Abstract

Open-ended vasectomy was performed on one-hundred men. Sixty-three of them showed up for follow-up six months later. Spontaneous recanalisation had occurred in two. Sperm granuloma without orchialgia was found in 14 out of 59 men (23.9%). Twenty-one out of the 63 thought their sex life had improved, while 40 thought it was unchanged; only one man mentioned pain during intercourse since vasectomy. PIP: Open-ended vasectomy was performed on 100 men in Brussel, Belgium, ranging in age from 27-61 years old (average 35 yrs). A personal, social, sexual, and family history was taken before vasectomy and the patient was given information on the technique to be used. 63 of the men showed up for follow up 6 months later. Spotaneous recanalisation had occurred in 2, requiring repeat vasectomy, a failure rate of 3% Sperm granuloma without orchialgia was found in 14 out of 59 men (23.9%). 21 out of the 63 thought their sex life had improved, while 40 thought it unchanged. Only 1 man mentione pain during intercourse since vasectomy. Eveb with improved techniques the failure rate of open-ended vasectomy is likely to be higher than that of close-ended methods. Studies comparing different techniques of vasectomy show that bipolar electrocoagulation of both ends of the vas with fascial interposition appears to have a very low failure rate (0.0%) with spermatic granuloma formation incidence of 0.4% (author's modified).