



X-Plain™ Vasectomy Reference Summary

Many men choose a vasectomy as a permanent form of contraception. Vasectomy is a safe method of contraception. This reference summary will help explain the vasectomy procedure.

Anatomy



Sperm is made in the two testicles located in the scrotum.

From there, the sperm travels to the prostate through two specialized tubes called vasa deferentia. The sperm is then mixed with special secretions from the prostate and the two seminal vesicles, located near the outlet of the bladder.

Semen is formed when sperm from the testicles combines with special secretions from the prostate and the two seminal vesicles. Semen is stored in the seminal vesicles, located near the outlet of the bladder.

The sperm helps to reproduce and conceive a child when it fertilizes a woman's egg.

During ejaculation, the semen is forced to the outside through the urethra, inside the penis. Sperm

forms a small component of the ejaculated semen.

Contraception

The purpose of the procedure is to prevent the sperm from joining the semen before the semen is ejaculated.

This is done by cutting the vasa deferentia, in which the sperm travels from the testicles to its resting location in the seminal vesicles.

After the procedure, sperm is still made in the testicles. However, it dies there and is reabsorbed by the body.

Sperm that was already stored in the seminal vesicles can still be ejaculated with the semen.

Until all the stored semen is ejaculated, procreation is still possible.

This is why it is important to use other contraception until sperm counts done after the operation have shown the complete absence of sperm.



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Even though recent technological advances have allowed the reversal of this operation, vasectomy should be considered **PERMANENT**. A vasectomy should only be done after **VERY** careful consideration.

The sperm is a small component of semen. Therefore, you will notice no difference in the amount or the texture of your semen after the operation.

This operation is a form of contraception. It does **NOT** prevent sexually transmitted diseases such as AIDS or Herpes.

Procedure

This operation is done on an outpatient basis. You will be able to go home on the same day of the operation.

Your surgeon may ask you to shave your scrotum and the base of the penis prior to coming to the operation.

You may be asked to bring with you brief type underwear or an athletic supporter to use after the operation.

The operation can be done under local anesthesia with sedation if required.

After the skin is cleaned, one or two punctures or small incisions are made in the scrotum.

A section of each vas deferens is then cut. The edges are then clumped together, tied, clipped, or any combination of the above.



During this procedure, you may feel some tugging in the scrotum. This may be slightly uncomfortable but not painful.

One or two sutures may be used to close the incision site. If the puncture technique is used, the puncture site may be allowed to heal without sutures.

Some discharge may be expected until the wound heals completely.

After a short period of observation in the doctor's office or hospital, you will be able to go home.

Risks and Complications

This surgery is safe. There are, however, several possible risks and complications. These are unlikely but possible. You need to know about them just in case they happen.

By being informed, you may be able to help your doctor detect complications early.

Some patients may be allergic to the local anesthesia or intravenous medication. Therefore, it is very important to inform your doctor about all your allergies.

Some of the risks are seen in any type of surgery.

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These include:

- Infection, involving the testicles or scrotum. Treating infections may require long-term antibiotics and possibly surgery.
- Bleeding, either during or after the operation. It is normal to have some discoloration or swelling of the scrotum after this procedure. However if these symptoms continue to progress and cause severe pain, you should let your doctor know. Surgery may be needed.
- Scars are usually barely noticeable after this surgery.

Other risks and complications are related specifically to these procedures. These, again, are not likely. However, it is important to know about them.

These include inflammation in the testicles, also known as congestion, which could be painful. It takes a few weeks for this to appear, and it is usually temporary.

However, very rarely, the pain may last forever.

You may be able to feel with your hand a small nodule at the site of the vasectomy. This is known as “sperm granuloma.”

If the granuloma gets bigger and is painful, another operation may be needed to take it out.

The two cut edges of the vas can re-grow and reconnect. This may permit sperm to flow back through the vas.

After the operation, sperm counts are done to make sure the count drops to zero. It may take a few weeks for that to happen. In very rare cases this may not happen. In that case a repeat vasectomy may have to be done.

A side effect of the operation is that by destroying

the excess sperm in the testicles, the body starts producing antibodies against the sperm.



Antibodies are special chemical elements made by the body to defend itself against foreign organisms. These antibodies can cling to the sperm and make them useless.

At a later date you may decide to have the tubes reconnected. Nevertheless, even if sperm appears in the semen, it may not be effective in procreation.

This is why this operation should be considered **PERMANENT**.

Although some researchers have linked vasectomy and prostate cancer, scientists appointed by the National Institutes of Health have found **NO** significant relationship between vasectomy and prostate cancer.

After the Surgery

Some oozing is expected for a day or so after the operation.

Sterile gauze put in your briefs will help absorb and stop the oozing.

If the skin separates because of the oozing, the edges could be pinched together, using the sterile gauze, to improve healing.

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Sex can usually be resumed in a few days, after the swelling, bruising, and pain have subsided.

Lifting heavy objects is not permitted until the wound has fully healed and the swelling has completely subsided.

Summary

Vasectomy is a very safe and effective form of contraception.

It is important to remember that this operation should be considered permanent and that it does not help prevent sexually transmitted diseases.

Some risks and complications may occur. Knowing about them will help you detect them early if they occur.

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