

# Having a Vasectomy

A patient's guide to having a vasectomy at  
**Primary Care Surgical Services**

# Having a Vasectomy

A vasectomy is the only permanent method of contraception in the male. It is safe and effective, and particularly suitable for men who have completed their families or do not wish to have any children.

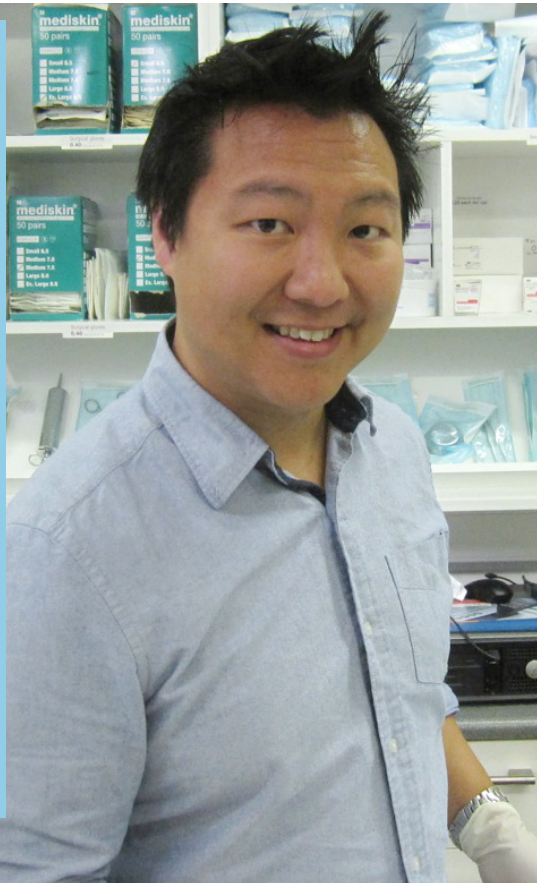
Because it is a permanent procedure, the decision to have a vasectomy should not be taken lightly.

As such, the information provided in this booklet should help explain the vasectomy procedure and aid you in deciding if this is the most appropriate form of contraception for you.

**Dr Justin Kwong is a General Practitioner based in the South-East of Ireland.**

Having trained and qualified from The Royal College of Surgeons in Ireland in 2004, he proceeded to train in surgery and attained a postgraduate membership with RCSI (MRCSI) and following this, he progressed to complete his GP training with the Mid Leinster GP Training Scheme and attained his postgraduate membership with the Irish College of General Practitioners (MICGP).

Dr Justin Kwong has a special interest in Minor Surgery procedures and is also trained in Vasectomy, and is accredited to perform Vasectomies by the Faculty of Sexual and Reproductive Healthcare (FSRH), a faculty of the Royal College of Obstetricians and Gynaecologists in the UK (RCOG).



# Vasectomy Questions

## What is vasectomy – how does it work?

Vasectomy is the common name for male sterilisation – a **permanent method of contraception**. It is a simple surgical procedure that seals the **vas deferens** (the tube that carries sperm from the testicles) to prevent sperm from entering the fluid you ejaculate. The procedure just takes **about 20 minutes**. We use a **No Scalpel Vasectomy (NSV) Technique** to achieve this, which has been shown to have a lower complication and infection rate when using this method.

## How much does it cost?

The fee for your vasectomy (including all pre-procedural counselling and follow up semen analysis after your vasectomy) is €595. Certain health insurance plans with VHI, LAYA and Irish Life Health will cover part of the cost of your vasectomy, but it would be recommended to enquire with them. Furthermore, part of the cost of the vasectomy can be claimed back from Revenue via the MED 1 Health Expenses Form.

## Who chooses for a vasectomy?

It is suitable for any man who decides that he definitely does not want to have any more children or any children at all. It is a permanent procedure; so you must be absolutely certain about your decision – you cannot change your mind afterwards. We therefore offer thorough counselling during the consultation prior to the procedure. It is possible to book the consultation and procedure on the same day or separately if you would like more time to consider. Ideally we would like to see all patients prior to doing the procedure. We will not refuse anyone on the

grounds of marital status, but generally do not perform vasectomy on men under 27 years old.

## How will a vasectomy affect my body?

Your testicles will continue to produce sperm, but following the vasectomy procedure, sperm cannot enter the tubes that are now sealed and is simply re-absorbed into the body. Vasectomy does not affect the production of male hormones. Orgasm and ejaculation are also not affected. The only difference when you ejaculate is that there is no sperm in the fluid – it will look the same.

