

The No-Scalpel No-Needle Open-Ended Vasectomy Clinic

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Welcome

Attached is an information sheet explaining to you the procedure of No-Scalpel No-Needle Open-Ended Vasectomy. Along with this information we suggest each man discuss the topic of family planning and vasectomy with his wife or partner, and his family physician. Permanent sterility is a major life decision and should be considered carefully. This process may be time consuming but will help you make a decision you can live with happily, both now and in the future. As a part of the procedure we have recently started leaving the distal end open to prevent the complication of epididymitis, which can occur in up to 6% of cases, with excellent results.

Making an Appointment

When you have decided on vasectomy, talk with your doctor about who should do the procedure. If you choose The Alpine Medical Clinic, you may simply call the clinic for an appointment time. We are available Monday to Friday during office hours. Dr. I. Macdonald has personally performed over 1,500 no-scalpel vasectomies and written up the first 670 procedures in the Canadian Journal of Rural Medicine (2002;7 (1) pp 30-33).

Preparation

- 1) **Avoid all aspirin and aspirin containing products for two weeks before vasectomy.**
- 2) **Lather and wash the scrotum and groin area well twice each day for two days before.**
- 3) **The day before, clip or trim away the hair from the front of the scrotum, as well as around and below the base of the penis.**
- 4) **Bring with you two firm fitting pairs of underwear (not boxer style).**
- 5) **Bring your health care card with you to your appointment.**

At the Clinic

Plan on spending one hour at the clinic. It is a good idea to have someone else available to drive you home. The procedure itself takes approximately 15 minutes.

When you arrive and register at the clinic, you will be examined and a brief health history obtained.

Common Questions and Important Facts about Vasectomy

How much pain or discomfort will I experience during the procedure?

This varies with the individual, but most men say the discomfort is quite mild, and that there is no pain after the anaesthetic is given.

What can I expect afterwards?

There may be some dull aching in the testicles after the local anaesthetic has worn off, in about an hour. This ache is usually mild and may be felt from time to time over the first few days, especially with activities such as jumping or turning quickly.

There may be a small amount of oozing from the puncture wound for a few days, and there is commonly a temporary bruised colour on the scrotum after 2-3 days.

Will my sex life be affected?

Sex drive, erection, orgasm and ejaculation are not interfered with by the operation. Vasectomy only blocks the sperm from coming out. The male sex hormones in the blood do not change. If a man or his partner had negative feelings about vasectomy, like other feelings it could affect sexual performance. However, many men and women have said that the relief from worry about pregnancy has improved their sex lives after vasectomy.

When I have an orgasm, will I still ejaculate?

Yes. The amount of semen a man ejaculates after vasectomy is only decreased by about 5%. Without a microscope you could not notice the absence of sperm in the fluid.

What happens to the sperm after vasectomy?

The testes continue to produce sperm cells, which go through the same life cycle as before. The unused sperm cells are reabsorbed naturally, as are other unused or old cells in the body. Sperm antibodies may form to help in the removal process, but these are not harmful to the body.

Why is vasectomy not effective immediately?

During vasectomy the vas deferens from each side is cut high in the scrotum. The sperm stored "downstream" in the seminal vesicles can still be ejaculated and cause pregnancy until the system is emptied, which is usually complete after about 20-30 ejaculations.

What complications can occur?

Bleeding - From the skin puncture wound. Treatment: Controlled with direct pressure.

- Infection – Infection of the scrotum from cellulitis (pain, redness)
Treatment: Antibiotic or other treatment.
- Sperm
Granuloma - A tender knot in the scrotum, where sperm has leaked out of the vas deferens. Avoiding ejaculation during the first week after vasectomy usually averts this problem, but it can occur at later times as well.
Treatment: Usually no treatment is required, it resolves spontaneously over time.
- Scrotal
Hematoma - Can be a large collection of blood inside the scrotum, where a blood vessel has continued to leak. A swelling in the scrotum would occur within 48 hours after vasectomy. Treatment: Requires immediate treatment and possibly surgery to stop the bleeding.
- Allergic
Reactions - Unusual reactions to anaesthetics or medications can occur even without a history of drug allergy. These reactions are very rarely serious or life threatening. Treatment: Medications.
- Sensitive Scar
or Neuroma - May form along the vas at the site of vasectomy. Treatment: Rarely bothersome enough to require injection with medicine or surgical removal.

Can I have the vasectomy reversed?

With microscopic surgery by a skilled and experienced surgeon, the vas can, in most cases, be reconnected, usually requiring general anesthesia. But even after making this attempt, as many as 50% will not succeed in having children. Vasectomy should be considered a permanent operation.

Are there any long-term effects of vasectomy?

Vasectomy has been in use since the early 1900's and over 10 million American men have had vasectomy for sterilization. Yet, aside from complications as mentioned above, no long-term adverse side effects have been associated with vasectomy. Medical scientists continue to study this area, but it is unlikely that any serious consequences will be discovered.

Does the vasectomy ever fail later?

Once you have had a negative semen check there is an exceedingly small chance that you will experience a later failure, with spontaneous reappearance of sperm in the

semen. You are welcome to bring in a fresh semen specimen for repeat testing at any time that you wish reassurance of sterility.

Are there men who should not have vasectomy?

Yes. If a man does not want vasectomy and is having it because he is told he should, he may feel resentment. If he is having problems with impotence or sexual fears or an unhappy marriage, it is not likely that vasectomy will help any of these problems. If a man is unsure whether or not he is going to want more children, he should not have a vasectomy. If a man's sexual fulfillment or his partner's satisfaction depend upon his being able to cause pregnancy, then sterilization would probably create a sexual problem for him.

