

Notes from a vasectomy

By Sasha Sanders

I went to see a urologist. You might be wondering, as I did, exactly what it is a urologist does. Well, a urologist may well get to see Uranus, but it is primarily your urinary and genital functions he is interested in. I say *he* not in a presumptuous, sexist kind of way, but because (I'm guessing) most people who see a urologist for the same reason I saw one would want him to be a he. I had a vasectomy.

My second (and almost certainly last) daughter was two months old when I went to see him. This does not mean it was a rash, quick or impulsive decision. It wasn't. I was just doing what I had for many years planned and expected to do. I saw no reason to delay the inevitable. And I had no reservations about the procedure.

Neither, apparently, did my wife's gynaecologist, who enthusiastically referred us to a colleague in the same hospital, suggesting we "strike while the iron was hot" (an odd choice of metaphor, I thought: considering the sleeplessness, exhaustion and irritability associated with parenthood two months in, there really was no iron to speak of, and if there was, it certainly wasn't hot). But let me not digress, lest it seem I am reluctant to talk about this episode in my life. I am not. After all, here I am, talking about it, as I have been since that first consultation with Dr. Scissorhands, when talk about it is pretty much all we did.

I asked the usual questions. Does it hurt? Are there any side effects (apart from, of course, never again being able to have children)? Will I still ejaculate? Does medical aid pay? And he gave me the usual answers. No, it shouldn't. No, there shouldn't be. Yes, you will. Yes, they should. He told me that the procedure takes 20 minutes, that it involves cutting and cauterising my tubes,

and that it can be done under local or general anaesthetic. Oh, and that I would have to shave. Yes, my balls.

There was a brief moment during which I considered this last little detail. Sensing an awkward silence, the doctor said, “the nurse can do it, but it’s better if you do it yourself”. There was another brief moment before I said, “how hot is the nurse?” And then another, before *he* said, “it’s better if you do it yourself”.

Two truths to share with you at this point. Truth one, I was kind of looking forward to shaving my balls. It’s the sort of thing I think you should try once in your life. But you should do it when you are young and stupid, and at 36, I had missed that boat. Here was an authentic excuse to get on to it. Truth two, shaving my balls was probably the scariest part of the whole thing. You want to be very, very, *very* careful when you are shaving your balls. I took it slow, and that still wasn’t enough time. So I had a second shave the night before the procedure, and a third early the next morning. (For the record, the doctor was satisfied with my efforts.) One last thing to tell you if you’ve never shaved: it’s not so much itchy, like everyone says, as it is prickly. Weird, novel, let-me-have-another-feel prickly. And, surprisingly, cold. It’s amazing how insulating a few little ball hairs can be.

However, I’ve left out the chunk of time that came between truth one and truth two. This was the chunk of time during which I told family, friends and colleagues of my honourable intentions. The chunk of time during which I expected to be praised for being a modern man and considerate husband. The chunk of time during which I discovered that, however common it has become, male vasectomy is still widely regarded as an oddity. Men balked either in

chauvinistic arrogance or internalised pain or imagined emasculation. Women gasped, asking “are you sure?” Concerned family members simply, directly, wondered “why”?

Partly, It’s the permanence of the thing. Although reversal of male vasectomy is possible, it’s not always successful, so you have to consider it to be for life. Somehow, the same questions don’t seem to get asked of women (I don’t think) – perhaps because of menopause, perhaps just because it is (or was) more common – so perhaps the implication is that men should be capable of producing offspring for as long as they live. Or, rather, that it’s abnormal not to be able to.

However, none of this bothered me as much the other question that was asked: what if you want more children? Well, I don’t. Yes, but what if you do? And this takes you into an uncomfortable place. A place where you are forced to consider the possible circumstances under which you might want more children. And those are tragic circumstances. Specifically, the death of your wife or children, or both. This is not something you want to think about. But what felt even worse than considering these circumstances was the sense that, by deciding not to have the vasectomy, I would in effect be planning for them.

The truth is, of course this awful possibility does exist. If I were to heed it, I would never have a vasectomy. Well, not for another 30 years or so. I chose not to heed it. I chose not to devote energy and emotion to a horrible, ugly “what if” scenario. I just don’t want to be spending time and energy thinking about life’s worst possibilities. Maybe it’s denial. Maybe it’s irrational. I’m comfortable with that.

Now back to the story. I've shaved. (Three times.) I've been allowed to eat breakfast, having decided to have a local rather than general anaesthetic. (I decided this not so as to be able to eat breakfast, although I do love breakfast, but so as to be able to leave the hospital immediately and not have a two-day recovery period.) I've checked in, undressed and tried (unsuccessfully) to tie the ribbons at the back of the standard hospital-issue gown that exposes Uranus. I've been wheeled upstairs to the pre-op waiting area. As there is very little to do here to kill time, and because nobody told me to bring a book, and because one can't really scratch one's hairless balls in the company of nurses and orderlies, I peruse the hospital forms. I read my name, age, procedure, diagnosis. The diagnosis is most un-medical. It says "family complete". Which I suppose is reasonable. Not altogether clinical, but reasonable.

The time comes. Doctor Nimblefingers, who I have met only once, briefly, and will see again only once after that, briefly, gets intimate with me in a way my wife never has and never will: he gives me four small injections and, five minutes later, makes a small incision near the top of my scrotum. It would be wrong to say the anaesthetic is to stop you feeling anything, because you do feel something. Prodding, fiddling, poking. But, I'm happy to say, no pain. By the way, while you do feel something, you can't see a thing. You're on your back, looking straight up, with a curtain hanging above your chest to keep your private parts private from you.

Half an hour later, cut up but sewn up, the nurse approaches me with one of those metal, kidney-shaped hospital bowls. "Thought you might want to see your bits", she says. It would be more accurate to say my "teeny bits", because

they were. Incy wincy teeny weeny brownish little miniature chicken sausages is what they looked like. I thanked her, which felt sarcastic but sounded genuine. I was brought up to be polite.

After a cup of coffee, a sandwich and some admin forms, I was driving myself home. The next few days were kind of bruised, a little sensitive, but far from excruciating.

And now here I am, waiting to enjoy the fruits of my efforts. Because there is a little wait. In two months I have to produce a semen sample so the pathologists can do whatever it is they do to determine if my sperm count is sufficiently low not to be able to reproduce. This was something Dr Tubecutter had told us about during that first consultation, and we had imagined what might need to happen. A tastefully decorated room with a choice of girly mags, porn DVDs and a lockable door, perhaps? The kind of thing you see in the movies? No such luck and nothing as glamorous or exciting. At the follow-up consultation a week after the procedure, I was handed a sterile little container into which I will need to ejaculate a few months from now. Then I will have an hour to rush the container to the lab and hand it to a lady or gentleman across the counter. "Hello!" I'll say cheerfully, "I've just cum into this little jarry-poo here as you can see, and, well, it's for you!" Oh, the shame. I wondered if Dr Uranus enjoyed saying he'd "leave the logistics" to me... my options are (a) do it at work, or (b) find a few romantic minutes at home one morning, in between changing nappies and cleaning porridge of the walls. I suppose I could spend a little quality time in a bathroom at the hospital. Or walk into Adult World in broad daylight and find me a nice, clean booth.

Perhaps all those people who reacted so unfavourably to the news of my vasectomy knew something I didn't. Perhaps this little quandary is the real reason they asked me what the hell I was thinking.