

Health

What Exactly Is a Vasectomy? Here's What You Need to Know

What happens during surgery, how much it costs, if it's effective birth control, whether it can be reversed, and more.

By **Claire Gillespie** March 09, 2020



March is in full swing, and while you're probably noticing warmer days, longer nights, and all the hoopla around college basketball playoffs, there's something else going on this time of year you might not be aware of: vasectomies. According to a 2018 study, March is one of the most popular times of the year for men to get a vasectomy.

So what is it about March Madness that makes men think about birth control, and what does it involve?

For starters, the urologists we spoke to who perform vasectomies say they've never noticed the March uptick. "While some men may have used March Madness as an excuse to get their vasectomy and use the recovery time to watch collegiate basketball, the vast majority will undergo the procedure when convenient," S. Adam Ramin, MD, urologic surgeon and medical director of Urology Cancer Specialists in Los Angeles, tells *Health*.

Whatever time of year you have a vasectomy, it's a minor surgery that's used as a permanent form of male birth control. "The procedure blocks sperm from reaching the semen, which is the fluid that's ejaculated from the penis," Dr. Ramin explains. "The testes still make sperm, but it can't reach the semen." In other words, semen still exists, but it doesn't contain any sperm. The unused sperm eventually die and are absorbed by the body.

Here's what you need to know if you or your partner is considering a vasectomy.

What happens during a vasectomy?

Good news: a vasectomy is a quick procedure. Done under local anesthesia, it only takes around 20 minutes. “The patient comes in and we generally offer valium to help them relax,” **Bruce Sloane, MD, from Philadelphia Urology Associates**, tells *Health*. “I use the ‘no scalpel’ technique where I make two openings on the right and left sides of the scrotum, pull out the vas deferens [the tube that carries sperm], cut the ends, and cauterize it. I then put small clips on either end, separate them with a stitch, and put it back into the scrotum.”

Be honest: does it hurt?

A vasectomy shouldn't be painful for most men because the area will be sufficiently numbed, although they might feel slight pressure or tugging. “After a vasectomy, most men feel a bit of soreness or aching, but it is usually minor and resolves after a few days of ice and rest,” Dr. Ramin explains.

Like all medical procedures, it's important to remember that everyone responds to pain differently—what is really painful to one person may be NBD to another.

Aside from aching, what are other potential side effects?

The most common side effect of a vasectomy is aching, says Dr. Ramin, and less common side effects are hematoma (a blood clot in the scrotum) and a condition called post-vasectomy pain syndrome, which causes pain in the testicles that lasts longer than three months following the procedure. However, it's extremely rare, only affecting a tiny minority (1-2%) of patients.

A vasectomy doesn't affect the production or release of testosterone, so it does not interfere with a man's sex drive, facial hair, voice, or anything else that's influenced by testosterone. “You can expect erections, climaxes, and the amount of ejaculate to remain the same as before the surgery,” adds Dr. Ramin.

How much does it cost?

The procedure is usually covered by insurance, **Dr. Sloane** says, but “at my practice where there is no insurance or where insurance doesn't cover, we charge \$650,” he adds. Dr. Ramin says that most insurance companies set the cost at \$400 to \$600, and doctors who don't accept insurance for vasectomy charge between \$500 to \$1500.

How effective is a vasectomy as birth control?

Unlike temporary birth control measures—such as the pill—a vasectomy is a permanent solution to avoiding pregnancy. “It's more effective in preventing pregnancy than any other birth control method except abstinence,” says Dr. Ramin; out of every 100 people who rely on it, .15 will become pregnant, so the odds are less than 1%. And to many people, a vasectomy is more appealing than female sterilization options, such as tubal ligation, because it's a much simpler medical procedure, has fewer complications, and is much less expensive.

According to the National Institute of Health, a vasectomy isn't effective right away, and a few couples will still get pregnant in the first year after a vasectomy. The advice is to use another form of birth control until the remaining sperm are cleared out of the system, which is estimated to take 15 to 20 ejaculations. (Or in terms of time, around three months.) After that, one in five men will still have sperm in their semen; they'll need to wait for their doctor to tell them it's cleared and use another birth control method until it does.

How do you know it's actually worked?

A vasectomy doesn't end when you leave the doctor's office. It's important to check, both post-procedure and after recovery, that it's been successful—as in, no more babies will be made. This requires semen samples, which are examined in the lab to make sure no or very little motile sperm are present.

“Some sperm can live above the testis, stored in what's called the seminal vesicle—two glands within the pelvis that are attached to the prostate—so it's important contraception is still used up until the point where sperm count in the ejaculate fluid is consistently less than 10,000 non-motile sperm per milliliter of semen,” James Mollenkamp, MD, a urologist in Palos Verdes, California, tells *Health*.

According to Dr. Mollenkamp, when there are less than 10,000 non-motile sperm per milliliter of semen, you can stop alternative contraceptive precautions and rely on the vasectomy as the only form of birth control. “10,000 may sound like a lot, but normal sperm count in healthy males ranges from 15 million sperm to more than 200 million sperm per milliliter of semen,” he says.

If you change your mind, can you reverse the process?

A vasectomy is reversible, and the reversal isn't that much more complicated than the initial procedure, says Dr. Mollenkamp. However, the longer you wait between the initial vasectomy procedure and the reversal, the more difficult it becomes to reconnect each vas deferens tube. “A reversal 10 years after the initial procedure versus a reversal a few years after may or may not have the same desired outcome,” Dr. Mollenkamp warns.

Proper alignment of the tubes is key, say if you or your partner are considering a vasectomy but want to leave the reversible option open, Dr. Mollenkamp recommends asking your urologist how many vasectomies and vasectomy reversals they have done. The cost of the reversal may also be an issue. Dr. Mollenkamp says for most men, a vasectomy reversal is usually not covered by insurance plans, so be sure to check with your insurance company first and understand the costs involved. If you have any doubt whatsoever about having a vasectomy in the first place, it's best to hold off for now.

<https://www.health.com/condition/birth-control/what-is-vasectomy>