

## VASECTOMY REVERSAL

### Introduction

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A vasectomy reversal is one of the methods of restoring fertility after a vasectomy. The most common reason for requesting a vasectomy reversal is wanting to start a family with a new partner by natural means after separation or divorce. Using microsurgical techniques, high patency rates of 90-95% can be achieved. However, pregnancy rates are lower as sperm production may be compromised after the initial vasectomy.

The chances of having a successful pregnancy are around 70% if the reversal is performed <5 years from initial vasectomy, and decreases as the duration between vasectomy and reversal increases. Another factor to consider is maternal age as it often takes at least 6-12 months for motile and healthy sperm capable of fertilisation to be produced.

### What are the alternatives?

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1. In-vitro fertilisation
2. Surgical sperm extraction (TESA or MESA)

### What does the procedure involve?

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Under general anaesthetic, 3cm cuts are made in the scrotal skin on each side. The testicle, tubes and sac are externalised and the site of previous vasectomy identified. The ends of each vas are trimmed back and a fine probe is passed through each end to ensure they are not occluded.

Using a microscope, fine non-absorbable sutures are used to sew the two ends of the vas together. The surrounding tissues are tacked together to support the join and any bleeding vessels are cauterised. The incisions are closed with absorbable stitches and tissue glue applied.

### What are the risks of surgery?

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All operations have risks. Potential complications include:

#### Common (>10%)

Mild bruising, discomfort and swelling in the groin or scrotum (days to weeks)

#### Occasional (2-10%)

Bleeding or infection

Non-patency - persistent azoospermia or absent sperm in semen

### Rare (2%)

Chronic pain or sensitivity

Damage to surrounding structures - epididymis or testis

Anaesthetic or cardiorespiratory problems requiring intensive care

### What should I do before surgery?

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- Have a thorough discussion with your partner about the procedure
- Have a consultation with a fertility specialist to discuss pros, cons and alternatives
- Do not eat, drink, or chew gum for 6 hours before surgery
- If you smoke, quitting makes anaesthesia safer and reduces complication rates
- If you are on blood thinning medication, discuss this with Dr Ooi

### What should I expect after surgery?

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A vasectomy reversal is usually performed as a day procedure. You can go home the same day and use simple pain killers as required.

Please contact Dr Ooi's rooms, the hospital, ward or nurse manager if you have any concerns, such as excessive pain, bleeding, swelling, difficulty passing urine, fevers or feeling unwell. General advice is also available on our website in the Procedures section.

### Discharge information

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Please arrange for someone to pick you up and keep you company for 24 hours. Wear supportive underwear with hand towels packed inside to compress and elevate the scrotum for a few days. Use pain killers and apply ice packs for 5-10 minutes to reduce discomfort and swelling. Avoid straddling on a seat, sexual intercourse, swimming and strenuous activities for 4-6 weeks.

Please contact Dr Ooi's rooms, the hospital, ward or nurse manager if you have any concerns, such as excessive pain, bleeding, wound issues, fever or feel unwell. General advice is also available on our website in the Procedures section.

### Appointments

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Dr Ooi will see you 3-4 weeks after surgery to check on your recovery. If you live remotely and things are going well, you may prefer to have a telephone call instead of a face-to-face consultation.

You may resume sexual activities 4-6 weeks after the surgery and Dr Ooi will organise a semen analysis at 6 months. If a successful pregnancy occurs, semen testing is not be necessary. Do send us a picture of your baby when he or she is born 😊