

Vasectomy refers to a sterilization procedure for males. The procedure involves cutting and tying both vas deferentia, (the tubes that carries sperm from the testicles.)

At Pioneer Health, we are pleased to able to offer patients a no-scalpel vasectomy service.

What patients need to know about vasectomy:

- Vasectomy should be assumed to be irreversible. It is as such only suitable for men who are absolutely certain that they, and their partner, wish for no future children. Whilst there are microsurgical procedures available that aim to reverse vasectomies, these are not always successful. Vasectomy reversal is often unsuccessful if the vasectomy has been performed some years ago. Vasectomy is generally not recommended to males under 30 years of age.
- The vasectomy procedure has a failure rate of approximately 1:2000. There are a number of reasons why the procedure may not be successful, including abnormal anatomy and the vas deferens re-joining.
- Vasectomy has a number of potential complications, which include failure to achieve sterility, bleeding, infection and pain. A small percentage of vasectomy patients report chronic scrotal pain following the procedure, (i.e. pain or discomfort lasting months or even years after the procedure.)
- Patients are not sterile immediately post vasectomy. This is because there are stored sperm in the seminal vesicles. Patients are advised to continue usual contraceptive precautions for 3 months post vasectomy. At that time a semen sample is collected and analysed and if no sperm are detected, the patient is deemed to be sterile and can stop contraceptive precautions.
- Following vasectomy, sexual function and ejaculation should be unchanged. The sperm make up less than 1% of the seminal volume. Hence the volume and appearance of the ejaculate will not be noticeably change with vasectomy.
- The procedure usually takes 10 to 20 minutes and can be performed under local or general anaesthetic. We use the no-scalpel vasectomy both in rooms and in hospital.
  - **The local anaesthetic (LA) procedure** involves having some premedication tablets followed by injecting local anaesthetic into scrotal skin and performing the procedure whilst the patient is awake. The advantages of having the procedure under local anaesthetic is that the patient can avoid an admission to the day procedure unit of the local hospital and avoid the potential risks of a general anaesthetic and there only a short wait time to have the procedure done. A drawback of doing the procedure under local anaesthetic is that the patient will experience some discomfort during the procedure.
  - **The general anaesthetic (GA) procedure** involves the patient presenting to the Albany Health Campus day procedure unit and then receiving a general anaesthetic prior to the procedure. The advantages of a GA procedure include that the patient has no discomfort during the procedure. The disadvantages of a general anaesthetic procedure include the risks of an anaesthetic and the

additional time required to check into the day procedure unit and recover from the anaesthetic. It generally requires a whole morning or afternoon to be admitted, have the procedure and recover from the anaesthetic. You are also unable to drive following the general anaesthetic, when discharged from the day procedure unit. There is a wait time of 9-12 months for this procedure to be done in the hospital.

The risk of a serious adverse event related to a general anaesthetic is approximately 1:10;000. The anaesthetist will usually ask to see you prior to the GA procedure to ensure that the patient is fit for the anaesthetic.

By signing this document, I have read and understood the above pre-operative information sheet.

Patient Name: \_\_\_\_\_

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

Doctor Name: \_\_\_\_\_

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