



**Gentle
Procedures
Clinic**

TORONTO | WEST GTA

Vasectomy

ةق فادللا ةانقلا عطق • 輸精管結紮術 • वैसेक्टमी • *vasectomía*

You are either considering or about to have a vasectomy. Patients who are informed and prepared for vasectomy can recover in less time and with less pain. This booklet will give you the general information you need. Read this booklet with care. We hope that you find this booklet a useful reference guide before, during and after your procedure.

***IMPORTANT:** If your surgeon gives you different advice than what has been provided in this booklet, please follow the specific directions you receive.

Contact



#204–4800 Leslie Street, North York, ON
#604–89 Queensway West, Mississauga, ON



TELEPHONE: 416-551-7070
FAX: 416-551-7171



GENERAL INQUIRIES: info@gentleprocedurestontoronto.ca

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Before your vasectomy

After your vasectomy

An Important Note Regarding Your Post-Vasectomy Semen Analysis

Welcome

Welcome to Gentle Procedures Clinic! We thank you for your trust in us. Our mission is to deliver world-class expertise locally. We maintain the highest standards of patient care and pride ourselves in providing surgical excellence and serving as a surgical training centre for physicians around the world.

In keeping with this philosophy and to ensure that you are properly prepared before your vasectomy, we have prepared this booklet which you should read with care.

About Us

Gentle Procedures Clinics are located in Canada, the United States, the United Kingdom and Australia. At our clinic locations in Toronto and Mississauga, we have created private surgical rooms allowing patients convenient access to avoid long waits at local hospitals. We serve patients from all over Ontario. With two convenient locations, you can book an appointment within just days or weeks. Our online registration process makes getting started easy.

Our Procedures

Gentle Procedures Clinic is the largest circumcision, no-scalpel no-needle vasectomy and frenulectomy provider in Ontario. We now offer circumcision for all ages. Our clinics are unique in that they are limited to only these three surgical procedures.

Our Doctor

Dr Roland Sing has been practicing urology since 1998. He is a member of the Royal College of Surgeons and holds a clinical fellowship in Endourology.

Dr. Sing has made Vasectomy and Circumcision a primary focus of his clinic, training and adopting the technique of Dr. Neil Pollock, one of North America's foremost authorities in these procedures.

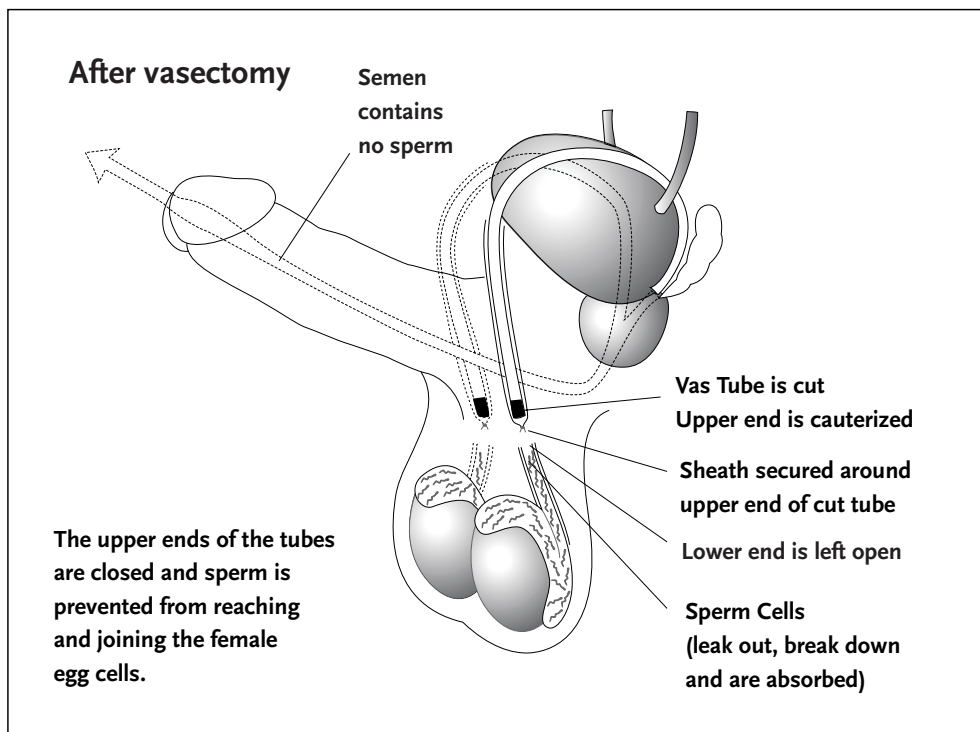
Dr. Sing offers his patients advanced techniques in no needle no scalpel vasectomy, and an advanced method of circumcision using the renowned Pollock Technique™, safely performed on thousands of patients around the world.



