Locke

Locke Medical Vasectomy Service

Vasectomy

PATIENT INFORMATION

Locke Medical Vasectomy Service

Phone: 0117 427 6785 | **Email:** enquiries@lockemedical.co.uk
Website: www.lockemedical.co.uk
Address: North Bristol Private Hospital,150 Aztec W, Bristol, BS32 4UB

What is Vasectomy?

successful vasectomy

Vasectomy, also known as male sterilisation, is an effective and permanent form of contraception that involves a small operation to cut and seal a section of each vas deferens. This procedure is safer and more effective than female sterilisation.

Sperm are produced in each testis and travel to the penis via a tube called the vas deferens. There is one vas deferens for each testis. Once the vas deferens is cut, sperm can no longer get into the semen that is ejaculated during sex and is instead absorbed by the body.

Sterilisation is only for people who have decided that they do not want children, or any further children. It is considered a permanent method of contraception as reversal is a complicated operation that is not always successful. Reversal is not readily available on the NHS.

Succes rates and effectiveness

Vasectomy is a very reliable form of contraception and is more than 99% effective and after semen analysis confirmation is the most effective form of contraception. However, even after a successful vasectomy operation, there is still a chance of the tubes reconnecting over time with the male become fertile again, this occurs in less than 1 in 2000 men.

Vasectomy procedure failure rates (when the operation is not successful) are very low, with the rate of failing to achieve a negative semen sample 16 weeks after procedure being less than 1%.
Sperm survive in the upstream part of the vas deferens for several weeks after vasectomy and can get into the semen for a period of time after the procedure. It usually takes a minimum of 24 ejaculations before the vas deferens is cleared.

Additional contraception must still be used until the all clear is received.

Things to Consider

Vasectomy should only be considered as the right method of contraception if you or your partner are sure that you do not want children or further children.

Vasectomy should be considered irreversible and the decision to go ahead with the procedure should not be made during times of crisis and/or change. The decision should not be made if there are any major problems within a relationship and patients should note that it will not resolve any sexual problems.

Patients will be required to sign a consent form prior to the procedure and, whilst it is not a legal requirement to get the partner's permission, the surgeon will be keen to ensure that both parties are happy with the decision.

The Procedure

The vasectomy procedure takes approx. 20 minutes and is done under local anaesthetic, which is injected into a small area of skin on the scrotum above the testes. You will be awake during the procedure.

Our surgeons use a non-scalpel technique. The surgeon will make a very small puncture (hole) on one side of your scrotum and pull out part of the vas deferens on that side. You may feel some tugging and pulling. The surgeon will then seal a small section of the vas deferens with a tiny cautery device and remove a small section to disconnect the tube. They will then do the same thing on the other side. The puncture, or incision, is so small that it usually heals without the need for stitches.

You should not drive yourself home as you may feel light-headed after the procedure.

Preparing for the procedure

We recommend that you trim the hairs on the front of the scrotum prior to the operation. On the day of the procedure, wash the genital area thoroughly with soap and water and keep very warm. Have a light meal before attending and take some paracetamol to help minimise post-operative discomfort. You are welcome to bring along your own choice of music to listen to during the procedure.

If you require any additional support or have any specific access requirements, e.g. use of a wheelchair or need for an interpreter, please let us know and we will do our best to accommodate this.

After Care

Following the procedure, you may experience some bruising and discomfort that may last for a few days. To help minimise this, we recommend wearing tight fitting underpants during the day and night for one week after the procedure and taking basic pain relief such as paracetamol.

More information will be available in a Post-Vasectomy Testing & Care leaflet that will be included with your procedure letter. Please read carefully ahead of your procedure appointment to give you more opportunity to ask surgeons questions on the day.

Post-Operative Testing

At 16 weeks post-procedure, a semen sample needs to be produced and tested to establish if the procedure has been successful. You will be sent a specimen pot to your home address. This will then be sent for analysis and patients will be notified of the result once received. The sample must be produced after having not ejaculated for between 2 and 7 days.

Please note samples are done no earlier that 16 weeks post procedure.

Company number: 16112861 | © Locke Medical LTD 2025

Locke

Locke Medical Vasectomy Service - Frequently Asked Questions

What are the risks?

Problems following vasectomy are uncommon and most patients will not experience any. Post-operative problems and risks to consider include:

- Complications common to any surgical procedure: pain, bleeding, bruising, swelling, haematoma (collection of blood), infection.
- A small swelling called a sperm granuloma (rare)
- Testicular atrophy caused by damaged blood supply to testicle (very rare)
- Development of severe chronic post-vasectomy pain lasting more than four months can occasionally effect quality of life (1-2% risk)

Studies have shown that there is no increased risk of prostate cancer after vasectomy.

How will my sexual activity be affected?

Following the procedure, you can resume having sex as soon as it is comfortable enough for you to do so. This is usually around 10 days. You must remember to continue using additional contraception until you receive the all clear from your 16-week test.

Sex drive will not be affected by the procedure as the sex hormones made by the testes (e.g. testosterone) continue to be passed into the bloodstream as before. The procedure can result in a reduction in the amount of ejaculate generated but is typically not noticeable. Sex may even be more enjoyable as the worry or inconvenience of other forms of contraception is removed.

Will the procedure hurt?

The injection of local anaesthetic into a small area of skin may sting a bit for a few seconds but the procedure itself will hurt no more than any other minor operation done under local anaesthetic. You may experience some discomfort when the surgeon picks up each vas deferens (tube) and this can cause a light-headed, sweaty and sometime nauseous feeling. This feeling usually passes very quickly. After the procedure, there is usually mild pain / discomfort in the top part of the scrotum for a few weeks.

What if I change my mind about having children?

There is a procedure to re-unite the two cut ends of the vas deferens but it is a complicated operation and not always successful. It is not available on the NHS. For these reasons, it is best to consider vasectomy a permanent choice and form of contraception

Contact Information

Phone: 0117 427 6785
Email: enquiries@lockemedical.co.uk
Website: www.lockemedical.co.uk
Address: North Bristol Private Hospital,150 Aztec W, Bristol, BS32 4UB

Locke