Vasectomy reversal

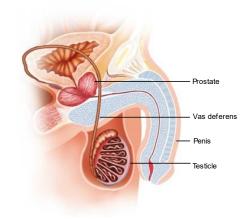
A vasectomy reversal is an operation to restore male fertility after a vasectomy.

What is a vasectomy reversal?

Sperm is produced by your testicles and stored in a sack on the back of your testicle, called the epididymis. The vas deferens is a muscular tube that connects your epididymis to your prostate, where sperm is mixed with prostatic fluid to make semen.

During a vasectomy, your vas deferens is cut on both sides to prevent sperm from getting into your semen, making you infertile.

A vasectomy reversal is an operation to rejoin the cut ends of the vas deferens.



Why is a vasectomy reversal performed?

A vasectomy reversal is performed to try to restore fertility following a previous vasectomy.

What does a vasectomy reversal involve?

Vasectomy reversal is performed under a general anaesthetic (completely asleep).

One or two incisions are made in your scrotum.

The cut ends of your vas deferens are located on both sides. Using a surgical microscope or a Da Vinci surgical robot, the cut ends of your vas deferens are stitched back together.

If it is not possible to re-join the ends of the vas deferens, it may be necessary to join the vas deferens directly to your epididymis.

At the end of the operation, the wounds are closed with dissolvable stitches.

What is the recovery after vasectomy reversal?

You will have moderate pain/aching in your scrotum for 1 to 2 weeks after your vasectomy reversal.

You can drive once you can safely perform an emergency stop (slam your foot on the brake). This will usually be 3 to 5 days after the operation

You can usually return to sedentary work 3 to 5 days after your operation.

You can usually return to physical work and vigorous physical activity (eg. running) approximately 2 weeks after your operation.

You can't ejaculate for one week after vasectomy reversal. After one week, you can resume sexual activity if you feel comfortable.

How successful is vasectomy reversal?

Vasectomy reversal isn't always successful. The chance of the operation being successful depends on how long it has been since you had a vasectomy:

D-040. Approved 11/24





Vasectomy reversal

Time since vasectomy (years)	Chance of pregnancy after vasectomy reversal
<3	75%
3 to 8	50-55%
9 to 14	40-45%
15 to 19	30%
20+	<10%

It can take 3 to 6 months for sperm to appear in your semen after vasectomy reversal.

Your doctor will order a semen test ~3 months after your operation to look for the presence of sperm.

Even if you have sperm in your semen after vasectomy reversal, it still may not be possible for you and your partner to conceive a pregnancy.

What are the risks of vasectomy reversal?

Common risks (1/2 – 1/10)

- Swelling and bruising in the scrotum.
- Blood in your semen, which can persist for several months.

Occasional risks (1/20)

 Developing a painful nodule at the site where the cut ends of the vas deferens are rejoined (sperm granuloma).

Occasional risks (1/10 – 1/50)

- Bleeding in your scrotum, causing pain and swelling, sometimes requiring another operation to correct.
- Infection in the wounds or within the scrotum, requiring antibiotics or another operation to correct.

Rare risks (1/50 - 1/250)

- Rarely, the vasectomy reversal is unable to be performed on one or both sides due to technical factors encountered during the operation (for example, the vas deferens being too short).
- Developing a collection of fluid around your testicle (hydrocoele).
- Chronic pain in your scrotum or pain with ejaculation.

Very rare risks (<1/250)

• Decrease in the size or function of one or both testicles (testicular atrophy).

D-040. Approved 11/24





Vasectomy reversal

Other uncommon or very uncommon risks of surgery and anaesthesia include:

- Blood clots in the legs (Deep vein thrombosis (DVT)) or lungs (Pulmonary embolus).
- Chest infection (Pneumonia).
- Heart attack.
- Stroke.
- A serious allergic reaction (Anaphylaxis).
- Death.

What are the alternatives to vasectomy reversal?

The alternative to having a vasectomy reversal is to have surgical sperm retrieval from your testis or epididymis for use in in vitro fertilisation (IVF). Options for surgical sperm retrieval include:

- Testicular sperm extraction (TeSE)
- Testicular sperm aspiration (TeSA)
- Percutaneous epididymal sperm aspiration (PESA)

This is general information only. Please consult your doctor for more information and treatment options.

For appointments and enquiries please contact 07 3830 3300.