Getting Started

WHAT IS A VASECTOMY?

The testicles produce sperm that travel through a tube called the vas deferens. The vas deferens or “vas” continues to travel through the prostate before joining with the vas on the other side to become the urethra, which exits through the penis. The goal in a vasectomy is to block the right and left vas. In doing so, you will ejaculate semen without sperm. A man cannot make his partner pregnant without sperm!



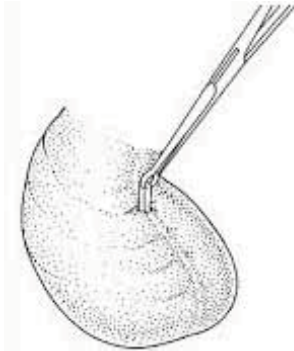
WHAT IS A NO-SCALPEL VASECTOMY?

No-Scalpel Vasectomy is different from a conventional vasectomy in the way the doctor gets to the tubes, not in the way he blocks them. In a conventional vasectomy, the doctor makes two cuts into the skin and lifts out each tube in turn, cutting and blocking them. Then the doctor stitches the cuts closed. In a no-scalpel vasectomy, the doctor locates the tubes under the skin and holds them in place with a small clamp. Instead of making two incisions, the doctor makes one tiny puncture with a special instrument. The same instrument is used to gently stretch the opening so the tubes can be reached. This line accurately represents the actual size of the puncture: | . Through this tiny opening both tubes are temporarily lifted out and then blocked, using heat cauterization. You can review further at the following link:

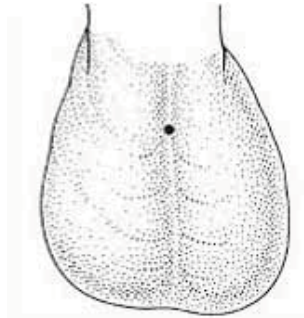
www.pollockclinics.com/no-scalpel-vasectomy/vasectomy-video/

WHAT ARE THE BENEFITS OF NO-SCALPEL VASECTOMY?

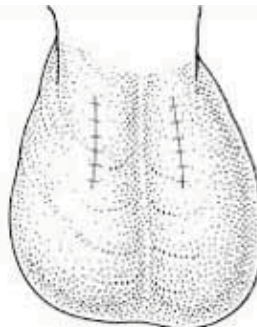
Studies have shown an eight times lower complication rate, quicker healing, and less intra-operative discomfort for a no-scalpel vasectomy compared to the more conventional approach. Not all vasectomy providers use this technique because it is much harder to learn how to do a vasectomy through a tiny central opening than it is to make sizeable cuts requiring sutures.



No-Scalpel Vasectomy: Pulling out one of the two vas tubes



***No-Scalpel Vasectomy:
No stitches are needed to close the tiny opening***



***Conventional Vasectomy:
Two moderate incisions stitched closed***

WHEN IS THE RIGHT TIME FOR VASECTOMY?

It is best to get a vasectomy when you and your partner are sure that you are happy with the number of children you have. If you have a child under six months of age, you might want to wait because of “Sudden Infant Death Syndrome (SIDS)”, a condition where a child can die after a few months of life for no apparent reason. This might possibly affect the timing of your plans for vasectomy. Age over six months is often considered the threshold at which SIDS is least likely to occur.

