

# FEMALE STERILISATION



## After the operation

- ♀ Rest for a couple of days.
- ♀ No heavy work for a few days.
- ♀ Use a pain reliever such as paracetamol (not aspirin) if necessary.
- ♀ Report any severe pain, swelling or fever to the clinic/hospital immediately.
- ♀ At the end of a week she should be fit to resume normal work, sport and sexual activity.
- ♀ Menstruation should return to normal once the effect of hormonal contraception wears off.
- ♀ Operation is effective immediately.
- ♀ No method is guaranteed 100% effective. Even after sterilization there is a tiny risk of pregnancy, but tubal occlusion is one of the most effective forms of contraception for women.

**Sterilisation prevents pregnancy but not sexually transmitted infections (STI's), including HIV/AIDS.**

**Therefore, if at risk use a condom!**

## What can a woman do to prevent a pregnancy until she is sterilised?

Ask her doctor or family planning sister to advise her about a suitable method, eg: Pill, Injection or IUD.

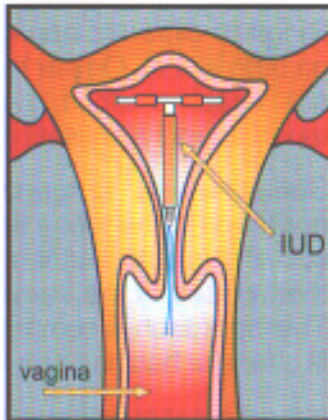
Ask her partner to use condoms or abstain from intercourse until after the operation.

## Alternative Contraception

All women considering sterilisation should be aware that there are other long acting highly effective contraceptive options available which prevent pregnancy as effectively as sterilization without an operation. One such method is the Copper Intra Uterine Device (IUD).

## Intra Uterine Device (IUD)

The Copper IUD is a small T shaped device that is fitted into the uterus (womb) through the cervix to prevent pregnancy. It is active for 10 - 12 years after which time it should be replaced with a new device. It is a safe and reversible method of contraception, suitable for many women, which is as effective as female sterilisation.



- ♀ Ask at your local clinic or doctor's surgery. ♀

## Sterilisation may not be suitable for you right now because you are:

- In poor health and unable to have an operation.
- Too young or too old for the sterilisation procedure.
- Not ready for a permanent form of contraception as you *may* want another child in the future.
- You feel pressured into making the decision.

SMALLER FAMILIES

BIGGER OPPORTUNITIES

Association for Voluntary  
Sterilisation of South Africa



## What is female Sterilisation?

Tubal occlusion, or having the tubes closed, is the permanent female surgical contraceptive operation.

It is a simple operation in which a surgeon closes the fallopian tubes which carry the eggs from the ovaries to the uterus (womb).

When the tubes are closed, the man's sperm cannot swim through to meet with and fertilise the woman's egg. This way pregnancy is prevented.

Tubal occlusion is a small, safe and simple operation. It can be done under local or general anaesthetic depending on the circumstances.

No organs are removed: it is not the same as a hysterectomy, only the tubes are closed.

The ovaries remain intact and continue to produce female hormones. This gives the woman her normal femininity and feelings for sex.

The uterus remains, so menstruation will continue until the age that this stops naturally. It does not affect the sex act.

## Why does a woman choose voluntary sterilisation?

- ♀ She has all the children she and her partner ever wish to have.
- ♀ She and her partner do not want to use other methods of contraception.
- ♀ She wants to enjoy sex without fear of unwanted pregnancy.
- ♀ If further pregnancy carries a health risk to either mother or baby.

*Have only the children  
you can afford*

## How is the operation done?

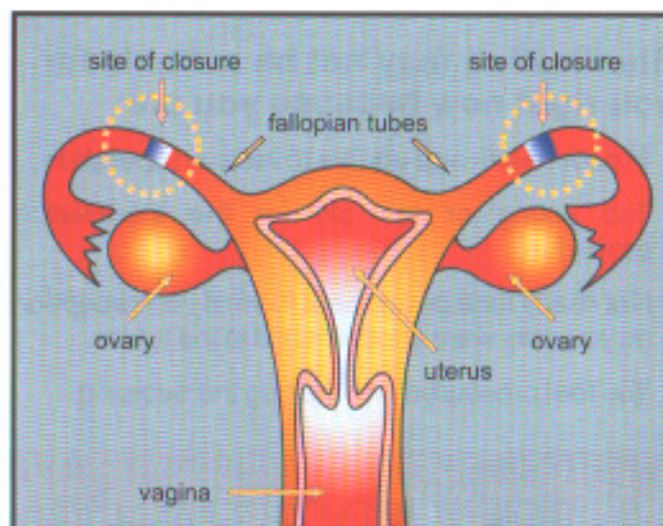
The surgeon uses either an injection of local anaesthetic to prevent pain, or a general anaesthetic which puts the patient to sleep.

The tubes may be reached through one or two tiny cuts in the tummy using an instrument like a telescope with a light on the end to identify the tubes.

Rings or clips are applied which close the tubes on both sides. One or two self-absorbing stitches are used to close the skin. This is called laparoscopic sterilisation.

Sometimes a surgeon will choose a direct approach to the tubes through one slightly bigger cut – this is called mini-laparotomy. The tubes are then closed in the same way with clips or rings. This approach is commonly chosen if the woman is obese or has had previous abdominal surgery.

If the operation is done soon after the birth of her baby the tubes are simply cut and tied. The woman may go home the same day or stay overnight in hospital to recover.



## When can a woman be sterilised?

When she has all the children she and her partner ever want and when they feel ready for a permanent form of contraception.

Many women choose to be sterilised after the delivery of their last baby, whilst still in hospital.

This decision should be carefully considered during the pregnancy – not left to the last minute.

## Where can a woman go if she wants to be sterilised?

Ask at the local health centre for referral to the nearest service point, or ask your family doctor or gynaecologist.

The operation is free of charge at some state health facilities in South Africa.

**REMEMBER!**  
Sterilisation should be considered a permanent and irreversible method of contraception.

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