Wrightington, Wigan and Leigh Teaching Hospitals
NHS Foundation Trust

Female Sterilisation

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Female Sterilisation

Patient Information

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Introduction

Sterilisation is a permanent method of contraception that should only be considered by those who are absolutely sure that they will never want any further children. In women, the fallopian tubes are blocked, cut, or removed by means of an operation, so that the sperm and the eggs will not meet and fertilise thereby causing a pregnancy.

Female sterilisation is not always as reliable as other methods used correctly, especially male sterilisation, which is a safer and more effective operation.

Alternative methods of Contraception

Method	Number of pregnancies per 1,000 women using method correctly for 1 year
Combined Contraceptive Pill	15 (2 – 30)
Progesterone only pill (mini pill)	35 (14 – 43)
Copper IUCD (coil)	3 (1 – 5)
Progesterone IUCD (Mirena coil)	1 (0 – 2)
Depo-Provera (pill injection)	3 (0 – 10)
Implanon (implant)	0.5 (0 – 0.5)
Male Sterilisation (Vasectomy)	1 (0 – 2)
Female Sterilisation	2 (0 – 5)

Sterilisation is the only method which is permanent.

Female sterilisation does not make periods either better or worse and if you have period problems other methods of contraception may be more suitable.

Method of performing a Sterilisation

Laparoscopic (Operation in theatre with a general anaesthetic)

In some cases, the complication can be sorted out without any further incisions but occasionally it is necessary to perform an open operation. It is important to realise that, although complications are rare, they can occasionally be fatal; for every 12,000 sterilisations performed one lady will die (0.00008%).

Reversal of a Sterilisation

A sterilisation operation should be regarded as permanent. Although reversal of a clip sterilisation can be attempted, success rates are often low, and the procedure is not offered under the NHS. If the tubes are completely removed reversal is never possible.

Failure of Sterilisation

Even if the procedure is performed entirely correctly pregnancies can occur after sterilisation and for clip sterilisation this happens in about 1 in 200 cases for the laparoscopic method compared with 1 in 2000 for vasectomy. It can occur at any time after sterilisation, even many years later.

Failure of sterilisation is more common, even if the tubes are completely removed, if you are or have recently been pregnant at the time of the sterilisation. For this reason, combined with the fact that you are more likely to regret the procedure if it is done during delivery or close to the time of the pregnancy, it is usually better to return for it to be done about 3 months later.

If a pregnancy does occur following sterilisation there is an increased chance that it will be an ectopic pregnancy (pregnancy in the tube) since the tube will have been damaged by the sterilisation procedure and may therefore trap the egg inside the tube.

As this can be a dangerous condition it is very important that you seek advice immediately if you suspect that you are pregnant after sterilisation.

Even if the whole tube is removed an ectopic pregnancy can still occur in the cut end of the tube.

Female sterilisation is not always as reliable as other methods used correctly, especially male sterilisation, which is a safer and more effective operation.

Contraception around the time of Sterilisation

A sterilisation operation will not prevent a pregnancy that has already occurred. Sterilisation is contraceptive because it stops the eggs passing along the tubes to the uterus. If an egg has just been released before the tubes are blocked or removed it could still become fertilized. It is therefore very important that you do continue using contraception until the next period after a laparoscopic sterilisation operation.



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