

Information sheet for patients having a vasectomy (male sterilization)

Please discuss with your GP about other methods of contraception so that you are aware of all your options. If you have decided you want to be sterilised, please read the information below as well as the contents of the consent form before your appointment.

BEFORE THE OPERATION

- Please trim or shave the hair around the scrotum (under the penis) on the morning of the operation.
- You should not eat heavily beforehand, nor drink alcohol on the day of the procedure.
- You will need to wear well-fitting and supportive underpants or swimming trunks (ie not boxers) after the procedure for several days.
- Your appointment will include an examination of the scrotum, counselling and consent, followed immediately by your operation and the postoperative advice. Your overall visit at the centre is about 45 minutes.
- Occasionally it may not be possible to perform the procedure under local anaesthetic. This may be because it is not possible to mobilise the tubes (vas deferens) to the surface of the skin or a medical concern. You might then be offered referral to a hospital to have the operation done under general anaesthetic if you wish.
- We would prefer you have someone drive you home after the procedure.

THE OPERATION

- A small amount of local anaesthetic is used to numb an area in the scrotal skin using a very fine needle, and once numb, more anaesthetic is infiltrated deeper around the vas (tube carrying the sperm).
- The operation consists of removing a piece of the vas through a tiny incision in the scrotal skin and cauterizing the ends using diathermy.
- The procedure is then repeated on the other side.
- In most cases, only one incision is required. We prefer to use a couple of dissolvable stitches to close the wound, although this is not always necessary. It takes about 2 weeks for the stitches to dissolve.

AFTER THE OPERATION

The nurse will spend a few minutes with you and give you after care advice and answer any questions you may have. You may also be asked to fill in a satisfaction questionnaire about your experience at the Surgical Centre. Thank you in advance, as this helps us to improve our service. You can leave when you feel ready.

COMMON Qs and As:

Below are common questions patients ask us:

1. Do I still need to use contraception? Yes. Please be aware that you must not abandon contraception until we have informed you in writing that your semen sample is negative for sperm.
2. Can the operation fail? Yes. The procedure occasionally fails to render the patient sterile due to early re-joining of one or both tubes. This happens in about 1:200 cases. Your semen analysis at 16 weeks will pick this up. Late re-joining can also occur but is rare, believed to occur in 1:2000 vasectomies. Because it is very rare, further semen tests are not routinely done. Unfortunately, it is usually picked up if your partner becomes pregnant. You should contact us if this happens.
3. How and when do I do my sperm test? Post- op semen test- This is essential to check that your operation has been successful. You will be provided with a small container and a request form after the operation for you to use to do your sperm test. Please produce one semen specimen by masturbation no sooner than 16 weeks after your operation. Please put that date in your diary, as no reminder will be sent. Condoms should not be used for that purpose. It is estimated that men need to ejaculate at least 24 times before the test to clear the sperm that are already present in the tubes. It is also advised you have a period of abstinence between 2-7 days before doing the test. You are required to drop your sample directly to the haematology lab at **RCHT** (entrance next to the ED) **before noon** Monday- Friday, ideally within an hour of producing your sample. However, that is not possible, up to 4 hours later is acceptable. You will be informed of the result in writing about a fortnight later. Most men are cleared on their first sample. However, about 20% of men will have a positive first test. We shall notify you of this and ask you to provide another sample. We will tell how when to do that in your letter. You will be given the all clear in writing once we receive confirmation of a negative result.
4. What if the tests are still positive? Semen analysis- If several of the post op semen tests still show presence of sperm, we will request a fresh semen analysis. This looks at specific numbers and whether the sperm is motile or not (like a fertility test). You will be sent an appointment directly from the hospital with specific instructions on how to do your sample.
5. When can I resume intercourse? One week after. This allows time for the tubes to remain sealed.
6. Do I need to take painkillers? We recommend you take regular 'over the counter' painkillers as soon as you get home and do so for a few days. Keep the wound dry for 48 hours if at all possible.
7. When can get back to work or exercise? It is advisable that you make arrangements for light work for up to 2 weeks after your operation. No sports, heavy exercise or swimming is advised during that time.
8. Can the operation be reversed in the future? This is possible to do but the results are not good. It is best to regard a vasectomy as a permanent procedure. Vasectomy reversal is not available under the NHS.
9. Will my sex life be affected? Sexuality and virility- This is not affected. You will continue to have normal ejaculates but without sperm.

