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Is There a Role for Medical Therapy After Vasectomy Reversal?

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Objectives: Semen quality can vary widely after vasectomy reversal surgery. Often, the reason for such variation is not clear, but may result in the empirical use of adjunctive medical therapy in the form of steroids, non-steroidal antiinflammatory drugs (NSAIDS) or clomiphene citrate. We assess the seminal response to empirical medical therapy in a cohort of men after vasectomy reversal surgery.

Design: Retrospective study of two cohorts of men after vasectomy reversal by a single surgeon.

Materials and Methods: We identified 23 men who underwent vasectomy reversal and who had received adjunctive medical therapy after surgery. These were divided into 2 groups based on the indication for adjunctive treatment. Group 1 (n=10) received medical therapy because of a lack of motile sperm in the ejaculate since surgery, and Group 2 (n=13) received therapy because of a decrease in sperm motility to zero at some point after surgery. The response to therapy was assessed through an examination of semen parameters after initiation of adjunctive therapy.

Results: Patient age did not differ between the two groups. Medical therapy included methylprednisolone (n=7 patients), NSAIDS (n=2), clomiphene citrate (n=7) and combination therapy (n=7). Results of treatment are found below. There were no complications from medical treatment. Comparisons were made by unpaired t test.

	Group 1 No Motility	Group 2 Decreased Motility	P value
Number of patients	10	13	
Mean age (years)	45.8 ±6.2	43.7 ±5.1	0.4
Mean time from vasectomy (years)	16.2 ±6.1	11.5 ±4.9	0.06
Mean total count before treatment (million)	1.7 ±1.5	11.9 ±4.5	0.08
Mean TMC before treatment (million)	0	1.8 ±0.7	0.04
Mean TMC after treatment (million)	0.4 ±0.3	61.9 ±34.2	0.000
Mean length of treatment (months)	2.5 ±0.4	2.1 ±0.3	0.4
# responders/# patients (%)	2/10 (20%)	11/13 (85%)	0.007

Conclusion: The role of empirical medical therapy after vasectomy reversal is not well defined. However, it appears to be more effective when used after motile sperm counts decrease after surgery instead of with an initial finding of no motile sperm.