

FILSHIE® CLIP SYSTEM

*Important facts about female
surgical contraception*



PATIENT INFORMATION

Methods of Contraception

There are a number of contraceptive methods to choose from, and all have one goal: to prevent pregnancy. The method that's most suitable for you will depend on a number of factors, including your age, lifestyle, current relationship, family status, medical history and the significance for you—either medically or psychologically—to prevent pregnancy.

There are five basic types of contraception—

- **Surgical Contraception** Vasectomy (for men) and tubal ligation (for women), a method of cutting or blocking the fallopian tubes, are considered to be the most reliable methods of preventing pregnancy.
- **Methods** The traditional birth control pill, injections, implants and patches work by either impeding the release of the egg or making the cervical mucus an unreceptive environment for the sperm.
- **Intra-uterine Devices** Small plastic or copper devices that are inserted into the uterus to prevent implantation.
- **Barrier Methods** Male and female condoms and diaphragms that prevent sperm from meeting the egg.
- **Natural Methods** Checking body temperature and the state of the cervix to predict ovulation, which tend to have a far higher failure rate than other methods of contraception.
- **Abstinence** Choosing to refrain from sexual intercourse to avoid pregnancy.

Why Choose Surgical Contraception?

Millions of women have chosen sterilization as a long-term method of contraception when they're sure they do not want to have more children. In fact, tubal ligation (having your tubes tied) is one of the most popular methods of contraception worldwide.

The operation is fairly straightforward. The fallopian tubes (where the egg is fertilized by the sperm) are "blocked" or cut. After this procedure, the sperm is prevented from reaching—and fertilizing—the egg.

Advantages

- One of the most effective methods of contraception
- Permanent and very reliable
- No further contraception is required
- Does not interfere with spontaneity of intimacy
- Usually performed on an outpatient basis
- Removes worry of pregnancy, which may increase sex drive

Disadvantages

- Only suitable for those who are 100% certain they no longer want children
- A procedure is required
- A small number of women report increased period pains after the procedure.

Post Partum Procedure

Many women choose to have a tubal ligation immediately after giving birth, while they're still in the hospital. The type of surgical procedure depends on whether the delivery was by Caesarean Section (commonly known as a C-Section) or vaginal.

C-Section

In a C-Section delivery, the doctor makes an incision in the woman's abdomen to retrieve the baby. Following the delivery, the doctor has access to the fallopian tubes through the existing abdominal incision. The Filshie Clips are ideal for this type of procedure, because they can accommodate the swelling of the fallopian tubes, which often occurs during childbirth.

Vaginal Birth

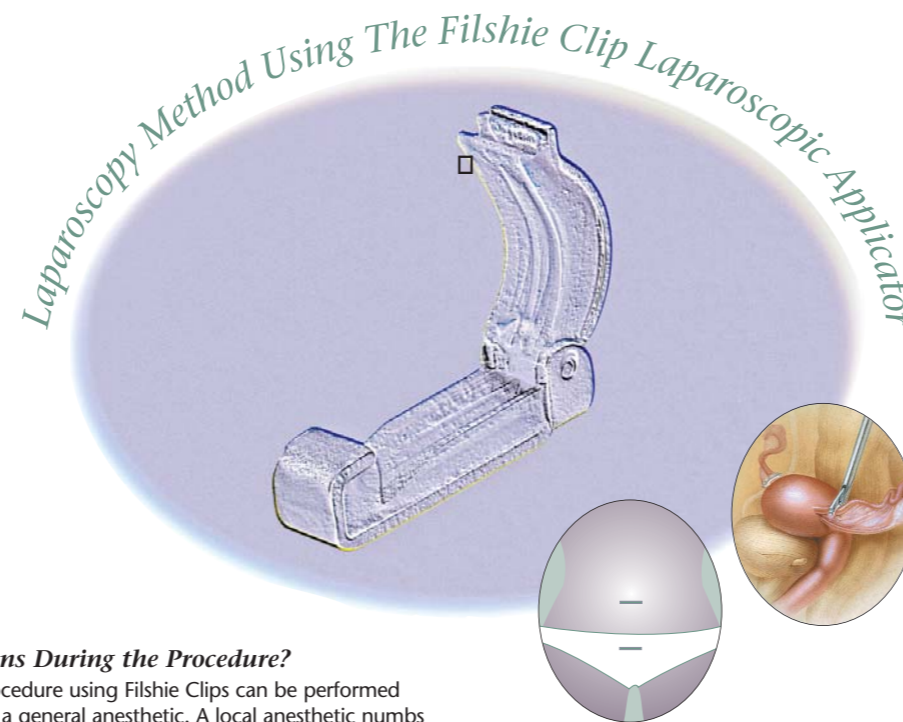
Following a vaginal delivery, the doctor makes one or two small incisions at or below the "bikini line" to gain access to the fallopian tubes. With its specially designed applicator for post partum procedures, the Filshie Clip is fast and effective for tubal ligation.

