

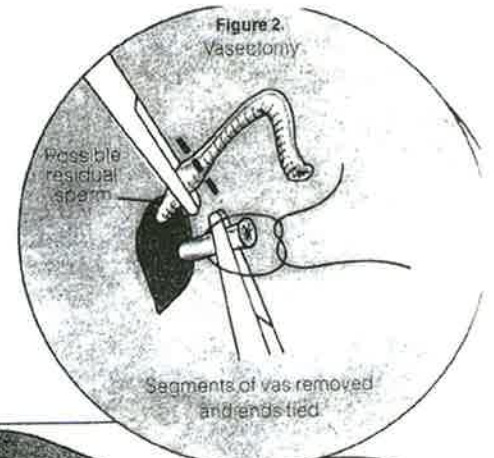
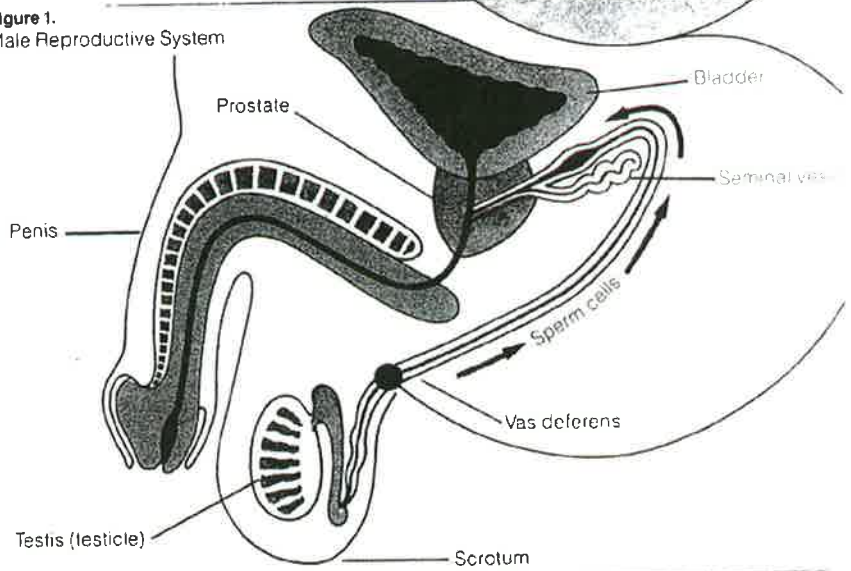
# THE FACTS ABOUT VASECTOMY

## What is a vasectomy?

As you probably know already, a vasectomy is a surgical procedure that renders a man sterile. What you may not know, are the specifics of the procedure and the period that follows. This literature is designed to give you a better understanding of both-before the surgery takes place.

To begin with, you should have some basic knowledge of the anatomy and physiology of the male reproductive system as shown in Figure 1. During intercourse, sperm cells travel from the testicles through the vas deferens, become part of the seminal fluid (which is produced by the seminal vesicles and the prostate gland), and are ejaculated through the penis. When the surgeon performs a vasectomy, he cuts through the vas deferens (plural is vasa deferentia) extending from each testicle. He then removes a small segment of the vas deferens and ties off the two remaining ends, Figure 2. The object of the procedure is to make it impossible for the sperm to become part of the seminal fluid. Since conception cannot take place in the absence of sperm, a vasectomy results in permanent male sterilization.

Figure 1.  
Male Reproductive System



**Will I be sterile as soon as the operation is over?** No. Contrary to what many people believe, you may not be sterile immediately after the operation. This is because there are some sperm residing above the area where the vas deferens is cut during the procedure, Figure 2. Until all of these sperm cells have been ejaculated, you will still be fertile. In general, it takes between 12-20 ejaculations following vasectomy for sperm to disappear. Most physicians who perform vasectomies require that their patients bring a sample of seminal fluid to the office about 9 to 10 weeks after the surgery or after about 20 ejaculations have taken place. The physician will examine the seminal fluid under a microscope to be sure that no sperm are present. Only when this has been confirmed, can you be sure that the surgery has been a success.

