

# Male sterilisation (vasectomy)

## What is male sterilisation (vasectomy)?

The procedure for male sterilisation is called a vasectomy. A vasectomy is a procedure that involves cutting or blocking two tubes, called the vas deferens, so that sperm can no longer get into the semen.

## How does a vasectomy work?

Sperm are produced in the testes. They pass into the epididymis and travel through the vas deferens until they mix with the seminal fluid.

The seminal fluid is produced by the seminal vesicles & prostate gland. This mixture is semen, which is released through the penis during ejaculation.

The vasectomy blocks the vas deferens on both sides so the sperm cannot travel and mix with the seminal fluid.

After the vasectomy, the man's sexual arousal, response and orgasm will be the same and he will still ejaculate but the ejaculation will be semen that does not contain sperm.

## How do I get a Vasectomy?

1. See a doctor. If you are considering a vasectomy, see a doctor at Family Planning or your GP for an appointment. The doctor will explain the procedure, organise a referral to see a doctor who performs the procedure, and arrange any necessary tests.
2. Assessment. The doctor who will perform the procedure will carry out an assessment to see if you are suitable for the procedure. If you are deemed suitable and are a private patient, a date for the surgery will be arranged. If you are a public patient, you will be placed on the surgical waiting list.
3. Vasectomy surgery. During the procedure, the two vas deferens are cut and tied or sealed thereby preventing sperm from coming out of the penis during sexual intercourse. A vasectomy is normally done under local anaesthesia and you are awake during the procedure.
4. Recovery. Some post-operative discomfort is common.

## How effective is a vasectomy?

Vasectomy is 99.5% effective and among the most effective methods of contraception. It is considered to be a permanent form of contraception.

It is not immediately effective as viable sperm may remain in the vas deferens for three months.

A semen analysis to detect any remaining live sperm should be done 8 to 12 weeks after the procedure.

Other forms of contraception should be used until the semen analysis is clear.

## Advantages of a vasectomy

- A quick and simple procedure and the complication rate is low.
- Permanent (lasts forever).
- Highly effective and low cost compared to other forms of contraception.
- Does not affect your ability to enjoy sex or be able to have an orgasm.
- Allows your partner to stop taking other forms of contraception.

## Possible side effects

Problems that can occur after a vasectomy include:

- lumps or infection at the wound site
- some discomfort and bruising after the procedure is expected and may last a few days (pain relief, cold compresses and a scrotal support should be organised before the procedure)
- mild inflammatory reaction to sperm that may have got loose during the surgery (called sperm granuloma).


## Is a vasectomy right for me?

A vasectomy may not be a good choice for you if you are:

- unsure if you want to have children in the future
- under the age of 30.

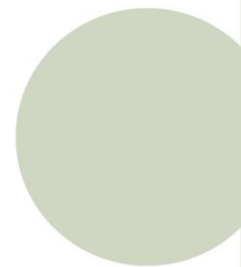
## What else do I need to know?

- It is important to discuss the procedure with a doctor to ensure you have all the information to make the right decision.
- It is important to consider vasectomy as permanent. There is no guarantee that a reversal procedure will be successful.

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- Reversal can be expensive and has a 50% to 60% success rate.
  - If you have an infection on or around your genitals or if you have a bleeding disorder, you may need to wait to have a vasectomy. Your doctor will talk to you about this.
  - It is very uncommon for a vasectomy to stop working.
  - Do not have unprotected sex until you have a sperm test to see if the vasectomy has worked.
  - If your partner does get pregnant after your vasectomy, it is safe to continue with the pregnancy.

For more information, support & advice visit [www.fpt.asn.au](http://www.fpt.asn.au).

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