

Thank you for choosing St Thomas vasectomy service for your upcoming procedure.

My name is Dr Claire Tomlinson. Both myself and Dr Richard Wise perform vasectomies at the practice.

This is a short recording which covers how the procedure is performed, risks associated with vasectomy, advice on how to prepare for the procedure and the likely recovery afterwards.

A written transcript is also available here if you would rather read the information.

The procedure

All procedures are performed in the minor operations room at St Thomas medical centre. We have a small car park on site. You can check in with reception and then take a seat in the waiting area. When you come in for the procedure you will be asked to lie on your back on the bed facing the ceiling. We have a hot water bottle to place over your scrotum to help relax all the important bits of anatomy!

We start by examining the testes and scrotum to make sure everything is normal and we can locate the tubes (vas deferens) which carry your sperm from your testes up into your body.

The scrotal skin is then cleaned with iodine and then you will be covered from chest to toe in a drape to help keep things clean.

The first bit of the procedure is the local anaesthetic injection. This is the worst bit, it is a sharp scratch, burning sensation and pressure and then the area will go numb quickly. You will still be aware of a bit of tugging and occasional ache but nothing should be sharp or painful.

Through the front of the scrotum we make a small hole using heat. Through this hole we can hook the tubes that carry your sperm from your testicles up into your body. Doing one side at a time we bring the tube through the hole, seal that tube with heat and then divide it so there is no longer a passage for the sperm to pass through. Once the tube has been sealed it is tucked back in the scrotum and we go on to perform the same procedure on the other side. There is a second injection of local anesthetic for the second side but usually it is much better tolerated as the initial injection takes the edge off.

What you are left with at the end of the procedure is a small wound < 1cm long which will heal up by itself over the course of the 1-2 weeks. We cover it with a dressing initially but then it can be left uncovered after the first 12-24 hours.

When you leave the room on that day you will not be immediately sterile. It takes about 4 months and 20 ejaculations to clear all the stores of sperm in your body. It is a combination of both time and ejaculations neither is sufficient on their own. We will give

you a sample pot on the day and some further instructions on how and when to test to check you have gone sterile.

Risks wise

Overall this is a very safe and well tolerated procedure. That said there are some things you should be aware of as with all surgical procedures.

It is important to highlight that vasectomy is a permanent contraceptive and so it's important to be absolutely sure it is the right thing for you

It is normal to expect some discomfort, ache and a small amount of swelling after the procedure. Most men need to rest for 2 days and then have a week of light activities.

In terms of statistics; there is small < 1% risk of infection, usually easily treated with antibiotics.

There is a small <1% risk of a haematoma, which is a large bruise which takes time and rest to resolve.

There is also a small < 1% risk of the tubes rejoining in the first 3 months as your body is healing. The tubes remain in close proximity to each other and a bridge between the ends can form. In this situation your sample will continue to have sperm present and we will need to perform the procedure again.

However, once you have returned a negative sperm count, the risk of the tubes re-joining is 1 in 2000

The other potential complication you may have read about is Post Vasectomy Pain syndrome. You will be glad to know it is not common, The British association of urological surgeons quote a frequency of 1-6%. Symptoms vary from occasional pins and needles or numbness to more chronic daily ache in one or both testicles. It is not known why this happens but we know that many nerve related pains like this are closely related to how you feel about the procedure. The most important thing is to make sure it is the right time for you and your family, you are sure you want a permanent method and you are not being coerced into the procedure.

Onto How to prepare

Please shave the skin on the scrotum the night before the procedure, this keeps everything a bit tidier and reduces the chance of an infection.

Please eat and drink in the morning.

And please make arrangements for transport home. We advised you don't drive home from the procedure.

Aftercare and recovery

Please plan for 2-3 days of rest and then a week of light activities.

You will have a small wound on the scrotum < 1cm long. This will heal over the following one to two weeks. You are fine to shower but please avoid baths/swimming until the wound has knitted together with a firm scab.

You can have sex after a week, there maybe some slight discomfort and blood in the ejaculate the first time, this will settle down. But please do remember to continue using contraception.

I hope you have found this recording useful. You should have a telephone call scheduled to go through any final questions prior to the procedure.

I look forward to seeing you in due course.