What is it?
A vasectomy is a procedure to cut and block the tubes, called the vas deferens, through which sperm pass on the way to mix with a man’s semen. The procedure is meant to make a man permanently sterile, or unable to father a child.

What are the benefits?
A vasectomy is a simple, safe, quick and highly effective procedure, done with local anesthesia in an outpatient surgery center or doctor’s office. It’s a one-time procedure that eventually (although not immediately) eliminates the need for contraception. Often, men who have a vasectomy find that sex is more spontaneous and enjoyable without having to be concerned about birth control. A newer type of procedure called the percutaneous no-scalpel vasectomy results in less pain, fewer complications and a quicker recovery than a traditional vasectomy.

What’s the procedure like?
The surgeon feels for the two sperm-carrying vas deferens tubes underneath the skin of the scrotum and injects a local, fast-acting anesthetic using a tiny needle. An instrument makes a small puncture in the skin and stretches the opening so the surgeon can grasp the vas deferens, cut it, heat-seal each end with an electric tool, and clamp them with two small titanium clips. The clips stay in place, but usually can’t be felt and won’t set off airport metal detectors. Some men feel a slight tugging sensation during the procedure, but there is usually little discomfort or bleeding. The procedure generally takes 15 minutes.

What’s recovery like?
You’ll feel some mild pain, bruising and swelling for several days after surgery. Acetaminophen (Tylenol® or Daytril®) every four hours will help, as will an ice pack or a bag of frozen vegetables. Most men recover completely in less than a week. You can resume everyday activities the day after the procedure, and can have sex within a few days. But you must continue to use birth control until cleared by your doctor.

So a vasectomy isn’t immediately effective at preventing pregnancy?
No. Sperm can remain in the upper portion of the vas deferens, above where the tubes are cut, for weeks or even months after the procedure. You won’t be considered sterile until a semen test, usually done by your doctor eight to 12 weeks after the vasectomy, shows that no sperm
remain. Until then, you must use a condom or other birth control measures to avoid impregnating your partner.

**What about later? Is a vasectomy 100 percent effective?**

Other than abstinence, no birth control method is 100 percent effective in preventing pregnancy. In rare cases, sperm manage to cross the gap between the two blocked ends of the vas deferens, making impregnation possible. This condition is called recanalization, and if it happens, it’s usually within the first few months after a vasectomy. In that event, a repeat vasectomy is needed, but that only happens about once in every 1,000 cases — a failure rate far less than any other form of birth control.

**Are there any risks?**

Complications such as inflammation, bleeding and infection are possible, though they’re uncommon and not serious. Sperm leaking from the cut vas deferens may cause a hard, sometimes painful lump called a granuloma to form. It isn’t dangerous and usually the body absorbs it in time. Some men may feel a sense of pressure in the genital area for two to 12 weeks after vasectomy, caused by sperm collecting behind the blocked vas deferens. This condition, called congestion, also usually resolves with time. The body absorbs the sperm cells after they die. A small percentage of men have pain that lasts longer than three months after their vasectomy, which may require treatment — and, rarely, another procedure — to address. While several studies have suggested that there is a small increase in prostate cancer risk among men who receive a vasectomy, most studies and professional organizations do not support that vasectomy increases prostate cancer risk. Research has not found any other long-term health risks linked to vasectomies. Men who’ve had the procedure are no more likely than other men to develop heart disease or other health problems.

**Are there any side effects?**

No. A vasectomy doesn’t affect the production or release of testosterone, the male hormone responsible for your sex drive, facial hair, deep voice and other masculine traits. The procedure won’t affect your sexuality. Erections, orgasms and the amount of ejaculate will remain the same; the only difference is that your semen will no longer contain sperm.

**Can vasectomies be reversed?**

You should think of vasectomy as a permanent end to your ability to father a child. Reversing a vasectomy, though possible, is difficult, expensive and not always successful. You should weigh the benefits and risks of vasectomy against other forms of birth control, and discuss them with your urologist. If you’re married or in a serious relationship, you should also discuss the issue of whether to have a vasectomy with your partner. Because people feel differently as they get older, if you’re younger than 25 and don’t have children, you might want to delay having a vasectomy in case you want to be a father later. In addition, some patients store sperm in a sperm bank before the procedure in case they change their mind in the future and want to have additional children.

To learn more, visit clevelandclinic.org/Glickman. To schedule an appointment, call the Glickman Urological & Kidney Institute appointment line at 216.444.5600 or 800.223.2273, extension 45600.