SHOULD I STORE SPERM?

Choosing to have a vasectomy is a serious decision because it is carried out with the intention of creating permanent sterility. Our experience with patients over the years has shown that a significant number of men who opt for a vasectomy later change their minds about their desire to have children. Reasons for this include death of a spouse, death of a child, divorce, separation, or just changing their minds. That is why we encourage everyone to consider sperm storage. Sperm can be cryogenically frozen and preserved for years, which provides an insurance policy for the future.

WHAT ARE THE POSSIBLE RISKS AND COMPLICATIONS?

1. **Bleeding** (usually mild) into the scrotum (1-2%).
2. **Scrotal hematoma** which is where a major bleed into the scrotum causing a grapefruit sized tender scrotum that could be disabling for two months (1-2%).
3. **Infection** requiring antibiotics, although more serious infection such as an abscess formation is possible requiring intravenous antibiotics (1-2%).
4. **Congestive epididymitis** resulting in swelling of the epididymis, which is where sperm is normally stored (1-3%). This almost invariably resolves with anti-inflammatories, ice and rest.
5. **Sperm granuloma** is a lump made of leaked sperm that develops at the site where the tube was blocked. Sometimes this can become painful (1-2%). It also almost invariably resolves with anti-inflammatories, ice and rest or may require a local steroid injection.
6. **Chronic post-vasectomy discomfort** is a rare complication of pain in the scrotum that can persist for months or years and may interfere with quality of life. Medical or surgical therapy such as vasectomy reversal can be effective, but not always, in improving this pain (1-2%).
7. **Re-canalization** is a rare outcome for men who develop a channel for sperm flow after a vasectomy. It can occur early during the healing phase (1%), or late (months or years after semen has been declared sperm free after two samples (0.05%) resulting in an unintended pregnancy. The odds of the latter occurring is still far less than on any other form of birth control including tubal ligation.
8. **Vasovagal Reaction** is a reaction where in rare cases some men feel faint minutes to hours after the procedure. While most men can drive themselves home, some men may feel more comfortable bringing a designated driver (<1%).

ARE THERE ANY LONG-TERM HEALTH RISKS ASSOCIATED WITH VASECTOMY?

No. There are no proven long-term health risks (cancer or cardiovascular disease) associated with vasectomy. The risks of NOT having a vasectomy, however, are real and should be taken serious by those who choose to avoid vasectomy, including the risks of hormonal contraceptives (blood clots, significant adverse reactions etc), pregnancy (miscarriage, ectopic, hyperemesis, gestational diabetes etc), and childbirth (vaginal laceration, stretch marks, hemorrhage etc).

IMPORTANT MESSAGE FOR MEN LESS THAN 35 YEARS OLD WITH LESS THAN 2 CHILDREN.

Please consider the following:

1. Vasectomy should be considered permanent and non-reversible as reversals are not guaranteed.
2. You may regret your decision one day. Younger men especially those in their 20s with fewer than 2 children are most likely to seek a reversal in the future often citing that they thought it was the right decision at the time only to be disappointed when their reversal procedure was unsuccessful.
3. Men change. Many men are often totally convinced that they do not want children. In our experience, many men develop a different attitude about having children as they get older and their life situation changes.
4. Women also change. Many woman say they do not want children only to change their minds as their maternal instincts kick in as they grow older and they see their friends all having children. Some who have had bad reactions to pregnancy feel they would never want to go through another pregnancy only to change their minds after a few years.
5. Relationships fail. More than 40-50% of relationships in North America end in divorce. Despite how stable our relationships may seem, there is a chance that in a few years, you may be with a different partner who may have a strong or stronger desire to have children than you.
6. Sperm storage. Young men should consider storing sperm. Imagine meeting the love of your life years after your vasectomy. You may change your attitude about having children or she may have no children or want to have children with you. At least you can tell her that you made a responsible decision at the time and had the good foresight to store sperm.

