



TUBAL LIGATION (Female Sterilization)

What is a Tubal Ligation?

Tubal ligation, commonly known as “getting your tubes tied,” is a surgical sterilization technique for women. This procedure closes the fallopian tubes, and stops the egg from traveling to the uterus from the ovary. It also prevents sperm from reaching the fallopian tube to fertilize an egg. In a tubal ligation, fallopian tubes are cut, burned, or blocked with rings, bands or clips. The surgery is effective immediately. Tubal ligations are 99.5% effective as birth control. They do not protect against sexually transmitted infections, including HIV/AIDS.

Procedure

A tubal ligation is a relatively simple out-patient surgery done in a clinic, doctor’s office, or hospital. It can be performed under local or general anesthesia. Mini-laparotomies and laparoscopies are the two most common techniques for female sterilization. Other procedures include laparotomy, culpotomy, culdoscopy, hysteroscopy, and hysterectomy. Each procedure carries different risks and benefits. Be sure the clinic discusses surgical options with you, describes the risks, and answers all of your questions before the surgery.

In the laparoscopy procedure, the abdomen is filled with carbon dioxide gas so that the abdominal wall balloons away from the uterus and tubes. The surgeon makes a small cut just below the navel and inserts a laparoscope, a small telescope-like instrument. A second incision is made just above the pubic hairline to allow the entrance of the instrument that will cut, sew or burn the tubes. The surgery takes about half an hour.

There may be up to several months delay between your request for surgery and the day it is performed. You may want to consider other birth control methods in the meantime. Young women with no children may have difficulty finding a surgeon to perform the procedure.

After surgery, it is recommended that women take 2 to 3 days off and only perform light activities for a week. Sexual activity can start again when a woman feels comfortable, usually after a week. Women who have surgery performed through their vagina are advised not to put anything into their vagina for 2 weeks to avoid infection.

Your Health

Although pregnancy is unlikely, there is a slightly higher risk of ectopic pregnancy after a tubal ligation. An ectopic pregnancy occurs when a fertilized egg attaches and grows outside the uterus. This can be very dangerous and requires immediate medical attention.

Abnormal bleeding and bladder infections are risks after tubal ligations. Each type of surgery also involves different risks.

Some women report having post-tubal sterilization syndrome. The symptoms include irregular and painful periods, mid-cycle bleeding, or no periods. While some physicians believe there is no evidence that this syndrome exists, others believe more research should be done.

Women who have reversal surgery and become pregnant have a higher chance of ectopic pregnancy.

Future Fertility

Tubal ligation is considered a permanent method of birth control. Surgery to reverse a tubal ligation is not always effective. In addition, reversals are both difficult and expensive.

Sexuality

Women are fully able to enjoy sex after a tubal ligation. Usually, hormone levels and a woman’s menstrual cycle are not noticeably changed by sterilization. Ovaries continue to release eggs, but they stop in the tubes and are reabsorbed by the body. Some women experience improved sexual pleasure because they are less worried about becoming pregnant.

Advantages

- ◆ Permanent birth control.
- ◆ Immediately effective.
- ◆ Allows sexual spontaneity.
- ◆ Requires no daily attention.
- ◆ Not messy.
- ◆ Cost-effective in the long run.

Disadvantages

- ◆ Does not protect against sexually transmitted infections, including HIV/AIDS.
- ◆ Requires surgery.
- ◆ Has risks associated with surgery.
- ◆ More complicated than male sterilization.
- ◆ May not be reversible.
- ◆ Possible regret.

Deciding

Tubal ligation is considered permanent sterilization. The decision to have it done should not be made lightly. Ask yourself: Would you change your mind if major changes in your life occurred, including a separation, or even the death of a partner or child? Consider as many possibilities as you can before making your decision. Know your options.

History of Abuse

Sterilization has a long history of abuse in the United States and around the world. It was once common to perform sterilizations on all handicapped women. In the past, many poor women and women of color were refused medical care unless they agreed to be sterilized. Sterilization has often been proposed as a solution to poverty. Forced sterilization is a violation of human rights.

Emergency Contraception (The “Morning After” Pill – “Plan B” – “EC”)

You can prevent pregnancy *after* sexual intercourse by taking Emergency Contraception pills (Plan B). Plan B works by giving the body a short burst of synthetic hormones that disrupt the hormone patterns needed for a pregnancy to start. Emergency Contraception is most effective in the first 24-48 hours after unprotected intercourse, but it can work for several days.

To find Emergency Contraception, see this website: ec.princeton.edu. If you already have birth control pills in your possession, this website explains how to use them as emergency contraception.

In Washington State, you can get Plan B directly from your pharmacy. Call ahead to make sure they have it in stock. Some women are buying Plan B in advance (it costs around \$35-50) so they will have it on hand if they need it.

More Info

- www.avert.org - to avert HIV and AIDS
- *Our Bodies, Ourselves.* www.ourbodiesourselves.org
- Cervical Barriers Advancement Society www.cervicalbarriers.org
- Feminist Women’s Health Center www.FWHC.org
- www.Birth-Control-Comparison.info
- Carol Downer's [woman-controlled birth control](http://www.woman-controlled-birth-control.org) and self help website