The Filshie Clip System

The Filshie Clip System is recognized around the world as the leading choice for female sterilization. In fact, more than four million women have chosen the procedure using Filshie Clips.¹

Here's Why:

- Filshie Clips have a significantly lower failure rate than other methods of sterilization—99.73% of sterilizations using Filshie Clips are successful.²
- Clips destroy a smaller part of the Fallopian tube than any other method of sterilization. Only 4mm of tube is affected by the application of Filshie Clips.
- The use of Filshie Clips eliminates the risk of surgical burns to internal organs, such as the bowel or uterus, during the procedure.
- The Filshie Clip is made from titanium and silicone and should not cause any reaction in the body.



What Happens During the Procedure?

The surgical procedure using Filshie Clips can be performed under a local or a general anesthetic. A local anesthetic numbs the region of the procedure so you won't feel pain, though you will usually remain awake. General anesthetic will put you in a controlled sleep, so you are completely unaware of the procedure.

Picture 1

One or two punctures are made in the lower part of the abdomen, one just below the navel and a second (depending on the procedure) just above the pubic hair line, which enable the surgeon to access the fallopian tubes.

Picture 2

The surgeon blocks off the fallopian tubes using Filshie Clips. A clip is applied to each fallopian tube.

After the procedure, the punctures are closed, with one stitch (usually dissolvable) applied to each incision. One day after the procedure, you can remove the protective covering and bathe or shower as usual. Because the punctures are so tiny, there will be minimal scarring.

After the Operation

- You should try to resume your normal, daily routines as soon as possible, though you should avoid any vigorous exercise for two weeks.
- You can start driving again as soon as you feel able, but not within the first 24 hours after the procedure.
- You may experience some mild discomfort at the incision sites for two or three days after the procedure, which can be relieved by over-the-counter pain medication.
- Women who are sterilized laparoscopically may also experience some temporary pain in the abdomen and shoulders.
- You should be able to return to work in three to seven days after the procedure, depending on when you feel ready to do so.

Contraceptive Precautions

You should continue to take your usual contraceptive precautions until after your next period following the procedure.*

Depending on the stage of your menstrual cycle when the procedure takes place, the egg released during your previous ovulation may have already passed beyond the site where the clips are placed on the fallopian tubes. If this is the case, it's possible that the egg may be fertilized and you could become pregnant.

Once you've had a period following the procedure, however, you can discontinue other contraceptive precautions. Eggs released during ovulation after sterilization will remain behind the site of the clips and will be reabsorbed into the body.

* Other surgical methods may require using other forms of contraception for up to three months, and a follow-up diagnostic procedure.

Reversibility

No woman should consider sterilization unless she is certain that she no longer wants children. Nevertheless, circumstances can and do change. It's a real possibility that a woman who has had a surgical contraception procedure may want a reversal of the operation in order to conceive a baby. Reversal of sterilization is possible, although the success of the reversal largely depends on the method of sterilization, since different methods damage different amounts of the fallopian tubes.

Frequently Asked Questions

The following information is intended to help you decide if surgical contraception is right for you. In addition, we urge you to consult with your primary care physician, gynecologist, or family planning clinic.

Q *How often do sterilization procedures fail?*

A Sterilization is widely considered to be the most effective and reliable form of contraception. Sterilization with Filshie Clips has a low failure rate of just 0.27% per lifetime. This means that sterilization with Filshie Clips has a 99.73% success rate.²

Q *Will sterilization make my period heavier?*

A Sterilization does not affect your menstrual cycle at all. If you were using a contraceptive pill before your procedure and stop using it afterwards, then your periods should resume as they were before you took the pill.

Q *Will sterilization affect my sexuality or femininity?*

A Sterilization does not affect your sexuality or your femininity. Unlike a hysterectomy, which removes the uterus, neither the ovaries nor the uterus are involved in the sterilization procedure. Therefore, female hormones are still produced naturally by the body.

Q *Is sterilization a major operation with risks?*

A The procedure, which can be carried out under either local or a general anesthetic, carries similar risks to any other minor surgery.

Q *Do many women regret their decision to be sterilized?*

A The vast majority of women who chose sterilization with informed consent and appropriate counseling do not regret their decision. In fact, many report a greater sex drive and a stronger relationship, since they no longer have to worry about the possibility of an unwanted pregnancy.

Q *Does sterilization cause weight gain?*

A Sterilization does not cause weight gain, since it does not interfere with any glands or organs.

Q *Does sterilization affect my period or bring on menopause?*

A Sterilization does not affect your menstrual cycle or cause menopause. Your menstrual cycle will continue until your natural menopause is reached.

Q *What happens to the egg after sterilization?*

A Your body will continue to produce an egg each month. The egg will travel down the fallopian tube until it reaches the blockage. It will then be absorbed into the body through the walls of the fallopian tube.

Q *Will the Filshie Clip protect me against HIV/AIDS or other sexually transmitted diseases?*

A The Filshie Clip offers no protection against HIV/AIDS or any sexually transmitted diseases.

1. Homepage. 2001. 24 Mar. 2004.
<<http://www.femcare.co.uk>>

2. FDA - PMA (1996) Summary Approval P9200046.

Get more information about sterilization and contraception.

We encourage you to make an appointment with your gynecologist for confidential advice about all aspects of contraception and sterilization. He or she will be able to advise you about the method of sterilization that is best for you.

Cooper Surgical

Keeping you at the forefront of women's health care™