Common Questions

HOW EFFECTIVE IS NO-SCALPEL VASECTOMY?

In our doctors' hands, it is extremely effective. Our success rate has been better than 99.9% which is amongst the highest in North America. Having said that, statistically, 1/1200 vasectomies will fail longterm. You must use other forms of contraception for three months as well until the doctor has examined your semen specimens and found them to be sperm free. If semen testing is negative, it is very likely you will have permanent success as it is exceedingly rare for the tubes to ever grow back together if they have not done so by three months.

IS NO-SCALPEL VASECTOMY SAFE?

Most medical experts, including special panels convened by the National Institutes of Health and by the World Health Organization, have concluded that vasectomy is a safe and simple procedure. Vasectomy is surgery however, and all surgery has some risks, such as bleeding and infection. But serious problems are uncommon. To date there have been no studies to support any long term side effects like prostate cancer, high blood pressure etc.

IS THERE ANY DISCOMFORT?

No-scalpel vasectomy is virtually painless. After the procedure, you may be sore for a couple of days if you don't overdo it and you should take a mild painkiller as outlined in the instructions. The discomfort is much less than with the conventional technique because there is minimal injury to the tissues.

HOW MANY VISITS ARE REQUIRED?

At Gentle Procedures Clinics, our doctors understand your time is valuable so we make it possible to get your vasectomy done in just one single visit if you wish.

Consider the multiple visits many other physicians require in order to get a vasectomy:

1. Schedule first preoperative appointment
2. Schedule second appointment for vasectomy (if you even go back)
3. Schedule third appointment for a follow-up visit
4. Schedule fourth appointment for the after vasectomy semen sample testing

WILL I BE STERILE RIGHT AWAY?

No. After a vasectomy, there are always some active sperm remaining in your reproductive tract. It usually takes **three months and 20 ejaculations** to clear them. You and your partner should use some other form of birth control until semen testing confirms that your semen is sperm free.

WHEN CAN I START HAVING SEX AGAIN?

As soon as you are comfortable, after a minimum of **seven days**, but remember to use some other kind of birth control until your semen analysis confirms that you are sterile.

WILL VASECTOMY CHANGE ME SEXUALLY?

The only thing that will change is that you will not be able to make your partner pregnant. Your body will continue to produce the hormones that make you a man. You will have the same amount of semen. Vasectomy won't change your voice, beard, your muscles, your sex drive, your erections, or your climaxes. Some men say that without the worry of accidental pregnancy and the bother of other birth control methods, the freedom results in substantially improved sexual fulfillment.

WHAT HAPPENS TO THE SPERM?

The body continues to make sperm but after a vasectomy there is no place for them to go. They will die, dissolve, then get absorbed by the body. This happens in the same manner as a man who does not ejaculate for a very long time; sperm are still made but the body clears them away.

HOW SOON CAN I GO BACK TO WORK?

You should not do any heavy physical labour for **seven days** after your vasectomy. If your job does not involve this kind of work, you can go back sooner.

CAN NO-SCALPEL VASECTOMY BE REVERSED?

Yes, but reversal operations are expensive and not always successful. Current techniques are only slightly greater than 50% effective. If you are thinking about reversal, perhaps vasectomy is not right for you. Sperm banking is a good idea for almost anyone considering a vasectomy. If you have any doubts, please discuss other temporary birth control methods that are available with your family physician.

Benefits of Our Approach

QUICK AND EASY SCHEDULING. SHORT SINGLE-VISIT APPOINTMENT.

You shouldn't have to wait endlessly to get what is in reality a fairly simple procedure. You also shouldn't have to worry about the day of your appointment, or having your appointment in the impersonal environment of a hospital.

That is why we have two different upscale locations to ensure that you are scheduled within days to weeks instead of months.

