

Sterilization

What is it?

Sterilization is a procedure to permanently prevent pregnancy.

- For women, sterilization requires blocking or removing the tubes where the egg is fertilized by sperm or removing the uterus.
- For men, sterilization requires cutting or tying the tubes that carry sperm from the testes to the semen or removing both of the testicles.

Why do I need it?

You may choose sterilization for these reasons:

- You do not want to become pregnant at any time in the future, if you're a woman
- You do not want to cause a pregnancy at any time in the future, if you're a man

Your doctor may recommend sterilization for these reasons:

- · Becoming pregnant would endanger your health
- Your doctor thinks this is the best way to address another health concern

What happens before?

You will be given anesthesia. It may be local (to numb a small area), general (to numb your whole body), or regional (to numb below the waist).

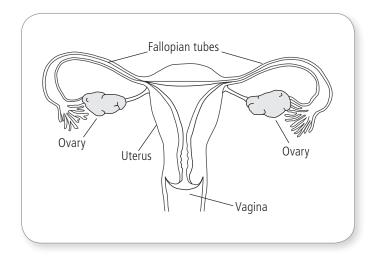
What happens after?

After the operation, you may have some pain or discomfort from the incision or you may have pain in the lower abdomen. This can be controlled with medication.

Potential benefits	Risks and potential complications	Alternatives
Hysterectomy and bilateral orchiectomy permanently prevent pregnancy in all cases. (See the back side for detail on sterilization methods.)	Surgical complications. These can include complications of the anesthetic, infection, bleeding, and death. Deve failure to present the graph of the case	There are many other methods of birth control. Talk with your doctor about whether another, less permanent method might be a good choice for you.
	• Rare failure to prevent pregnancy. There are rare instances of pregnancy after sterilization procedures. There is no way to predict these failures.	
Other methods permanently prevent pregnancy in 99.5% of cases.	• Ectopic pregnancy. In the rare case of pregnancy after tubal ligation, there is an increased risk of a pregnancy implanting in the fallopian tubes.	
	• Future desire for children. Sterilization procedures should be considered permanent and irreversible.	
	Sexually transmitted disease. Sterilization does not prevent sexually transmitted disease.	

Sterilization methods for women

- **Tubal ligation** ("having your tubes tied"):
 The tubes where the egg is fertilized (fallopian tubes) are blocked using one of these methods.
 - Laparoscopic technique: A small incision (about ½ inch) is made below the navel and another above the pubic bone. A laparascope (a small tube with a camera at the end) is inserted. Small tools are inserted through the laparascope and the tubes are clipped, closed off using heat (cauterized), or closed with a plastic-type ring.
 - Open abdominal technique: A larger incision
 (2 to 5 inches) is made in the abdomen. The tubes
 are then tied and a loop of the tied tube is cut,
 completely interrupting the tube.
 - Vaginal technique: An incision is made through the upper portion of the vagina into the abdominal cavity. The tubes are then tied, and part of the tube is removed.
- **Hysterectomy:** The uterus is removed. This procedure is usually done to treat another medical condition. It can be done with one of these methods:
 - Vaginal: The uterus is removed through an incision in the top of the vagina.
 - Abdominal: The uterus is removed through an incision in the abdomen. The incision can be vertical, from the navel to the pubic bone, or horizontal, across the bikini line.



- Salpingectomy or oopherectomy: Salpingectomy is the removal of the tubes. Oopherectomy is removal of the ovaries. These procedures can be done through an open abdominal incision or through a small incision with a laparascope.
- Hysteroscopic tubal occlusion: A small device called a "micro-insert" is placed inside each fallopian tube. The device expands to fill the tube and over a period of weeks scar tissue grows around the device. This blocks the fallopian tube so sperm cannot reach the egg. This method does not require an incision and can be performed in a doctor's office.

Sterilization methods for men

• **Vasectomy:** The doctor makes a small incision in the side of the scrotum. The doctor then removes a small section of the vas deferens (the tubes that carry sperm from the testes to the semen). The open ends are cut and tied or sealed, and the incision is closed.

A vasectomy is usually done in a doctor's office, under local anesthesia. You may feel some pain for the next few days.

• **Bilateral orchiectomy:** This is a procedure to remove both testicles. It is usually done to treat another health concern, such as testicular cancer. The doctor makes an incision about 4 inches long along the "bikini line." The doctor then pushes the testicles up through the incision, detaches them, and closes the incision. The procedure takes about an hour, and often requires an overnight hospital stay.

