

A GUIDE FOR PATIENTS

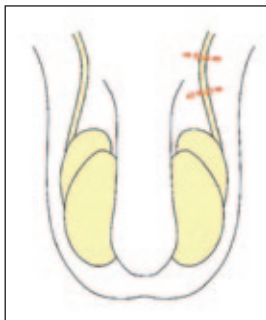
What is a vasectomy reversal?

Vasectomy is the procedure of choice for men who do not want to father any children (or any additional children). A small number of men who have had vasectomy after completing their family decide to have further children. Nowadays, there are a large number of options available and these can be divided generally into two categories:

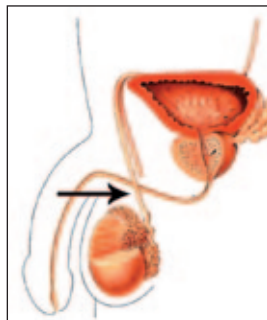
- 1 Surgical techniques to mechanically reverse the effects of vasectomy
- 2 'Test tube' techniques, such as IVF and ICSI, for couples

The surgical technique is vasectomy reversal whereby the vas (the small tubes connected to the testicles which allow sperm to leave) are rejoined. Studies have shown that a number of factors will affect the success of vasectomy reversal. Important success factors of operation are:

- the time interval between vasectomy and the request for vasectomy reversal – the best results are obtained if the original vasectomy was carried out within the previous 10 years
- the use of microsurgical techniques to improve the outcome – use of the operating microscope allows accurate rejoining of the vas tubes, thereby increasing long term success of this procedure.



Above: site of vasectomy operation



Above: arrow indicates the position of the vas tube

Before the procedure

Before your procedure you will be asked to sign a consent form. This confirms that you understand the risks, benefits and possible alternatives to the procedure and have given your permission for it to go ahead. See **Complications** for specific points relating to vasectomy.

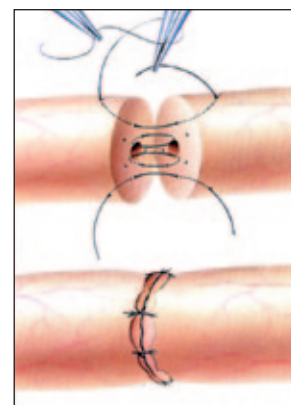
Please bring any medications with you. **Make sure you alert the staff if you take warfarin, aspirin, clopidogrel or any other blood-thinning medications.**

You will be asked to come into hospital on the morning of the operation. You should be 'Nil By Mouth' for a certain time prior to admission. **Please check when you can eat and drink before the operation as your procedure may be cancelled on the day if you have had anything to eat or drink at the wrong time.** It is advisable that the scrotal sac be shaved before you arrive for your operation.

You will have a general anaesthetic and the anaesthetist will see you in your room to go through any questions before surgery.

How is the procedure carried out?

The procedure is carried under general anaesthesia in the operating theatre. Two small vertical incisions are made in the scrotum similar to the vasectomy incisions you have had previously. The vas tube is located within the scrotum it can then be brought out to the operation site using a dissector. The vas tubes are separated from the surrounding tissues within the scrotum and the two ends are then joined using very fine suture material.



Above: Magnified view of suture stitch rejoining tubes.

All images supplied courtesy of Mardeno UK Ltd

During the operation a fine blue nylon thread is left across the join to make sure that the tube remains open during surgery. Once surgery is complete this fine thread is brought to the surface of the scrotum and you will see a loop of blue nylon lying on the scrotum separate from the incision.

It is very important that you take care of this blue nylon after the operation, as it may determine the success or failure of your procedure. This means not pulling or catching the nylon thread on clothes, etc. and washing gently around it.

After the operation

There will be a wound dressing, which is a gauze padding within a scrotal support to apply some pressure to the wound.

The operation is carried out as a day case. This means that you come into hospital on the day of the operation and go home the same day.

Discharge advice

For men who have had a general anaesthetic, you will need to arrange for a friend or relative to drive you home and stay with you for the next 24 hours. Try to keep the wound area dry for 24hrs and then bathe as normal. Soap and tap water are quite all right. Salted water is not needed. It is important to take regular painkillers for 24 hours after the operation. You should restart your normal medications, if any, when you leave hospital.

If the wound site becomes red and inflamed or if there is unusual swelling, please contact the hospital for advice.

You should try and wear the scrotal support for about a week to prevent swelling around the operation site. If bleeding continues, contact us for advice using the numbers below. Avoid sexual activity for a week and heavy lifting for about two weeks. Driving should be safe after one week if all is well. Check with your car insurance company if you have any doubts.

Complications

You will be asked to sign a consent form prior to surgery. The main complications that may occur are as follows:

Early

- Haematoma (collection of blood at the operation site) – 3.5% of men may have a small collection that will settle with time without treatment, 0.7% may develop a large collection that may require re-exploration of the wound and removal of blood clot.
- Early post operation pain and swelling 10%.

Late

- Failure of procedure resulting in no pregnancy achieved:

Time since vasectomy	Sperm present	Pregnancy rate
less than 3 years	97%	76%
3-8 years	88%	53%
9-14 years	79%	44%
More than 15 years	71%	30%

Belker AM J Urol 1991; 145:505-511

Semen analysis check

You will be given a sample pot to take home when you are discharged from hospital. You will need to provide a semen specimen at 10-12 weeks after operation.

- Refrain from sexual activity for between two and five days before collection of the specimen.
- The specimen should be produced by masturbation after the genital area has been carefully cleansed with normal soap and water.
- The whole of the ejaculate must be collected in the specimen pot. Specimens must not be collected in a condom, as these may contain substances, which will kill sperm.
- Make sure the lid of the pot is securely screwed on and that your full name and date of birth with the time of collection is written on the pot and the form.
- Deliver the specimen with as little delay as possible, within 1-4 hours ideally.
- Please keep the sample either at room temperature or ideally at body temperature, for example, in a trouser pocket.