Female sterilisation

What is female sterilisation?
Your fallopian tubes are cut, sealed or blocked by an operation. This stops the egg and sperm meeting.

Tubes cut
Using rings
Using clips

What is the operation like?
There are several ways of tying the fallopian tubes together (ligation), removing a small piece of the tube (tying, securing, cauterising) or applying clips or rings.

This operation can be done in several ways. The main methods are laparoscopic and minilaparotomy.

Laparoscopy is the commonest method of female sterilisation. You will be given a general anaesthetic, or possibly a local anaesthetic. A doctor will make two tiny cuts, one just below your navel and the other just above the bikini line. They will then insert a laparoscope into the cuts. The laparoscope identifies your reproductive organs. The doctor will seal or block your fallopian tubes usually with clips or rings.

What if I become pregnant after sterilisation?
Your operation prevents pregnancy, but you may still become pregnant if you decide to have further children. While you are infertile, you can get pregnant again and have children. It is not recommended for anyone else in your family who may have planned to have children.

Where can I go for advice on sterilisation?
Your doctor or GP will be able to help you. If you do not wish to see your own doctor about sterilisation, you can get advice and free NHS waiting lists for sterilisation can be quite long depending on where you live. You can call the operation time properly.

How do I find a family planning doctor or clinic?
Contraception is given through the NHS, private or social clinics.

- You can find a list of GPs in libraries, personal advice centers or from health authorities. Local family planning advice centers, local family planning advice centers, local family planning advice centers, local family planning advice centers, local family planning advice centers.

- You can get a general advice on family planning centres on website, health centres, family planning advice centers, health centers, family planning advice centers, health centers.
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Male and female sterilisation

Sterilisation works by stopping the egg and the sperm meeting. This is done by blocking the Fallopian tubes (which carry sperm from the ovaries to the uterus) or by using a device that stops sperm from the testicles to reach the semen.

Sterilisation is only for people who are sure they do not want to have more children. Sterilisation is a permanent method of contraception. There is no operation to reverse sterilisation, but it is quite expensive and may not work. Many health authorities will not pay for reversal on the NHS.

How effective is sterilisation?

How effective an contraceptive is depends on how well you use it and whether you follow the instructions. If you stop using the device, it is no better than no contraception at all.

Male sterilisation (vasectomy)

Vasectomy – once a vasectomy is performed, there is no chance of getting pregnant or becoming a father. Male sterilisation involves the surgical removal of the vas deferens (the tubes that carry sperm from the testicles to the semen).

Female sterilisation – the overall failure rate is around 3% in 200 menstrual cycles performed on women who have had their tubes tied. Pregnancy rates are not the same as contraceptive failures. In 200 months of use, 250 women would become pregnant.

What are the advantages of sterilisation?

- It is permanent.
- It is a simple method of contraception.
- Sterilisation has no further impact on the female after the operation.
- Sterilisation is a simple operation and takes about 15-20 minutes.
- It is more effective than female sterilisation.
- It can be performed under local anaesthesia.
- There are no side effects.
- Sterilisation is reversible in a high percentage of cases.
- Sterilisation does not protect against sexually transmitted infections.

Can anyone be sterilised?

Sterilisation is for people who do not want any more children. Women who are pregnant or breastfeeding are not eligible for sterilisation. This is because they may not be able to have the operation until after the baby is born. However, a woman with a goitre or a heart problem may be eligible for sterilisation.

What is the operation like?

The operation can be done in a hospital or a clinic. The operation is carried out under general anaesthesia. The typical operation time is about 15-20 minutes. The operation is usually done in a hospital, district hospital, or private hospital.

Are there any problems?

Sterilisation is a relatively safe operation. However, there may be some risks associated with the operation, such as infection and bleeding.

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