**Are the effects of the surgery permanent?** Yes. For all intents and purposes, once the surgery has been declared successful, you will be permanently sterile. The chances of the two cut ends of the vas deferens being spontaneously rejoined are extremely rare, probably not more than 1/10<sup>th</sup> of 1% (1 in 1000). For this reason, it is most important that you are completely sure that you want no more children before you consent to the surgery.

**How will the procedure affect my sex life?** Although the vasectomy will make you sterile, it will have *no effect whatever* on your potency – that is, your ability to have sexual intercourse. In fact, many couples find that their sex life improves after the vasectomy because they no longer have to worry about the surprise of an unwanted pregnancy.

**Will I still ejaculate in the normal manner?** Yes. Most of the seminal fluid which the male ejaculates during intercourse is produced by the seminal vesicles and the prostate gland. Only a small amount of the seminal fluid consists of sperm. Therefore, after a vasectomy, ejaculation will take place in the same way as it did before. The only difference is that there will be less fluid ejaculated, and this difference is barely noticeable.

**I've heard that the vasectomy can be performed in the physician's office. Is this true?**

This is a matter to be discussed with your physician, and you should follow his recommendation. Although the procedure is relatively uncomplicated and can be performed with minimal difficulty in the physician's office, many physicians find it more convenient to perform the vasectomy in a hospital setting.

**Is a vasectomy painful?** As with any operation, no matter how minor, there will be some discomfort associated with it. However, with proper anesthesia, this discomfort will be kept to a minimum. Your physician will discuss the type of anesthesia to be used. As a rule, local anesthesia and some supplemental sedation are all that is required. In some cases, general anesthesia may be needed, but this is a matter to be left to the discretion of your physician.

**Are there any complications associated with a vasectomy?** The problems that occur after the operation are usually quite minor. There will be some pain and tenderness in the area where the surgery is performed. There may also be some swelling and discoloration (black and blue marks). Your physician will probably prescribe some medication to keep the post-procedure discomfort to a minimum. As with any surgery, the possibility of infection is always present. However, this is usually quite rare following a vasectomy. In a very small percentage of patients, a blood vessel inside the scrotum continues to bleed after the operation. If this happens, the scrotum will swell and become very tender. Should you experience this problem, contact your physician. He may have to re-open the scrotum to tie off the "bleeder." This could require a return to the hospital and the administration of general anesthesia.

**Are there any long-term complications?** As far as medical science can determine at this time, there are no long-term complications associated with vasectomy. Recent reports in the lay press, have focused attention on scientific studies which show that a group of monkeys who had vasectomies developed premature hardening of the arteries when compared with a group of monkeys who did not have the operation. To date, comparable results have not been found in man. The results of a recent study suggest that there is no apparent association of coronary disease with prior vasectomy. Aside from sterilization, the only other known long-term side effect of the operation is that there may be a slight scar on each side of the scrotum where the incision is made.

**How soon after the operation can I have sexual intercourse?** You may resume your normal sexual activity as soon as you feel well enough to do so. This will probably be within a few days of the surgery. Remember, however, that you may not be sterile until some time after the operation, and therefore, you should continue to use some form of birth control until your doctor confirms that all sperm have disappeared from your semen.

**Is there anything special I should do before the surgery?** Once you have decided to have the surgery, you should discuss it with your physician. He may recommend that you purchase an athletic supporter or a scrotal suspensory before the operation takes place. He will probably require that you purchase one that does not have leg straps. Although it is not essential, he may suggest that you have someone accompany you to his office or to the hospital on the day of the surgery so that you can be driven home after the surgery is completed.

**What about after the operation. What must I do?** Once again, this is up to your physician. Many physicians will suggest the following: Wear the athletic supporter or suspensory for the first 24 hours after the operation. After that, you need only wear it if it makes you more comfortable. Do not engage in any strenuous physical activity for the first day, and work your way back to your normal routine over a period of about one week. You may shower on the day after the surgery. Just be sure that you wash the scrotal area gently, and rinse with warm water. When you dry the scrotum, do so by blotting the water with a soft towel. If your physician uses stitches to close the incisions, they will dissolve themselves and you will not

have to return to have them removed. However, because the incisions are so small, many physicians do not use stitches. In such cases, there may be a slight discharge from either or both of the incision sites. This need not concern you. Simply place a small sponge or gauze pad over the incision, replacing it on an as-needed basis, until the wound is completely healed. Even with such a discharge, you may still shower each day.

