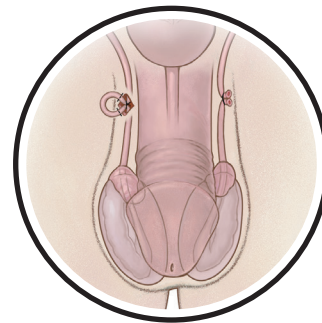# Vasectomy

Male sterilization by vasectomy is a permanent surgical procedure to close or block the vas deferens (the tubes that carry sperm to the penis). Since it is permanent, this option is especially for those who have decided that their family is complete or that they don't want to have children. Compared to tubal ligation, vasectomy is safer, more effective, less expensive, and less invasive.

How does it work?

- In a vasectomy procedure, the vas deferens is partially removed or blocked, so that no sperm is released to fertilize the egg.

- Using local anaesthesia, a health professional will reach the vas deferens either by making a small incision on the skin of the scrotum (conventional vasectomy) or by making a small puncture on the skin of the scrotum (no-scalpel vasectomy).

- Another form of contraception is required until a semen analysis shows no sperm.

How effective is it?

- Although vasectomy is highly effective, failures do occur and can occur many years after the procedure. For every 100 women who rely on vasectomy for contraception, 2 women will become pregnant.

Advantages

- Safe and highly effective

- Long-lasting – permanent

- Simple procedure, no follow up required (aside from sperm analysis)

- Does not interfere with sex

- No hormones

- Discreet and cost-effective

- Does not affect sexual function

- Less invasive and fewer complications than female sterilization

- No significant long-term side effects

- Allows the male partner to assume some responsibility for contraception

Disadvantages

- Permanent and irreversible

- Risk of having regrets later on

- Not effective immediately –must use another contraception method for 3 months and do a follow-up sperm analysis that shows no sperm are present in the semen

- Possible short-term surgery-related complications: pain, bleeding, vasovagal reaction, infection at the incision site, bruising and swelling of the scrotum

- Rarely, the vas deferens could reconnect by themselves

- Does not protect against STIs

SOGC