

Tubal ligation

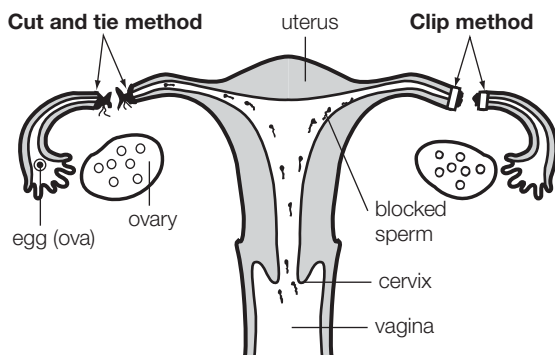
What is tubal ligation?

Tubal ligation is a sterilisation operation in which the Fallopian tubes are cut off or blocked. This stops the sperm reaching the egg in the tube, which is the normal site of fertilisation.

How is the operation done?

Tubal ligation is usually done under a general anaesthetic. It is necessary to get inside the abdomen. This is done by one of several methods, most commonly by a small cut just above the pubic hair line or through a special tube called a *laparoscope*. In the laparoscopic method the tube is passed through a small cut about 1 cm long made just below the navel, and the tubes are located through a powerful light system. Rings or clips can be attached to the two tubes or the tubes can be burnt (*cauterised*) and the ends tied off. The ring or clip method makes reversal easier if necessary later on.

In other methods the surgeon picks up each tube through the wound, removes a section of tube and ties the ends.



Tubal ligation

How long is the hospital stay?

This is usually 1 to 2 days, depending on the operation method and the policy of the hospital.

How effective is tubal ligation?

It is very effective, but failures do occur in about 1 in 200 operations. Some methods have a better success rate than others.

Does tubal ligation affect sexual function?

A normal sex life can resume once the effect of the operation is over. Many women find that their sex life is better without the worry about getting pregnant.

Does tubal ligation affect menstruation?

Menstruation continues as usual, but some women report that their periods are heavier, especially if large pieces of tube are removed. However, the modern laparoscopic methods do not appear to cause heavier menstruation.

Does tubal ligation cause weight gain?

No, it does not cause weight gain because it has no effect on hormones or appetite.

Can sterilisation be reversed?

The cut tubes can be rejoined by microsurgery, but there is no guarantee of regaining fertility. The successful pregnancy rates vary between 30 and 80%, depending on the technique used. The simple clip method gives a better chance of reversal.

Tubal ligation, however, should be regarded as permanent and irreversible and not entered into lightly.