

Patient information from Gordon Muir, Consultant Urological Surgeon

Please do not rely on this information unless you have been specifically sent this by Mr Muir
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Reversal of Vasectomy

A reversal of vasectomy is when the sperm-carrying tubes are rejoined. While it is nearly always possible to reconnect the tubes, the success rate of vasectomy reversal is largely dictated by the time from the initial operation to the reversal. If this is less than three years the chances of viable sperms being produced is good, but after five or more years there is a high chance that even if sperms are able to reach the outside world they will not be mobile. Even in this case the sperms can be used for assisted fertilisation. The decision to proceed will depend on the time since vasectomy, the female partner's age, and the couple's attitude to in vitro fertilisation.

We will have discussed with you the possibility of freezing sperms at the time of the vasectomy reversal (usually recommended if good numbers of sperms are not found in the cut end of the vas, and more common in men having treatment many years after the original vasectomy.) If sperm storage is being considered you will have undergone some screening blood tests and consented separately to this.

A general anaesthetic is usually recommended, although the procedure can be done under local anaesthesia. A larger incision is usually required than for your initial vasectomy in the scrotum (the bag that holds the testicles). Once the sperm-carrying tubes are visible, the free ends are connected using an operating microscope and very fine stitches. You will have external stitches in your scrotum. These normally dissolve after about 2 weeks.

There is likely to be some bruising and this could well be uncomfortable. Pain killing tablets will be prescribed for you to take home.

Tight fitting underpants (lycra sports shorts seem to be best) or a scrotal support should be worn day and night for 2 weeks at least. This will support the scrotum and make it more comfortable for you.

Take no heavy exercise for at least two weeks or so; cycling should be avoided for a month.

You can have intercourse as soon as it is comfortable for you. A sperm count should be carried out a few months after the operation at which point the results will be reviewed.