## Will a vasectomy affect my sex life?

With no change to your hormones, ejaculation or orgasm, there is no reason why a vasectomy should have a negative impact on your sex life. In fact, many couples find vasectomy improves their sex life – enjoying greater sexual freedom once they no longer have the worry of an unintended pregnancy.

## How effective is vasectomy?

Vasectomy is probably the **most effective method of contraception that exists; the failure rate is less than 1%**. The sperm-carrying tubes may join together again naturally, but this is rare. If this happens soon after the procedure, we will find out when we test for sperm. We will offer to repeat the vasectomy at no cost to ensure it is successful. Very rarely, the tubes may re-join years after the procedure. Unfortunately, you will have no way of knowing if this has happened, but if your partner falls unexpectedly pregnant following your vasectomy, we will be able to offer advice and help.

# Vasectomy Questions

## What to do and expect on the day of the procedure

- We would strongly advise that you attend **accompanied to the procedure by someone**, to drive you home after the procedure, as this will reduce the chance of post-operative complications.
- **Sedation** will be offered to patients who are anxious about having the procedure done.
- A **shower or bath** is recommended on the day of the procedure. The testicles must be shaved to reduce the risk of infection (If you would prefer, this can be undertaken at the surgery by the medical staff).
- Arrive 15 minutes before your booked appointment so that last minute queries can be addressed.
- Please ensure that **TIGHT fitting underwear** is worn on the day of the procedure. This will reduce the risk of bleeding and discomfort following your vasectomy.



- Take 2 tablets of ibuprofen 200mg (Nurofen/Brufen/Buplex) one hour prior to your appointment time.
- On arrival, please check in at reception and following this, a consultation will take place when the procedure will be further explained, and where any questions and queries that you may have answered.
- Once you are happy to proceed with your vasectomy, a consent form will be completed prior to the procedure.

## Do I need sedation?

Sedation is offered routinely but it is not necessary to undergo vasectomy. A small quantity of sedation can be given intravenously through a small plastic tube in the back of your hand and we have found that men prefer this as it helps to relax them on the day, making them less anxious.

If you consent to having sedation, **you will not be able to drive home or operate any vehicle or machinery for the remainder of the day.**

## How is a vasectomy performed?

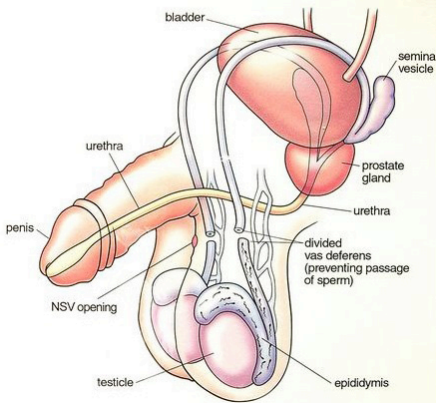
A fast acting local anaesthetic is given before the procedure, which numbs the area. We cannot guarantee that you will feel absolutely no discomfort as each person reacts differently, but any discomfort can be relieved with further local anaesthetic and pain-killers.

Once the skin is sufficiently numb, a small keyhole incision will be made to access the vas deferens on both sides, which will then be divided. A 1-2cm section of vas deferens on each side will be removed and following this, the ends

# Vasectomy Questions

are sealed. There will be no stitches required, as the keyhole opening will heal by itself.

## Male Reproductive System and No-Scalpel Vasectomy



## What are the risks of vasectomy?

Vasectomy is a very common and safe procedure and long-term complications are very rare. However, you need to be aware that, as with any surgery, there are risks involved.

**Infection** The risk is small, but can be easily treated with antibiotics.

**Swelling/bruising** It is common to experience a little swelling or bruising which can be relieved with painkillers and an ice pack. A small, pea-sized lump may develop around the wound and last for a while. This is your body's natural reaction to the healing process and usually needs no special treatment.

**Bleeding** A small amount of bleeding is not uncommon. This may form a swelling called a haematoma, particularly if you have been

undergoing physical activity. A haematoma can be painful but subsides over time. In rare cases further treatment may be indicated.

**Post-operative pain** A very small number of men have been known to experience testicular pain for several years following a vasectomy.

