

Sterilisation (Tubal Ligation) at Caesarean Section

Patient Information Leaflet

This information leaflet has been developed to support discussions with your healthcare professional regarding sterilisation at Caesarean section, also known as a C-section.

What is sterilisation?

Sterilisation is a permanent way of preventing pregnancy. It usually involves having an operation.

You could consider sterilisation at the time of caesarean section birth, if you:

- decide you do not want more children
- wish to use a permanent method of contraception

How is the sterilisation done?

During the caesarean section, you can have tubal ligation performed. The fallopian tubes are a pair of tubes along which your eggs travel from the ovaries to the womb (uterus). Tubal ligation is when we close the fallopian tubes by cutting and tying them.

This means that your eggs can no longer be fertilised by sperm through sexual intercourse. The egg dissolves inside you and your periods happen as usual.

Are there additional risks and complications?

The procedure adds around 10 to 15 minutes of operating time to a planned caesarean section. Recovery process is identical to recovering from a caesarean section with no major additional risks or complications.



Is sterilisation effective?

Sterilisation is meant to be a permanent way to stop pregnancy, but it does not always work forever. The fallopian tubes are made of living tissue. Sometimes, even after they are blocked or cut, they can grow back together on their own.

Because of this, about 1 in every 200 to 500 women who have been sterilised might still get pregnant – either soon after the surgery or many years later.

For men, sterilisation is called a vasectomy. It has a much lower chance of failure – about 1 in every 2000 men might cause a pregnancy after vasectomy.

So while both types usually work, pregnancy can still happen in rare cases.

Risks of sterilisation

Ectopic pregnancy

If you get pregnant after sterilisation by tubal ligation there is a risk that the pregnancy will develop in the fallopian tube rather than in the uterus (womb). This is called an ectopic pregnancy and requires medical attention.

For this reason, if you miss your periods after you have been sterilised, you need to see your doctor urgently.

Regretting your decision

Research has shown that if you choose to have a sterilisation procedure during pregnancy or delivery, you may regret it later. It is thought that the incidence of regret in women who undergo sterilisation at less than 30 years of age, is greater.

To help ensure that you are making the right choices for you, we will offer you counselling on at least 2 separate occasions prior to your caesarean and that you make your final decision at least 2 weeks before your caesarean.

All sterilisation operations are meant to be permanent. Only about 50% of women achieve a live pregnancy after undergoing reversal. If you change your mind, there is no guarantee of success and you will have to pay to have the operation reversed.



Alternative options

Male sterilisation

There is less chance of a pregnancy after a vasectomy (male sterilisation surgery) than after tubal ligation. Your partner should see their GP to discuss this option.

Long term methods of contraception

Copper IUDs (intrauterine device or 'coil'): This is a small device that is inserted into your uterus and can safely stay there for up to 10 years, depending on the type used. If you are over 40 when it is fitted, it can be left in until you reach the menopause. This can be fitted 6 weeks after your delivery in the local family planning clinic or by your GP. It can be removed if you wish to get pregnant.

A progestogen IUS (intrauterine system): This is a small hormone-releasing device that is inserted into your uterus which lasts for 5 years and is called a Mirena® system. The Mirena system is as effective as vasectomy and more effective than tubal ligation. This can be fitted 6 weeks after your delivery in the local family planning clinic or by your GP. It can be removed if you wish to get pregnant.

Progestogen implant: This is a small flexible tube inserted under the skin of the arm to release the hormone progestogen. The implant lasts for 3 years. This method is more effective than tubal ligation and is reversible.

Sexually Transmitted Infections

No matter what contraception you choose, using a condom is the only way to protect yourself against sexually transmitted infections.

Useful information

For more information about contraception options, visit www.nhs.uk/contraception/ or scan the QR code:

