

Frequently Asked Questions

What does it mean to be a certified EAP physician?

A certified Essure Accredited Practice (EAP) physician is committed to providing the utmost in patient care, satisfaction and outcomes. This physician has been successfully evaluated by an independent outside body and has agreed to follow nationally established standards for quality patient care and education..

ESSURE BIRTH CONTROL SYSTEM

What is it?

A non-incisional procedure for permanent birth control that is the first alternative to surgical tubal ligation for woman in the United States. The ESSURE procedure should be the first sterilization consideration for all women.

How is it done and how it does it work?

The procedure involves placing a small, flexible plug into each fallopian tube. Once in place, over a 3 month period, body tissue grows into the micro inserts blocking the tubes to prevent the sperm from fertilizing the egg.

How long does the procedure take?

Essure takes approximately 30 minutes to perform and you should plan on being at our office for about 2 hours and to also have a driver to take you home after the procedure.

How long will I be off my feet?

Essure recovery is measured in hours and not days – most women can return to their normal activities the same day or the very next day.

What are the micro-inserts made of?

They are made from proven surgical materials that have been well studied and used successfully in long term medical procedures such as heart and other surgeries.

Is Essure new?

No. hundreds of thousands of *Essure* procedures have been performed worldwide since 1998. It was approved in the US by the FDA in 2002. It is very effective and more safe than vasectomy.

Is Essure effective immediately?

During the first 3 months following the procedure your body and the micro-inserts work together to form a tissue barrier so that sperm cannot reach the egg, preventing you from getting pregnant. You must use an alternate form of birth control for the first three months.

Is Essure covered by health insurance?

The *Essure* procedure is covered by most health insurance companies that include sterilization. After your consultation our staff will check your benefits for you. The cost should be the same as a tubal ligation with insurance. Financing is also available.

What are the benefits?

- No incisions are required; therefore there are no scars
- It is performed in the office (tubals are performed in the hospital)
- It is performed with local anesthesia (tubals use general anesthesia)
- Rapid recovery time = 1-2 days (tubal recovery time is 4-5 days)
- It does not contain hormones
- Essure is 99.8% effective after 4 years of follow up
- It is covered by most insurance plans (versus a tubal that is done in the hospital and patients having to pay a hospital deductible)

Does it hurt?

Essure is similar, in approach, to having a pap smear with mild to moderate cramping following the procedure, typically not worse than your normal menstrual cramps.

Will I still have a period?

Yes, there is no disruption of your period unless you combine with an [endometrial ablation](#) a procedure designed to reduce or eliminate menstrual cycles in women whose childbearing is complete.

Will my periods change after the Essure procedure?

Unlike tubal ligation resulting in post tubal syndrome, your menstrual cycle will not change overall. Some women do report temporary changes but this is possible with any procedure or surgery you may have.

Does it result in menopause?

No. The Essure microinserts do not cause menopause nor does it affect your hormones.

Are there hormones in the materials?

No. The microinserts are inert and permanent.

What happens to my eggs?

After an Essure procedure your ovaries will continue to produce eggs, which will be absorbed by your body.

Does it cause post tubal syndrome?

While there is significant debate that post tubal syndrome exists it is possible that a tubal ligation may affect ovarian or vascular function presumably interfering with blood supply to the ovary during the procedure. Since ESSURE does not compromise or disrupt blood flow to the ovary or uterus in any way this is a very unlikely consequence.

What is the difference between tubal ligation and the Essure procedure for permanent birth control?

There are many differences. Tubal ligation is a surgical procedure requiring general anesthesia with a 4 to 6 day recovery period. The surgery requires multiple incisions that can have a high potential for injury to internal organs. And after the procedure there is still a 5% to 7% failure rate, menstrual irregularities, and a continued risk for ectopic pregnancy. Essure permanent birth control is an in-office procedure

requiring only light, local sedation with a recovery time of normally 24 hours. There are no incisions therefore a very low potential for injury to internal organs. After the procedure there's less than a 1% failure rate, no menstrual irregularities, and the risk for Ectopic pregnancy is negligible. Essure requires use of a backup contraception for a short period after the procedure.

