**VAECTION**

**Basic Information**

**What is vasectomy?**
Vasectomy is the common method of sterilisation in men and should be considered permanent. It is an operation in which the two ‘vas’ tubes (the vas deferens) are severed. This blocks the flow of sperm from the testicles into the penis, so that when the man ejaculates the semen does not contain sperm. There is no change to the volume of the semen. Sperm is what makes a woman pregnant.

**How is the procedure done?**
This simple procedure, which can be performed under local anaesthesia or intravenous sedation, usually takes about 30 minutes. It is done through a small “key-hole” in the skin overlying the vas deferens. A special instrument is used instead of a scalpel to minimise the ‘invasiveness’ of the procedure. The ‘vas’ tube, which lies just below the skin, is picked up and cut and sealed at both ends or one end is left open.

**How effective is a vasectomy?**
Vasectomy is reliable because every precaution is taken to separate the tubes so that they do not rejoin. The failure rate is about 1/2000 after the first negative sperm count. Possible rejoining of the vas deferens, although unlikely, usually occurs within the first 6 weeks after vasectomy.

**Is the man sterile immediately?**
No. It takes about 15-20 ejaculations to clear all the sperm from the tubes. At 3 months after the procedure it is necessary to have one or two sperm counts to make sure the semen has no sperm. The semen has to be collected by masturbation, intercourse followed by withdrawal, or emptying the contents from a condom into a specimen jar and then it is examined under a microscope to ensure success of the vasectomy. It needs to be delivered to the laboratory within 2 hours.

**Does vasectomy affect sexual function?**
No. It makes no difference to a man’s sex drive and performance. Some say that their sex life is improved because the worry about contraception is removed. Despite the absence of sperm in the semen, the fluid ejaculated seems normal because most of it is produced high in the tubes at the base of the penis.

Normal sexual activity can be started when you feel comfortable after the vasectomy, but it is important to use some form of contraception until the sperm count confirms success of the vasectomy.

**What happens to the sperm?**
Sperm are still produced in the testicles but lie around in the blocked tube for about 3 weeks before dissolving and being absorbed into the body in a similar way to blood after a bruise. Sperm only make up about 1% of the fluid ejaculated.

**What are the side effects of vasectomy?**
Bruising and swelling are common problems but settle after about 2 days. Bleeding and infection occur sometimes, but they settle quickly with treatment. A small lump caused by a build-up of sperm can develop at the operation site: these sperm granulomas usually settle themselves within 2-3 months.

**Can vasectomy be reversed?**
The cut tubes can be rejoined by microsurgery, but there is no guarantee of regaining fertility. As a general rule about 50-80% of vasectomy reversals lead to successful pregnancy (depending on the surgeon).

- Vasectomy should be regarded as permanent and irreversible.
- It is important to be definite about the decision to have the procedure and not be pressured.
- One option to consider is storage of sperm. Sperm can be stored at very low temperatures while still maintaining reasonable sperm quality. The knowledge that sperm may be stored for future insemination of a partner may be reassuring, and a reasonable “insurance policy” for couples considering vasectomy.