

Let's Cut to the Chase

By Kevin Hauber

10/1/00

Here's some late breaking news if you're interested in a permanent form of contraception: There's an experimental procedure available that is likely to give you a permanent sterile state so that you can enjoy sex without needing to use any other form of contraception. This is a minor surgical procedure that can be performed in a doctor's office or a clinic. You may have some bleeding or swelling for a little while afterwards, but this will usually go away quickly so you can get on with your newly emancipated sex life. This sounds pretty good so far, doesn't it?

There are just a couple of things you ought to know before signing up for this experiment though. Three out of four of you who undergo this procedure will develop a permanent autoimmune reaction wherein your body will start to make antibodies that attack your own cells and tissues. Scientists and doctors aren't completely sure how this might affect your health, but there are reports of dozens of potential diseases that result from this type of autoimmune response including several forms of cancer, chronic infections and inflammation, sexual dysfunction and degeneration of genital tissues. This autoimmune reaction can last for years.

Three out of five of you will develop cysts in your genitals as a result of this procedure. The cysts can be quite painful and may need to be removed surgically. They may also recur and need to be removed again. This might make enjoying your sex life a little more difficult.

According to studies on the subject, up to one out of three of you (it cannot be predicted who) will encounter chronic genital pain as a result of the operation for reasons that are not fully understood. This pain can be occasional or constant and can substantially affect the quality of your life. The onset of this pain can occur days, months, or even years after the procedure, and is very difficult to stop. The pain may continue for years. In your desperation that results, doctors may propose removing substantial portions of your genitals in an effort to alleviate your suffering, however, but this does not guarantee that the pain will go away. Numerous medications may be offered also with no guarantee of a positive result, in fact, you may end up worse off. There are techniques available to reduce the chances of chronic pain from the procedure by a factor of three, but most doctors prefer to use another method.

The procedure has a documented failure rate of up to six percent, which is not that much different from

the failure rate for condoms. The chief difference is that you can take a condom off. Additionally, there can be damage to nerves and to blood and lymph vessels as a result of the surgery, which again may put you in the position of having doctors recommend more genital surgery and the removal of associated parts to correct these problems. Alternately, some doctors may tell you that you just have to learn to live with all this, and get along as best you can. After all, you took your chances, even though you probably didn't know what those chances were in advance.

How does all this sound so far? Would you like to schedule the procedure now? What experimental procedure am I discussing, you might ask? Why, vasectomy, of course. How do I know this to be true? Because I have lived many of the dramas of the results described above.

The potential results I have described have been documented in medical literature in various forms for nearly thirty years, yet remain largely undisclosed to the general public. Many doctors don't even know about this information, and many that do know choose not to say anything to the patient before performing the operation. Some doctors have spoken out about the health hazards vasectomies create, but have been drowned out by a chorus of others saying, "Don't worry about it."

Why would I call vasectomy experimental? After all, haven't millions of men undergone the procedure? Yes, but the long-term effects are still largely unquantified. One researcher phrased it this way: "Vasectomy can be considered a particular form of experimental autoimmunization."

My personal experience has involved five invasive procedures including the original vasectomy, a second vasectomy done by a different method attempting to mitigate the pain that resulted from the first one, a testicular reconstruction and vasectomy reversal, and several others. To date, I have received over 80 medications and tried numerous therapies in the process in an attempt to relieve the chronic genital pain that has gone on for more than a year and radiates throughout my body. I was told initially that my case was quite exceptional, but my contacts with other men since my vasectomy have convinced me otherwise. Researchers expect this phenomenon of chronic pain to increase as the population of over 50 million vasectomized men ages.

Why aren't these facts made plain? Well, for one they're controversial. Research on the subject has shown varied results, but there has been a consistent stream of dozens of research articles over the years, which give cause for caution and for warning beforehand. There are also economic and social forces

involved, as an entire industry has grown up around sterilization. Most men are extremely reluctant to discuss such highly personal issues and problems, fearing that it threatens their masculinity and believing they are alone in their circumstance. Then there are the legal implications, since recognizing these problems could lead to massive class action lawsuits. To me, this is like a male equivalent of failed breast implants for women with equally disastrous health consequences.

Speaking of women, this is not an effort to hand off the contraceptive hot potato either, since the effects of tubal ligation for women have been shown to often have problematic results including a high incidence of hysterectomy and chronic pain following the procedure. We need medical science to be truthful about the results of these procedures and help us come up with better methods of contraception. In the meantime, we need to modify our attitudes and sexual practices in regards to condoms and other methods.

Procreation is an important aspect of our lives. It is central to our humanity. It is time that the issue of complications due to vasectomy is discussed openly and honestly. The stakes are too high to do otherwise.

This is why I have written a book about the subject, based on my experience and the experience of numerous other men who have encountered similar circumstances and the medical research that helps to explain why it all has happened. I have titled the book [If It Works, Don't Fix It](#), and am currently pursuing its publication in an attempt to raise awareness about the issue.

This is important information if you have ever had or considered a vasectomy, or know of anyone who has. If you are interested in this subject or in receiving the book when it is published, please contact me by email at sadsacks@dontfixit.org. If you are a man who has experienced health problems following your vasectomy, please know that you are not alone and other patients and myself are in the process of forming an organization and Internet web site to help in any way possible and provide a forum for patients' concerns and discussion. If you contact me at the email address listed above, I will keep you informed as to the progress of this effort.