## Does vasectomy increase the risk of cancer?

There is no firm evidence linking vasectomy to cancer of the prostate or testicles. However we advise all men, whether or not they have had a vasectomy, to undergo regular health screening. It is also important to get into the habit of regularly checking your own testicles for lumps.

## Are there any alternatives to vasectomy?

Presently, there are very few methods of contraception for men, either vasectomy or condoms. If you have doubts over whether or not you will want to have children in the future, you should choose another method instead of male or female sterilisation, and should discuss alternative options with your GP.

## Does anyone need to know?

Only you can decide whether or not to have a vasectomy. You do not need your partner's agreement and **our service is confidential**. However, should you be in a long-term relationship, it is incredibly and always advisable that you discuss such an important decision with your partner. We will not inform anyone, without permission.

# Vasectomy Questions

## Is my medical history important?

We need to know if you have had **any previous surgery** on your testicles or a hernia repair. Scar tissue from these procedures can make vasectomy a little more complicated. Please also tell us of any other **significant conditions** such as chest or heart problems or hepatitis. It should not affect your procedure, but it is important for your safety that we are aware of such problems. The doctor will examine you prior to the procedure and should he/she anticipate any problems, your procedure may be postponed to a later date.

## Does the vasectomy work straight away?

**NO!** Because there will be some sperm left in your tubes, you will still need to use another method of contraception for a few months until the tubes have cleared. We will ask you to provide a sperm sample at 16 weeks after the procedure to check if there are sperm still present. When the sample result returns showing that it is free from sperm, we will write and inform you that your vasectomy has been successful and that you can stop using contraception. In some cases it takes a number of ejaculations to clear the tubes so we may need to ask for further samples.

## How much time will I need to take off?

It is a good idea to **take things easy for a day or two**. You might want a couple of days off work. If you have a very physical job we would advise you take a week off. We will be happy to give advice about your particular situation.

## When can I play sport again?

You should avoid going to the gym, cycling and playing very physical sports, such as football and rugby for a couple of weeks.

# What should I do AFTER the vasectomy?

- **Go directly home and rest today** - Stay home after your procedure, relax and avoid getting up unnecessarily.
- **Tomorrow** you may return to light activities/work.
- **Wear snug-fitting briefs** for comfort and protection during the first week. Leave the gauze in place until tomorrow then discard it. If you notice bleeding from the incision site, then firmly pinch the skin between the gauze for 10 minutes. Otherwise, **avoid touching or disturbing the site of surgery.**
- **DO NOT** apply antiseptic or plasters. If you wish to use an ice pack on the day of surgery, place it over your boxers/briefs, against the front of the scrotum for a maximum of 30 minutes at a time.
- **Avoid straining for 7 seven days (1 week).** Bearing down, as in reaching, squatting, or heavy lifting might cause bleeding inside the scrotum.
- **For 7 days, avoid bumping, bouncing or jarring movements** – as in contact sports or vigorous activity, even golf, as this may cause bleeding inside the scrotum.
- **Avoid sexual stimulation for a couple of days.** Gentle sexual activity that does not disturb the incision site is allowed after the first couple of days, **but you MUST use some other form of contraception** until your semen is tested negative for sperm. It is normal to notice some blood or a brown colour in the semen during the first few weeks.
- You should expect only **mild discomfort** for a few days. You may take paracetamol (Panadol) and ibuprofen (Nurofen/Brufen/Buplex). Our suggested regimen is detailed at the end of this information leaflet. **An anti-inflammatory regimen** is often recommended if there is a persistent achy pain. However, if you have severe pain, or need stronger medication, please call Dr Kwong as advised. A painless black and blue colour around the scrotum and the base of the penis might appear on the second or third day – this is harmless and will fade over the next several days.
- On each side of your scrotum, the vas deferens will develop a pea-sized nodule where it was blocked by the vasectomy. This scar is normal and permanent. Initially, it will be tender if you pinch it so it is very advisable to leave it alone. The tenderness will resolve within a few months.
- If you develop a large purple golf ball sized lump in the first 2 days, it may be a haematoma (swelling containing blood). Please advise Dr Kwong should this happen.
- If you have any questions or concerns about how you are healing, if you have excessive pain or swelling, or redness or pus around the incision site and a fever, please contact Dr Kwong for advice.
- Remember that you must complete a **test of success before stopping contraceptives.** A letter/SMS text will be sent to you when this is due with instructions detailing the process of sample testing. **This is normally a single sample at 16 weeks following your vasectomy.**