How will I feel about the operation afterwards?

Almost all men who have vasectomy are completely satisfied with the operation afterwards. They enjoy the freedom from other contraceptive methods, which interfere with lovemaking, freedom from worry about an accidental pregnancy, and freedom from concern about the effects of the pill or IUD on their partner's health. A small number of men later regret having the operation. This is why it is so important to make the decision carefully, without any outside pressure. Your satisfaction depends largely upon your own preparation and thoughtful decision-making.

After vasectomy instructions:

- 1) Keep the area clean and dry for 48 hours. Then you may take a shower and pat it dry. Do not rub.
- 2) Rest today. It is a good idea to put your feet up and place an ice pack on the scrotum when you get home. You may return to work tomorrow, provided you avoid #4.
- 3) Wear two pairs of underwear for protection and comfort during the first week. A clean gauze held by the supporter acts as a bandage. Bleeding from the puncture wound in small amounts can be handled by pinching the skin between clean gauze for ten minutes.
- 4) For seven days avoid **HEAVY LIFTING, CONTACT SPORTS, OR OTHER VIGOROUS ACTIVITY** which might cause swelling or bleeding.
- 5) You may have sex as soon as it is comfortable, usually 5-7 days after operation. **YOU MUST USE SOME OTHER METHOD OF BIRTH CONTROL**, until your semen is tested negative for sperm.

- 6) You could expect some mild discomfort for a few days. You may take Tylenol or Ibuprofen if needed. If you are having severe pain, swelling of the scrotum, redness or pus around the opening, or a fever, please call your doctor right away.
- 7) Bruising (black and blue colour) around the scrotum and the base of the penis is common on the second or third day and might become quite extensive, but it is painless and harmless, and it will fade over several days.
- 8) A hematoma (blood clot), however, causes an enlarging mass in the scrotum, larger than a quarter, which is usually painful. It is important to treat this complication early, so call the doctor day or night.
- 9) **REMEMBER YOU MUST NOT RELY ON THE VASECTOMY FOR BIRTH CONTROL UNTIL YOU HAVE RESULTS OF A SEMEN CHECK SHOWING NO SPERM.** After approximately 25 ejaculations, bring in your semen sample (less than 2 hours old) to the Laboratory to be tested. Please arrange this through your family physician's office or we will give you a laboratory request form.
- 10) We suggest you follow up with your own family physician or The Rocky Mountain No Scapel Vasectomy Clinic, seven to ten days post operatively if you have any concerns. Dr MacDonald is available 24 hours a day at the above telephone numbers.

THE NO-SCALPEL VASECTOMY

A Fact Sheet for Clients

The no-scalpel vasectomy is a refined technique developed by a Chinese surgeon. Instead of using a scalpel to make one or two small cuts in the scrotum, as in the conventional vasectomy, the physician uses a special sharp instrument to make a tiny puncture in the scrotum. The doctor then lifts out the tubes (vas) and blocks them through this one small opening.

Why is the method called No-Scalpel No-Needle Open-Ended?

The method is called no-scalpel because it does not use a knife (scalpel) to cut the scrotum, no needle as a pressure injector is used, and open ended as the Vas or distal end is left open to avoid epididymitis.

How is no-scalpel vasectomy done?

First the doctor locates the vas under the skin with his fingers. He injects a drug that numbs the area. Then the surgeon secures the vas in this spot with a special clamp that does not injure the skin. The tip of a sharp forceps is used to pierce the scrotal skin. Both tips of the forceps are then inserted and spread to stretch a small opening, exposing the vas. The vas is lifted out and blocked in the physician's customary manner. Then the second vas is lifted out through the same opening and blocked. No stitches are used to close the tiny wound.

How does the no-scalpel method differ from the conventional vasectomy technique?

No-scalpel vasectomy is different from the conventional vasectomy technique in the way the surgeon gets to the tubes. Instead of making two incisions in the scrotum, the physician makes one tiny puncture. The vas is blocked in the same way as it is in conventional vasectomy – by tying, cutting, or cauterizing.

Is no-scalpel vasectomy safe?

Vasectomy in general is a safe, simple procedure with few complications, and no-scalpel is even safer.

How effective is no-scalpel vasectomy?

It is as effective as any other vasectomy procedure.

Can no-scalpel vasectomy fail?

Yes, just as there is a small chance of failure (less than 1%) with every vasectomy technique. No-scalpel vasectomy is no more or less likely to fail than any other vasectomy procedure.

Is no-scalpel vasectomy easier to reverse than the incisional techniques?

No. No-scalpel vasectomy is no more reversible than any other vasectomy procedure. Reversal operations are not always successful, and they are expensive. All vasectomies should be considered permanent. If you are thinking about reversal, perhaps vasectomy is not right for you, either the no-scalpel method, or any other kind.

What are the benefits of no-scalpel vasectomy over the traditional techniques?

Doctors and clients report that:

- There is less injury to the tissues, less bleeding, and fewer complications like haematoma (a collection of blood under the skin), because no-scalpel vasectomy does not use a knife to cut the scrotum.
- There is less risk of infection because the opening is so tiny.
- There may be less discomfort during the surgical procedure because the local anaesthetic is administered to numb the vas area instead of just the incision site.
- There is less discomfort after the operation because the procedure is less injurious.
- The procedure can be faster.
- Recovery time is usually shorter.
- Men appear to be less fearful of a technique that does not cut into the scrotum.
- here are no skin stitches to be removed. The healed site is usually invisible.