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Vasectomy

What do we do?

Conventional vasectomy is performed under a general anaesthetic and involves making two small cuts in the scrotum that are stitched up at the end of the procedure.

The vas deferens are the two tubes that carry sperm from the testicle to the glands at the base of the bladder called the seminal vesicles and the prostate gland. It is at this point that the sperm mixes with the seminal fluid to form fertile ejaculate. A vasectomy is typically performed via small incisions in the front of the scrotum. . **General or local anaesthetic?**

After your Vasectomy

Usually you will go home the same day of your operation. Your testicles will probably ache for the first few days.

You should be able to go back to work within a couple of days, unless you are involved in strenuous physical activity.

Avoid any sexual activity for a week or so. You should use an alternative form of contraception until your surgeon has confirmed there are no sperm in your semen. After the vasectomy, there will be some sperm left in the upper part of your vas deferens tubes. It can take more than 20 ejaculations for your tubes to be sperm free.

After three months, your surgeon will ask you for two samples of your semen a few weeks apart and these will be tested to ensure there is no sperm.

You can expect no vasectomy side effects to your sex drive or enjoyment of sex. You will still have erections and ejaculate normally, just your semen will not contain sperm.

It is important to note that the production of the male hormone testosterone or a man's ability to perform sexually is not affected by this procedure.

Safety and risks

Most men will feel side effects such as soreness, tenderness and bruising on or around their scrotum, bleeding inside their scrotum and blood in their semen, for a few days after the procedure.

More serious complications can include:

- Haematoma blood collects and clots in your scrotum.
- Sperm granulomas sperm can sometimes leak from your cut tubes and in rare cases collect and form hard lumps called sperm granulomas.

- Infection
- Fertile again if the vas deferens reconnects
- Long-term testicle pain due to a pinched nerve or scarring
- Testicles feeling full as the epididymis becomes filled with stored sperm.

A vasectomy can be reversed, however it is an expensive procedure that must be performed by a microsurgeon and there is no guarantee of success. A reversal is more likely to be successful if done within 10 years. Many doctors believe that an "Open-ended" method is easier to reverse because traditional methods remove a small section of the vas deferens. A vasectomy should be considered a permanent method of contraception.