

# Surgical Birth Control Options

## What are the surgical birth control options?

The most common surgeries to prevent pregnancy are tubal ligation (getting both fallopian tubes tied) and salpingectomy (removing both fallopian tubes). Fallopian tubes are a part of the female reproductive system. The fallopian tubes allow eggs to travel from the ovaries to the uterus. Removing or tying fallopian tubes permanently prevents pregnancy from sexual intercourse.

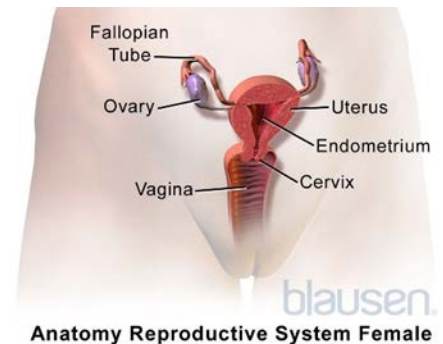
## What is a tubal ligation?

This is also known as having your “tubes tied”. Both fallopian tubes are cut or blocked. They are not removed. This surgery is usually done in the hospital after a person delivers their last child or in an outpatient surgery center.

Tubal ligation is not 100% effective in preventing pregnancy. Up to 1-2% of people who have a tubal ligation still get pregnant.

Tubal ligation increases the risk of an ectopic pregnancy. This is a pregnancy that occurs outside the uterus. This can be a life-threatening diagnosis.

A tubal ligation may be reversed by another operation to reconnect the fallopian tubes. But this often does not work and can be very expensive.



## What is a Bilateral Salpingectomy?

Salpingectomy to prevent pregnancy is the complete *removal* of both fallopian tubes. It is more effective at pregnancy prevention than tubal ligation. A bilateral salpingectomy is not reversible. Pregnancy after bilateral salpingectomy is only possible with in vitro fertilization (IVF).

## Why might someone decide to have a Bilateral Salpingectomy instead of a tubal ligation?

Most ovarian cancers do not start in the ovaries as was once thought. Scientists recently discovered that most ovarian cancers start as tiny tumors in the ends of the fallopian tubes. Ovarian cancer is usually diagnosed when the cancer has spread and chances of survival are lower. There is no screening test. People who want permanent surgical birth control might choose bilateral salpingectomy (fallopian tube removal) to decrease their risk of getting ovarian cancer.

Research has shown that bilateral salpingectomy is more effective in reducing the risk of ovarian cancer than having your tubes tied. Removing both fallopian tubes can reduce the risk by at least 65%.

## What are common benefits and risks of these procedures?

	Tubal Ligation	Salpingectomy
Benefits	<ul style="list-style-type: none"><li>• Prevention of Pregnancy</li><li>• Reduced risk of ovarian cancer <b>by 25 percent</b></li></ul>	<ul style="list-style-type: none"><li>• Prevention of Pregnancy</li><li>• Reduced risk of ovarian cancer <b>by 65 percent</b></li></ul>
Common Risks/Complications	<ul style="list-style-type: none"><li>• Bleeding</li><li>• Infection</li><li>• Injury to organs in the abdomen</li><li>• Side effects from anesthesia</li><li>• Scar tissue</li><li>• Chronic pain</li><li>• Need for a longer incision</li><li>• Hernia</li><li>• Ectopic pregnancy (when a fertilized egg grows outside of the uterus)</li><li>• Failure: An estimated 1 out of every 200 women will become pregnant after tubal ligation.</li></ul>	<ul style="list-style-type: none"><li>• Bleeding</li><li>• Infection</li><li>• Injury to organs in the abdomen</li><li>• Side effects from anesthesia</li><li>• Scar tissue</li><li>• Chronic pain</li><li>• Need for a longer incision</li><li>• Hernia</li><li>• Lower risk of ectopic pregnancy than tubal ligation</li><li>• Most research has shown that having your fallopian tubes removed will not result in the early onset of menopause because the ovaries are left in place.</li></ul>

### Take home message:

Removing both fallopian tubes has been shown to be more effective in reducing the risk of ovarian cancer. This is important because we do not have a screening test for ovarian cancer. Ovarian cancer affects 1 in 78 women and is one of the top five causes of cancer related death. Ovarian cancer prevention can save lives.

This information is not intended as a substitute for professional medical care. Always follow your healthcare professional's instructions.