Our surgeon is very experienced, and is happy to provide you with same day consultation and procedure. Follow-up is by phone, text or email. Compare with the multiple visits other physicians require in order to get a vasectomy:

1. Schedule first preoperative appointment
2. Schedule second appointment for vasectomy (if you even go back)
3. Schedule third appointment for a follow-up visit
4. Schedule fourth appointment for the after vasectomy semen sample testing

You can rest assured that your vasectomy with us will be safe and fast; in fact, the procedure is usually completed in about *10 minutes* and most men are in and out of the office in less than 45 minutes from the time they arrive.

YOUR VASECTOMY IS FREE

Our clinics also do not charge any extra fees. Your procedure is free to you because it is in an OHIP insured service. Compare that to the costs of ongoing contraception (birth control pills \$20-\$60 per month, condoms \$15-\$20 every 12 pack, or IUD \$180-\$400 every 4-5 years.)

OPEN-ENDED VASECTOMY TECHNIQUE: LESS PAIN, MORE REVERSIBLE

Our doctors perform an "open-ended" vasectomy technique, where the vas from the lower end of the tube is left open (uncauterized), while the upper end of the tube leading to the penis is cauterized.

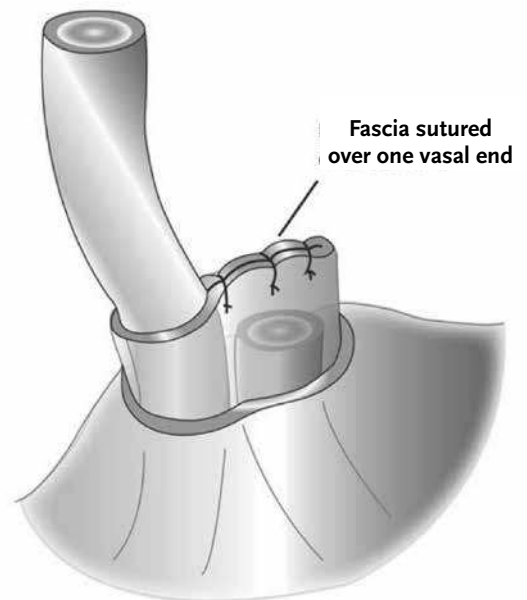
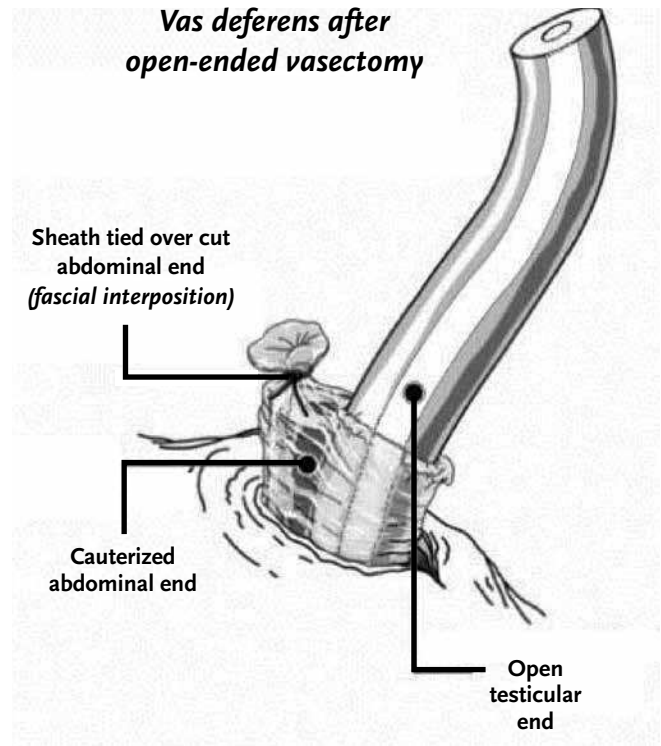
Historically, the lower end was closed off with cautery during a vasectomy because many providers were worried leaving the lower end open would cause more complications or failures. Instead, when the bottom end of the vas deferens is allowed to remain open, complications and failures are not increased. In fact, there appears to be less chance of post vasectomy pain and a higher chance of successful vasectomy reversal in the future.

