



What is Female Sterilisation?

Female sterilisation is a **permanent form of contraception** that prevents pregnancy. It is performed using **keyhole surgery (laparoscopy)**, where a small clip is placed on each **fallopian tube** to block the eggs from meeting sperm.

Another option is **bilateral salpingectomy**, where the **fallopian tubes are completely removed**, offering permanent contraception and additional health benefits.

◆ **This procedure is permanent and should only be considered if you are certain you do not want more children.**



How is the Procedure Done?

✓ The operation is performed under **general anaesthesia** and takes about **45 minutes**. ✓
A **small telescope (laparoscope)** is inserted through a tiny cut in the belly. ✓ **Gas is used** to inflate the abdomen for better visibility. ✓ Depending on the chosen method:

- **Tubal occlusion:** Clips are placed on the fallopian tubes to block them.
- **Bilateral salpingectomy:** The fallopian tubes are completely removed. ✓ The gas is removed, and the skin incisions are **stitched closed**.

◆ **This procedure does not affect your menstrual cycle or hormone levels.**



Recovery After Surgery

✓ You will be monitored for **pain, nausea, or bleeding** after surgery. ✓ Most women go home the **same day**. ✓ Expect mild **abdominal discomfort, bloating, or shoulder pain** from the gas used during surgery. ✓ **Pain relief (e.g., paracetamol, ibuprofen)** will be prescribed. ✓ A follow-up appointment may be arranged if needed.

◆ **You can return to normal activities within a few days, but avoid heavy lifting and strenuous exercise for about a week.**



Bilateral Salpingectomy vs. Tubal Occlusion

✓ Benefits of Bilateral Salpingectomy

- **More effective than tubal clips**, as it completely removes the tubes.
- **Reduces the risk of ovarian cancer**, as research suggests fallopian tubes may play a role in its development.

- Eliminates the small risk of tubal clips failing and leading to pregnancy.

⚠️ Risks of Bilateral Salpingectomy

- Slightly longer surgery time compared to tubal clips.
- Potentially more discomfort during recovery, but still a minimally invasive procedure.
- Irreversible – Reversal is not possible, and pregnancy can only be achieved with IVF.

⚠️ General Risks of Female Sterilisation

As with any surgery, there are risks:

Common Risks

✅ **Mild pain, bruising, or bloating** ✅ **Infection** – Treated with antibiotics if needed
✅ **Small risk of method failure** – If the tubes do not fully seal, pregnancy can still occur (rare) ✅ **Regret** – If you change your mind, pregnancy would require **IVF**, as reversal is usually unsuccessful

Less Common but Serious Risks

- **Bleeding** – Rarely requires a blood transfusion
- **Injury to nearby organs** – The **bladder, bowel, or blood vessels** could be damaged, requiring further surgery
- **Risks from anaesthesia** – Rare complications include **blood clots (DVT/PE), lung infection, or strain on the heart**

! Important Considerations

◆ **This procedure is permanent** – If you are unsure, consider long-term but reversible contraception options such as an IUD or implant. ◆ **Sterilisation does not protect against sexually transmitted infections (STIs)** – Use condoms if needed. ◆ **Failure is rare but possible** – If pregnancy occurs, it may be an **ectopic pregnancy**, which is a medical emergency.

📖 Further Information & Support

For more details, visit: 📍 **Queensland Health – Contraception & Family Planning**: www.health.qld.gov.au 📍 **RANZCOG (Royal Australian and New Zealand**

College of Obstetricians and Gynaecologists): www.ranzcog.edu.au 📌 Northern Health –
Women's Health Services: www.nh.org.au 📌 Your GP or healthcare provider

◆ If you have questions about female sterilisation or other contraception options, speak with your doctor. 💙