What You Need to Know about a Vasectomy

Information for patients and families

Read this booklet to learn:

• what a vasectomy is
• how it works
• what you can expect
• what to do after the procedure
What is a vasectomy?
A vasectomy is a surgery that makes you sterile. This means you can’t make a woman pregnant.

A vasectomy is:
• an effective and permanent kind of birth control
• done in your family doctor’s office
• paid for by the Ontario Health Insurance Plan (OHIP)

If you are thinking about having a vasectomy, make an appointment with your doctor. They will examine you and talk to you about the procedure. Together, you can decide if a vasectomy is right for you.

How does it work?
Sperm are made in your testicles. A thin tube carries sperm from each testicle to where it becomes part of your semen.

During a vasectomy, the doctor cuts and removes a small part of each tube. The ends of the tubes that stay in your scrotum are closed and tied off.

Cutting the tubes prevents sperm from leaving your testicles, so there will be no sperm in your semen. This means you are sterile and cannot make a baby.

Your testicles will continue to make sperm. The sperm stay in your testicles and your body naturally absorbs them.
Will a vasectomy affect my sex life?

A vasectomy only blocks sperm from leaving your testicles.

It does not affect:

- your sex drive
- your ability to get an erection, have an orgasm and ejaculate
- the amount and appearance of your semen
- your enjoyment of sex
What are the risks?
There is a chance of bleeding or infection with any surgery. The risks for a vasectomy are very low. Out of 100 men, only 1 to 2 will have bleeding or an infection after a vasectomy.

About 1 out of 100 men may have continuous pain in their genitals after a vasectomy. This is called chronic post vasectomy pain syndrome. Reversing the vasectomy or spermatic cord blocks (injections of pain medicine) may help.

After a vasectomy, you may feel a small lump inside your scrotum on one or both sides. This is a normal part of healing. It usually goes away in a few weeks. Your doctor may tell you to take ibuprofen (Advil or Motrin) to help with this.

How well does a vasectomy prevent pregnancy?
A vasectomy works much better than using condoms or birth control pills to prevent pregnancy. Over 99 out of 100 vasectomy surgeries work. But, no kind of birth control is guaranteed. It happens very rarely, but it’s possible for the ends of the tube to rejoin.

Is a vasectomy reversible?
You should think of a vasectomy as permanent birth control. Don’t rely on it to be reversed later. Before you have a vasectomy, be sure you don’t want to have any children in the future.
What can I expect?
If you decide to go ahead, your doctor does the vasectomy at the Family Health Centre. You are awake and lying down during the procedure.

Your doctor:

- covers your hips with very clean (germ-free) sheets
- washes your scrotum and shaves a small area, if necessary
- uses a thin needle to give you a local anesthetic (pain medicine) to numb the area
- makes a small cut (about 1 centimetre) in the middle of your scrotum
- cuts and removes a small piece of each tube and ties the ends
- closes the cut with stitches that will be absorbed (don’t need to be taken out)

How long does it take?
The procedure takes about 45 minutes. Plan to be at the Family Health Centre for about 2 hours. You will need to have a family member or friend take you home.
How do I care for myself at home?

- You will have some mild pain, bruising and swelling. This should get better in a few days. Wrapping an ice pack in a towel and placing it over your underwear can help with pain and swelling.
- You can take a pain medicine such as acetaminophen (Tylenol) if you need it.
- You may feel more comfortable wearing an athletic support or snug underwear to support your scrotum.
- Keep the area dry for 24 hours, but you can shower. Wait at least 1 week before bathing or swimming.

When should I call my doctor?

<table>
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<th>Call your doctor if:</th>
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<td>- you have a fever (a body temperature higher than 38 °C or 100.4 °F)</td>
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<td>- your pain does not get better or gets worse</td>
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<tr>
<td>- your swelling is not slowly improving</td>
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<tr>
<td>- your cut is bleeding or there is fluid coming out of it</td>
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What activities can I do?

• Go home and rest for a day or 2.
• You may be able to return to work the next day, if you don’t need to do physical work (like heavy lifting, moving, pushing).
• You can have sex as soon as you are comfortable, usually in about a week.

Does a vasectomy start to work right away?
No. You won’t be sterile right after a vasectomy. Some sperm remain in your tubes and can live for many weeks. The only way to know when you are sterile is to have your semen checked for sperm. You have this test 3 months after surgery.

To prevent pregnancy, continue to use birth control after your vasectomy until your doctor tells you your semen doesn’t have any more sperm.

How do I get my semen tested?
Three months after your vasectomy, take a sample of your semen to a laboratory. We will give you a clean container with an orange lid to put your sample in.

To collect a sample of semen:
• Don’t have sex or masturbate for 2 to 4 days before collecting the sample.
• Collect the sample in the morning and bring it to the lab the same day.
• Collect your semen by masturbating. Ejaculate directly into the clean container.

Use another kind of birth control until you know the results of your semen test.
Where do I take the semen sample?
Take the semen sample in the bottle and the form your doctor gave you to the laboratory.

Please consult the following websites for a convenient location near you:

Dynacare Medical Laboratories | Website: www.dynacare.ca

Life Labs | Website: www.lifelabs.com

How will I get the results?
Your doctor will mail you the results of the semen test. If your sample contains sperm, you will need to do the test again in 3 months.

Continue to use another kind of birth control until your semen doesn’t have any more sperm.

Notes

Visit www.uhnpatienteducation.ca for more health information.

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