One final word... Discuss any questions you have about the procedure with your physician before the surgery takes place. Follow all his instructions completely. Be as certain as you possibly can be that you want no more children before you consent to the surgery.

#### **INSTRUCTIONS TO FOLLOW AFTER VASECTOMY**

Wear an athletic support "jock strap" for several days. Thereafter, you may wear it as long as you are more comfortable with it than without. **PLEASE BRING YOUR SUPPORTER WITH YOU ON THE DAY OF SURGERY.**

Avoid strenuous physical exercise for 5-7 days. You may perform all other normal duties

It is recommended that patients use sitz baths (that is soaking for 30 minutes in a warm tub of water) twice a day to assist the healing process. However, do not use a sitz bath 24 hours after the operation. You may apply soapy water gently to the scrotum to wash. Rinse and dry by blotting the skin rather than rubbing.

All "stitches" will dissolve, they do not require removal. If a stitch goes away prematurely, the incision may open a little and possibly a small amount of discharge or slight bleeding from the wound may develop. Do not worry about this; continue to bathe as before and place a small gauze pad inside the supporter which you may wear until the incision heals.

If you have pain or discomfort immediately after the vasectomy, two Tylenol tablets taken at 3-6 hour intervals are usually enough to provide relief. An icepack will provide additional comfort after the local anesthetic wears off, if used for several hours.

A small amount of oozing (enough to stain the dressing), some tenderness and mild swelling in the area of the incision are not unusual and should subside in 7-10 days. These should cause no alarm, but if there is an unusual amount of pain, a large swelling in the scrotum, or continuing free bleeding, please 327-4858 or 269-2655 to speak with a physician.

Maintain the usual precautions against pregnancy until the follow-up tests are completed. You must use a reliable method of birth control until the doctor has determined that no sperm are present.

It will be necessary for you to bring a semen specimen to the office after either 10 ejaculations or 6 weeks. Occasionally, the first specimen contains a few sperm. We require two negative specimens before you are considered sterile.

**PLEASE CALL THE OFFICE BEFORE BRINGING A SPECIMEN TO ASSURE THAT A PHYSICIAN WILL BE AVAILABLE TO EVALUATE IT.**

# ASSOCIATED UROLOGISTS OF NASHVILLE

## CONSENT FOR STERILIZATION

**PATIENT'S FULL NAME:** \_\_\_\_\_ **DATE:** \_\_\_/\_\_\_/\_\_\_

I request that \_\_\_\_\_, M.D. and whomever he may designate as assistants, to perform upon me the following sterilization operation \_\_\_\_\_.

I acknowledge that this procedure is entirely voluntary on my part and that I have not been forced in any way whatsoever into agreeing to this statement.

I understand that if the operation proves successful, the results should be considered permanent and irreversible and it will thereafter be physically impossible for me to impregnate or to conceive or bear children.

Although good results are expected from this surgical procedure, there cannot be any guarantee or warrant, expressed or implied, by anyone as the results that may be obtained.

The procedure to be followed has been explained. I have been told of the benefits to be expected and of the possible discomforts and risks.

All questions of mine concerning the operation have been answered and a final offer to answer any inquires concerning the procedure was made.

**I CERTIFY THAT I FULLY UNDERSTAND THE ABOVE AS READ AND REQUEST AND CONSENT TO THE OPERATION. THAT THE EXPLANATIONS REFERRED TO WERE MADE, AND THAT ALL THE BLANKS AND STATEMENTS REQUIRING INSERTION OF COMPLETION WERE FILLED IN BEFORE I SIGNED.**

\_\_\_\_\_  
**PATIENT'S SIGNATURE**

\_\_\_\_\_  
**SPOUSE'S (if applicable) SIGNATURE**