Editors Note: In past issues of the Review, we have reported on the serious side effects of many forms of birth control, including Norplant and quinacrine sterilization. The following article exposes the side effects of one of the most common forms of birth control — male sterilization, or vasectomy. Over 50 million men have had vasectomies, many without having been adequately informed of the possible negative effects. The author writes from his personal experience what can go wrong with a vasectomy.
Most men have heard horror stories of complications of vasectomies, dramatically affecting their enthusiasm to undergo a process where such results are possible, so doctors have made many efforts to downplay short-term effects. Doctors have even come up with an innocuous-sounding version of the procedure called a “no-scalpel vasectomy,” which is advertised to have minimized complications.

What often don’t get discussed are the substantial long-term consequences of vasectomy. It’s almost a dirty little secret of the field of urology. When I had my vasectomy in August of 1999, it wasn’t just a little uncomfortable; it was actually quite painful. By the time I started moving around again over the next few days, my constant pain was increasing.

Vasectomy: Short or Long Term Effects?

My urologist explained that I had suffered nerve damage as a result of my vasectomy, and he wanted to try out a couple of medications on me. Not being one to take medications, I asked how long might this go on. “Hang in there,” he said cheerfully, “This might take months.” Beyond this he clammed up and didn’t tell me much more, I think in the hope of medicating me through what he believed would be a brief encounter with chronic testicular pain. This didn’t turn out to be the case.

I didn’t do well on any of the medications prescribed, and in fact reacted so negatively that I ended up in the hospital a month after my vasectomy when my intestines started bleeding, causing incredible abdominal pain to accompany the testicular pain. It went from bad to worse. At that point, many people tried to convince me that I was one in a million, and that this kind of reaction just didn’t happen with vasectomies. After months of research, I found out that nothing could be further from the truth. I came across a wealth of research information on a little-discussed condition known as post-vasectomy pain syndrome. Other names that had been given to this condition over the years include congestive epididymitis and chronic post-vasectomy testicular pain.

What Actually Happened

After a vasectomy, the natural duct for sperm, the vas deferens, is closed off. The testicles continue to produce sperm at a rate of about 50,000 cells per minute. These sperm cells build up pressure in the epididymis portion of the testicles, which eventually ruptures from the pressure. Research results range from as low as 2 percent to as high as 33 percent of
vasectomy patients experiencing some form of long-term post-vasectomy pain.

What happens to all those sperm cells? For one, sperm burst out into places they were not naturally meant to be, and make their way into the bloodstream. Sperm cells are the commandos of the cell world and are naturally quite active and have very strong enzymes that make them capable of getting to and eating through the outer layers of egg cells. Sperm cells also have only half of a DNA strand in anticipation of joining with those aforementioned egg cells and making a new fetus. This is why a man’s body has a strong layer of tissue known as the blood-testes barrier. Vasectomy ruptures this barrier. A man’s immune system is not accustomed to the presence of these strong, active sperm cells in the bloodstream, and regards this as a major infection that needs to be ousted.

Autoimmune System Gone Wild

What follows is a crusade-like autoimmune response, wherein a man’s immune system starts making antibodies to attack his own cells. This assault is not just confined to the sperm cells themselves, but affects other cells and tissues as well. There’s no way to predict exactly what the reaction will be, but it is known that 75 percent or more of post-vasectomy men will begin to produce these antisperm antibodies, leading to auto-immune pathology in more than 50%. Many doctors characterize this reaction as harmless. But a good deal of medical
research says otherwise. According to one study in Finland, the “presence of sperm antibodies correlates with nearly every pathological condition of the male reproductive tract.”

Vasectomy and Disease

Numerous studies over more than 30 years have shown correlations between vasectomy and increased incidences of many diseases. The list of the diseases studied for links includes prostate cancer, rheumatoid arthritis, erectile dysfunction, chronic testicular pain, chronic inflammation, epididymitis, prostatitis, and testicular cancer. If that’s not enough, how about other reports of vasectomy resulting in increased incidences of recurrent serious infections, atherosclerosis, non-Hodgkin’s lymphoma and several other forms of cancer, diabetes, multiple sclerosis, migraine and other forms of headaches, liver dysfunction, generalized lymph node enlargement, and adrenal gland malfunction. According to H. J. Roberts, MD, who has done extensive research on the subject for more than 25 years, “no other operation performed on humans even approaches the degree and duration of multiple immunologic responses that occur in the post-vasectomy state.”

A few men will demonstrate immediate and significant responses to the presence of antibodies that form following vasectomy. This was my experience. Many other men will take months or years to manifest symptoms, which is why many doctors don’t look for the connection between vasectomy, the antibodies that result, and the diseases that occur later. Even in the case of chronic testicular pain that develops months or years following a vasectomy, many doctors will diagnose what appears to them to be epididymitis, which is often from the congestive effects of the procedure.

Let the Patient Beware

Why aren’t these facts disclosed and discussed more openly? For one, sterilization has become a huge industry with lots of social implications and money attached. Doctors may not want to critically examine a procedure performed so commonly since there are huge health and legal implications involved. Then there are those who just plain don’t want to believe it. A survey of 1,500 urologists in the US reported that 90 percent of the doctors would not change their practice of performing vasectomy, despite numerous reports of
vasectomy being linked to prostate cancer.3

This situation is summarized well by R. F. Raspa in the Journal of the American Family Physician: “Family physicians should be aware of the potential effects and complications of vasectomy so they can appropriately counsel patients seeking sterilization. Vasectomy produces anatomic, hormonal and immunologic changes and... has been reputed to be associated with atherosclerosis [hardening of the arteries], prostate cancer, testicular cancer and urolithiasis [kidney stones]. Complications of vasectomy include overt failure, occasional sperm in the ejaculate, hematoma [bruising], bleeding, infection, sperm granuloma, congestive epididymitis [another term for post-vasectomy pain syndrome], antisperm antibody formation and psychogenic impotence.”4 In light of many physicians reluctance to discuss such changes and complications, it would appear necessary to take a “let the buyer beware” approach as a patient.

Since my original vasectomy, I have undergone six additional surgeries and nerve blocks in an attempt to stop the chronic pain, including a four and a half-hour testicular reconstruction and vasectomy reversal. I have been offered 90 medications in conjunction with innumerable therapies. Some approaches have offered temporary relief, but none have provided a cure. Other men I’ve come in contact with who have experienced the same type of painful consequences from their vasectomy procedures have been dealing with the aftereffects for five to ten years and more. The negative effects of tubal ligation for women and many other long-term methods of birth control used by women are well known. Unlike vasectomies, though, this has been discussed openly for many years. Men and women should consider the possible substantial negative results before seeking surgical sterilization.

Don’t Mess up your Life

Friends and acquaintances, upon hearing what has happened to me, often remark, “Gee, I’ll bet that really messes up your sex life!” What I can tell you is that it really messes up your whole life, as anyone who has chronic pain will tell you. I have learned beyond a shadow of a doubt that it is much better to alter your attitudes and practices than your body for the sake of convenience.

Kevin Hauber is the author of If It Works, Don’t Fix It: What Every Man Should Know Before Having a Vasectomy. He has a website dedicated to the same topic at www.dontfixit.org
Endnotes


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