If you have any further concerns, please contact us at [info@pcss.ie](mailto:info@pcss.ie)

# Guidelines to Prevent Complications

## TODAY AND THE TOMORROW

YOU MAY DO THE FOLLOWING	DO NOT DO THE FOLLOWING
Eat and drink normally	Return to work
Sit, lie or recline	Go out to eat or shop
Enjoy TV, movies, reading, computer work	Exercise, go for a walk
Take painkillers as directed	Entertain guests or throw a party
	Engage in sexual activity

## NEXT 7 DAYS

YOU MAY DO THE FOLLOWING	DO NOT DO THE FOLLOWING
Do office work	Heavily exert yourself
Go walking	Go jogging or golfing
Drive your car	Ride a bike
Lift and carry less than 40lbs	Do weight lifting
Go shopping	Rough play with kids
Take showers	Go swimming/bathing
Do light physical work	Jump or strain
Have sex gently	Disturb your incision

**AFTER 7 DAYS THERE ARE NO RESTRICTIONS ON ACTIVITIES.**



# Consent Form

Place Addressograph Here

I, (Name, Surname) \_\_\_\_\_ Authorise Dr. \_\_\_\_\_

to perform a vasectomy, which consists of the surgical removal of a segment of the vas deferens (the tube that delivers sperm from the testicles to the outside). Other methods of treatment/contraception, including not having this procedure done, have been discussed with me and I have chosen this method.

## I understand the following:

- That the purpose of a vasectomy is to render me permanently sterile.
- That there is no guarantee that sterility will be obtained (sterility is either not obtained or fertility returns in approximately 1 in 2000 cases).
- That possible complications include, but are not limited to: Pain (1% risk); bruising; swelling; possible psychological effect on my sex life; bleeding/collection of clotted blood (haematoma – 4% risk); infection (1% risk); allergy to local anaesthetic; failure to achieve permanent sterilisation or vas deferens may grow/join back together in the first few months or later (1 in 2000 cases).
- That I must continue to use contraceptives until sterility is confirmed by one sperm count at 16 weeks after the procedure

I have had an opportunity to ask questions and have had them answered. In addition, I have read this form and it has been explained to me in lay terminology. I understand the risks and intend to have the procedure done.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Witness, if applicable: \_\_\_\_\_

**DOCTORS STATEMENT:** The patient and I have discussed this procedure, the risks, complications, and alternatives. To the best of my knowledge, the patient understands the procedure and consents to it.

(Dr's Signature): \_\_\_\_\_ Date: \_\_\_\_\_

# Notes and Questions

Please write any questions or notes here;

# Post Vasectomy Pain Killer Advice

We understand and appreciate that people deal with pain in different ways.

Following is our recommendations for a pain killer regime that you should be taking following your vasectomy. Please do not use Nurofen (ibuprofen) if you are asthmatic or have reflux disease or have been diagnosed with a stomach ulcer in the past.

## ON THE DAY OF YOUR VASECTOMY

### Lunch

- 2 Panadol (paracetamol)
- 2 Nurofen (ibuprofen)

### Supper

- 2 Panadol (paracetamol)
- 2 Nurofen (ibuprofen)

## DAY 1 AFTER YOUR VASECTOMY

### Breakfast

- 2 Panadol (paracetamol)
- 2 Nurofen (ibuprofen)

### Lunch

- 2 Panadol (paracetamol)
- 2 Nurofen (ibuprofen)

### Supper

- 2 Panadol (paracetamol)
- 2 Nurofen (ibuprofen)

## DAY 2 AFTER THE PROCEDURE

- 2 Panadol (paracetamol) - Max 4 times per day
- 2 Nurofen (ibuprofen) - Max 3 times per day
- To be taken as required.
- A prescription for Difene (Diclac, Voltarol) will be provided if you feel you need stronger pain killers and can be gotten from any chemist.
- If you have any concerns at all, please call for advice.

**Do not use Difene or Nurofen if you have a history of asthma or stomach ulcers.**

Located at:

Lakeside Family Practice,  
Newpark Primary Care Centre,  
Old Golf Links Road,  
Newpark Upper,  
Kilkenny  
R95 HAC4

To book an appointment contact us at:

Tel: 056 7764666  
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