Specifically, when the lower end of a vasectomy is closed off, some patients experience build up pressure in the lower end and this pressure can cause swelling and inflammation in the epididymis, especially in the first 2 weeks. With an open ended approach, sperm is allowed to “leak out” and eventually forms a small granuloma at the opening that serves as a metabolically active “recycling” centre that decompresses the epididymis. This constant recycling and removal of sperm may relieve pressure build up downstream, reduce damage, and increase vasectomy reversal success.

Not all vasectomists around the world perform this technique and prefer to cauterize both ends to ensure a successful vasectomy. At Gentle Procedures Clinics, our doctors are able to maintain a high success rate while also offering the potential benefits of an open-ended vasectomy.

FASCIAL INTERPOSITION: ADDING REASSURANCE

Our doctors also carry out what many studies describe as a crucial step, called *fascial interposition*. This step involves securing a sheath of healthy tissue between the divided ends to create a physical barrier between the two cut ends. We accomplish this using suture so that no foreign bodies such as metal clips are left in your scrotum. Vasectomy success rates are superior when fascial interposition is used.



**SEMEN TESTING:
PROFESSIONAL LABS ALL OVER ONTARIO**

No matter where you are traveling from, we recommend professional and accredited semen testing through **Lifelabs**. Locations are available throughout Ontario. This ensures that your semen samples are put through the strictest standards of testing to provide the highest confidence in your results. Please visit <http://locations.lifelabs.com> to find the lab nearest you.

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Patient Instructions

BEFORE VASECTOMY

1. Please review the entire vasectomy section of the website so you are confident and informed about your decision.
2. Please ensure you have a referral from your family doctor or walk-in clinic doctor. You have the option of consulting with our doctor before your procedure, or having same visit consultation and procedure.
3. Please review the “Benefits of Our Approach” section so you know how we operate and what sets us apart from other providers.
4. Please review the section “After Vasectomy” so you know what to expect after your procedure.
5. For **one week** prior to your surgery date, do not take any Aspirin, Anticoagulants (warfarin) or Non-Steroidal Anti-inflammatory Drugs (NSAIDs) such as Ibuprofen, Motrin, Aleve, Advil, Ibuprofen, Naproxen, or Diclofenac. These medications will thin your blood.
6. Please avoid any alcohol 2 days before the procedure.
7. Please shave the underside of the penis and entire scrotum the day before the procedure to save time. If you are not comfortable, we will shave for you.
8. On day of your surgery, please take a shower and cleanse thoroughly.
9. On the day of your surgery eat before your procedure (a normal breakfast or lunch) as those who don't are more likely to become lightheaded.
10. Take 2 tablets of extra-strength Tylenol when you arrive in our office.
11. Please arrive 15 minutes before for your appointment. We strongly recommend that you arrive with someone who can drive you home after your vasectomy.
12. Wear comfortable clothing. Bring 2 pairs of supportive underwear, some small ice packs, and something to drink after your procedure.
13. When you are in one of the surgical rooms, you will not be required to fully undress; you just need to lower your pants, lie back on the table and relax. One of our staff will place an elastic band or “lasso” around your penis to bring it out of the operative field, wash the scrotal area with antiseptic and place a surgical drape on your body.
14. You are now ready for your vasectomy. Our doctor will start by administering the local anesthetic. You will receive the no-needle anesthetic which feels like a flick of a rubber band and the freezing works instantly. This is how we manage to get your procedure done in 10 minutes or less and also significantly reduces the risk of injury to blood vessels in your scrotum.
15. You are welcome to bring and listen to any music/podcast or watch any programming or play any games on your mobile device during the procedure.

If you have any questions, feel free to discuss with your doctor during your procedure.

AFTER VASECTOMY

1. On the same day of your vasectomy, you should go home and rest for the remainder of the day and evening after the procedure. Minimize any kind of activity. Some men have no pain at all while many others have mild aches in the groin like being kicked in the testicles or abdomen. That's because the testes originate from the abdomen as an embryo and share some nerve supply. Anything in the scrotum may be perceived in the abdomen as well. This lasts on average for about 7 days, longer in some men (up to a few weeks).
2. You will have only one small wound less than 1 cm after your procedure. It may be anywhere from the base of your penis to anywhere on your scrotum. A little bleeding from the wound is normal. The wound will take about 7-10 days to heal.
3. You may take a daily shower the next day.
4. For the first 48 hours, take 2 tablets of extra-strength Tylenol every 6 hours and ice the area regularly (30 min on, 30 min off). Tylenol instead of anti-inflammatories like Ibuprofen is preferred because it does not increase immediate post operative bleeding risk which is most significant 48 hours after the procedures.
5. After 48 hours, take 2 tablets of 200mg Ibuprofen (400mg total) every 6 hours no matter how good you feel as this will reduce the post-surgical inflammation. Do this for a **minimum of five days**. You may continue up to two weeks if desired. If you get side effects, then of course stop the pills.
6. Please avoid any alcohol 2 days after the procedure.
7. Remember no sex or ejaculation for **7 days**. This avoids disrupting the surgical site. Blood in the semen or urine within the first month or two after a vasectomy is normal and no cause for concern.
8. Please call the medical laboratory to book your semen analysis as soon as you can after your procedure. Please remember to do your testing **3 months** post op, and to continue your current birth control methods until your test results are reviewed as a success.
9. For the first week, continue to avoid any exertion, exercise, extensive walking, climbing, jogging, or sports...you get the idea. In general, avoid lifting more than **15 lbs** (including babies or children) in the first week. After one week, when pain and tenderness are minimal, you may return to your usual activity but on the first day back start off at your usual workout.
10. It is normal to have some discoloration of the skin (blue and black) around the puncture site a few days after your vasectomy. This will gradually go away.
11. Some men will develop swelling and tenderness on one side or both after a few days or up to 3 months after a vasectomy. This is usually due to an exaggerated inflammatory response that

is often normal and necessary for sperm recycling and reabsorption. It is managed effectively with Ibuprofen 600mg 3 times a day for 7 days.

12. You might notice a lump on each side of your scrotum (sometimes up near the abdomen) after your vasectomy for the new few weeks. That is a scar where we cut and sealed your vas. It usually feels like a knot the size of a pea and may swell to the size of a marble and be tender for a few weeks after the procedure but then becomes smaller and non-tender.
13. At 3 months, follow up with your semen checks as outlined below. Again, continue birth control until our doctors review your test results. Call 1 week after testing to ensure we have received the results. You will want to achieve 20 ejaculations within the first three months of your vasectomy to flush out the existing sperm in your reproductive tract. Our office will contact you with the results of the testing, so you will not require an additional follow up appointment.

IMPORTANT NOTE REGARDING YOUR POST-VASECTOMY SEMEN ANALYSIS

Preparation

Please abstain from sex for **2 to 5 days** before you collect your specimen.

Call

While you can bring your specimen to any medical laboratory, please **call the lab of your choice immediately after your vasectomy** to confirm they can accept your semen analysis (they may send you to a different lab). When dropping off your sample, you must bring your lab forms, with your name, date of birth and care card number filled out with you, or they will not accept your sample. You should have received the lab forms from our clinic – contact us if you do not have them.

Collect

Collect the semen by masturbation only, and directly into a sealed, sterile specimen container. If you lose a portion of the semen, throw the container out and collect your specimen at another time. If you've misplaced the container, please get another one – ask for a urine analysis container. Please do not use any other type of container.

Drop It Off

Close the container tightly. Label it with your first and last name, date of birth, plus the date and time you produced the sample. **Deliver your specimen to the laboratory immediately (within 30 minutes) after collection**, keeping the container warm in your pocket or next to your body en route.

Follow Up

1 week after dropping off your specimen, please call us to ensure we have the results. Our office will review your results with you, so you don't have to book an appointment to do so.