COMPLICATIONS AND RISKS

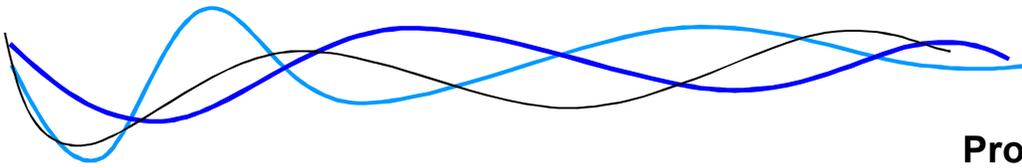
Any surgical procedure has an element of risk attached to it and occasionally things do not turn out as well as expected. Fortunately, the complications are uncommon.

- A little soreness and bruising are usual.
- Wound haematoma (discrete painful collection of blood) or infection (painful red, hot wound +/- a fever) do occasionally occur and may necessitate further treatment with drainage of the blood collection or antibiotics. These complications can occur in up to 5% of cases. Therefore you should report excessive discomfort or wound problem to your doctor.
- Granuloma- This is uncommon and consists of a tender lump at the end of the vas and is usually noticed several months after the operation. This is caused by a leak of sperm. It normally settles spontaneously. If persistent, it can be removed surgically.
- Slight swelling of the testis may occur. This resolves spontaneously but may take several weeks.
- Positive test at 7 months- Some men can have persistent but very small number of sperm, which are not motile. This is determined through a fresh semen analysis. In this case, we will issue you with a letter of 'special clearance'. Although pregnancy is not known to occur, the risk is not zero.
- Post vasectomy pain syndrome- A rare complication- pain may be experienced continually or intermittently for months or even years after. It may be very troublesome and occasionally require a further surgical procedure or vasectomy reversal. It is not possible to predict who might get it.

WHERE TO GET ADVICE

If you have any concerns during your post-op period, you can get advice or help from one of these sources.

- Contact our surgical team on 01726 885104 during office hours.
- Your own doctor or nurse if it is easier for you.
- Out of hours GP service- contact 111 or the OOH number provided by your surgery
- Your local emergency department



REQUEST BY A PATIENT TO STERILISATION BY VASECTOMY

I NAME:

NHS NO:

D.O.B:

I, hereby consent to undergo the operation of vasectomy under local anaesthetic, the nature and effect of which has been explained to me by my Surgeon. I have been told about and considered alternative methods of contraception.

I confirm that I have received, read and understood the information leaflet on the Probus Surgical Centre website or provided to me. I have been told that the object of the operation is to render me sterile and incapable of further parenthood and the effect of the operation may be irreversible. I understand I should not abandon other methods of contraception, prior to receipt of written notification that at least one sperm count at 16 weeks after my vasectomy has proved clear, or special clearance has been given, which may take up to 7 months.

I understand that the operation may occasionally fail (1:200 chance) because the vas re-joins spontaneously in the first 16 weeks. I have been told of the following possible risk and benefits. Any complications may require further medical treatment, hospitalisation or further surgery.

Benefits: No General Anaesthetic Complications
Sterility

Risks: Haematoma (1%)
Post Vasectomy/Scrotal Pain (a small risk 0.5%)
Infection (1%)
Early failure (In the first 16 weeks 1:200)
Late failure (Any time after being given the 'all clear' 1:2000)
Testicular atrophy (Very rare- loss of a testicle due to interruption of blood supply)

Statement of Patient

I agree to the procedure or course of treatment stated on this form. I had the opportunity to discuss the details of the procedure prior to the operation.

Patient's Signature:

Date:.....

Doctor's Confirmation

I am satisfied that the patient understands what is proposed and is happy to proceed to a vasectomy.

Clinician's Signature:

Date:

Clinician's Printed Name:

Statement of Interpreter (Where appropriate)

I have interpreted the information above to the patient to the best of my ability and in a way in which I believe he can understand.

Signed:

Date:

Interpreter Printed Name: