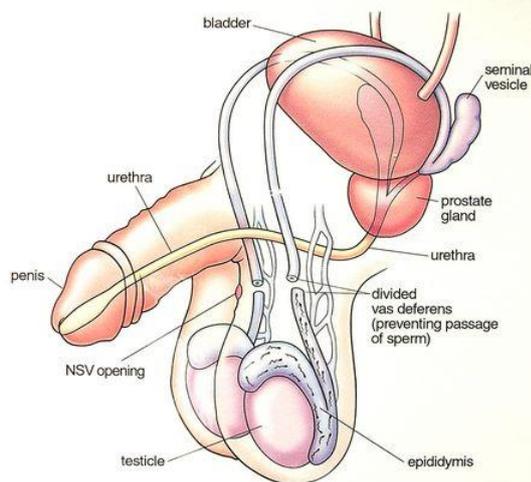
How is the procedure carried out?

You will be examined prior to the procedure to ensure the doctor can feel both of your vas deferens tubes easily. Occasionally if the tubes are not easy to feel we will not be able to carry out the procedure.

We then clean the scrotum with an antiseptic solution and cover you with a sterile drape.

A local anaesthetic injection (similar to the ones used by dentists) is placed just under the skin at the top of one side of the scrotum and around the vas deferens. Your testicles are not injected as some men fear. Once you are numb, a small opening, measuring less than 1cm, is made in the scrotum using a special surgical instrument. Through this the doctor can reach the sperm-carrying tube. A small section of the vas deferens is removed and the two ends are tied off and sealed. The procedure is then repeated on the other side of the scrotum. The wound closes naturally and no stitches are required. The procedure takes ten to twenty minutes on average from start to finish.

Male Reproductive System and No-Scalpel Vasectomy



Does it hurt?

The only painful part of the procedure is the two local anaesthetic injections which are used to numb the skin and the vas deferens. You will feel the discomfort of the needle going in followed by a brief stinging sensation as the local anaesthetic works for a few seconds before the area becomes numb. This can feel like a bee sting. After this you should not feel anything sharp or painful, but you will feel some sensations from the scrotum associated with moving the testicles. Most men are relieved as the procedure is much less painful than they feared. The anaesthetic lasts approximately 3 hours and afterwards there is sometimes a dull ache which can be relieved by taking regular ibuprofen or paracetamol. Some men use a bag of frozen peas wrapped in a towel and applied to the area which can help.

What happens after the procedure?

After the procedure, you and your partner will receive further information about how to look after yourself and the procedure for collecting your semen tests will be explained. The semen tests are sent to the laboratory at Gloucestershire Royal Hospital.

What are the risks?

Vasectomy is very safe and long-term effects are extremely rare. However, any surgical operation carries a small risk of complications such as pain, bleeding and infection. In the unlikely event that you develop any problems after your vasectomy should contact your GP surgery.

- **Infection:** Infection is very rare as we do not use any stitches. Most infections are mild wound infections requiring a short course of antibiotics. The signs of infection are redness, swelling, pus around the wound and you may have a fever. Some men develop infection or inflammation of the testicle (Epididymo-orchitis) following the procedure.
- **Bleeding:** Most men will get some mild bruising and swelling around the scrotum and base of the penis. This can be minimised by wearing tight underwear and resting as much as possible during the first 48 hours after the operation. Occasionally there is bleeding from a damaged blood vessel near the vas deferens which causes a collection of blood called a haematoma (occasionally requiring surgical drainage). This usually occurs within the first 48 hours and hence you should do as little as possible after the operation to minimise the chances of this happening (we advise 48 hours with your feet up on the sofa if at all possible).

In our experience some men develop a haematoma after a week, often having returned to work and normal activities too soon. Remember, the wound is very tiny and most of the operation took place inside where you can't see it, so try not to assume that if the wound is healed up you are fully healed on the inside as well. If you think you have developed a haematoma you should let your GP know: it is painful, but not dangerous, and will gradually settle after a few weeks.

Blood in the semen is common the first few times you ejaculate

Failure:

- **Early Failure:** For around 1 in 100 patients the operation is not successful (sperm still present on semen sample sent following the procedure) and may need to be repeated.
- **Late Failure:** 1 in 2000 chance of the sperm carrying tubes rejoining naturally. This can occur years later.
- **A painless lump** (pea-sized) called a sperm granuloma may develop in the sperm carrying tube (vas deferens) and persist for a while. This is caused by the body's natural healing reaction and, again, no specific treatment is usually needed.
- **Post-vasectomy pain syndrome:** Up to 5% of men (one in twenty) may experience a dull, intermittent aching sensation or pain on ejaculation after vasectomy. This can be severe enough to interfere with normal activities but usually settles with time and some anti-inflammatory medication. Rarely, these men may require another operation, such as excision of the vas or reversal of the operation to help this pain.

Other Commonly Asked Questions

Is vasectomy reversible?

You should only decide to have a vasectomy as a permanent method of family planning. If you think you might change your mind then you and your partner should consider an alternative method of contraception and wait until you are 100% sure of your decision. Approximately 1% of men who have a vasectomy regret their decision at some stage, usually because of unforeseen changes to their family circumstances.

Will vasectomy affect my sex life?

Many couples find greater sexual freedom once the risk of unwanted pregnancy has been removed. Erection, orgasm and ejaculation are not affected. Sperm continue to be produced by the testicles but their passage to the penis is blocked and they are re-absorbed by the body. Vasectomy has no effect on the production of male hormones. You can have sex again as soon as you feel comfortable. We recommend that you wait a few days to give the incision time to heal.

You will need to use another method of contraception until we write to tell you that your vasectomy has been effective based upon the result of your sperm test.

Will I need to take time off work?

You will need to take the next two days off work and take things very easy. If you have a physically demanding job you may need to take one to two weeks leave from work. Please telephone us for advice if you are concerned about your particular circumstances.

Can I drive afterwards?

It is illegal for you to drive home immediately after the procedure and not advisable for you to travel by public transport. You should avoid driving for 2 days after the procedure while you are resting.

When can I play sport again?

Physically strenuous sports should be avoided for at least four weeks. More gentle exercise such as swimming can be resumed after about two weeks.

How do I know if the vasectomy has worked?

We will ask you to supply a semen specimen at least 12 weeks after your vasectomy which you will need to take to the laboratory at Gloucestershire Royal Hospital. Ideally you should have ejaculated at least 20 times during this 12 week period to clear the sperm that were already present before the vasectomy. Your sample is checked under a microscope to see if sperm are present. If there are no sperm in your sample we will send you an "all clear" letter. You can then have sex without using another method of contraception. It can take quite a number of ejaculations to clear the tubes of sperm, so we may need to ask you for more samples. We will keep you updated on what is happening, and why, at all stages.