Is Essure right for me?

The Essure procedure should be the **first sterilization** consideration for **all** women.

Key considerations of the Essure procedure are the following:

- The Essure procedure is permanent and not reversible
- Like all methods of birth control, the Essure procedure should not be considered 100% effective
- As with a vasectomy (for a man) you must use another form of birth control for at least three months after the procedure until a follow-up test (HSG) confirms the micro-inserts are correctly placed and your tubes are blocked

Removal of the Essure micro-inserts would require surgery **How is the Essure system sterilization procedure different from having your tubes tied?**

Usually performed under general anesthesia, a laparoscopic tubal ligation is typically performed in an operating room. Gas is used to expand the abdomen so the doctor can reach the organs easily. The doctor then cuts into the abdomen so the surgical tools can be inserted to perform the procedure. The fallopian tubes are blocked by clamping with metal clips or plastic rings, cutting away a section of the tube, or burning a portion of the tube.

- Cauterization – uses electrical current to burn and block each fallopian tube
- A ring or band – a section of each fallopian tube is folded together and that section is tied or bound with a ring or band. The rings or bands remain inside the body
- A clip/clamp – crushes the tube together so the sperm can not pass through the fallopian tube. The clips/clamps remain inside the body
- Ligation – a portion of each tube is tied or bound in two places and the section in between is cut away and removed
- The procedure is complete when the opening cuts are closed with stitches or metal staples.

After returning home, women typically take 4-6 days [2] before they can resume regular activities. According to the American College of Obstetrics & Gynecology, after returning home, women may have the following symptoms for a few days:

- Cramps (like menstrual cramps)
- Discharge (like menstrual flow)

- Mild nausea or vomiting associated with the general anesthesia or the procedure
- Sharp pains in the neck or shoulder (caused by the gas)
- Pain in the incision
- A sore scratchy throat if a breathing tube was used
- Feeling tired and achy
- Bloating abdomen
- Bruising around the incision

The Essure procedure differs from a tubal ligation because it does not involve incisions and can be performed without general anesthesia. Recovery time at home is typically 1 to 2 days, though it is not unusual for a woman to return to regular activities the very same day. Recovery may include the following symptoms:

- Cramps (like menstrual cramps)
- Discharge (like a light menstrual flow or spotting)
- Mild nausea or vomiting (related to anesthesia)
- Fainting or light-headedness following the procedure (related to anesthesia)

What are the risks and complications associated with a tubal ligation?

Because incisions are made in the abdomen and the laparoscope is inserted blindly into the abdomen, complications may include:

- Infection
- Bleeding
- Damage to blood vessels, nerves, or muscles
- Damage to the bladder, ureters, or bowel, requiring surgical repair
- Blood clots
- In rare cases, death

What are the key risks and complications associated with general anesthesia?

Following general anesthesia, some people may experience the following:

- Negative reaction to the medication
- Feeling sick to your stomach
- Slowness of the anesthesia to wear off
- A sore throat if a tube is used during the general anesthesia
- Seizure or heart attack
- High temperature
- Confusion
- Death

Is Essure also an alternative to vasectomy for a couple?

Yes. Vasectomy is a surgical operation with associated risks. A vasectomy requires that the man's scrotum is cut or punctured, the vas deferens cut, and the ends of the vas deferens are either burned or clipped closed.

A vasectomy takes about 15 to 30 minutes, and recovery is usually about 2 days. The man may also need to apply ice packs to the scrotum and wear an athletic supporter for several days to prevent swelling and bruising. The couple must use an alternative form of birth control, typically for 3 months, or until a sperm count test demonstrates that the vasectomy was successful. A 6 month sperm test is recommended.

What are some key risks and complications associated with vasectomy?

Vasectomy is 99.85% effective after one year of follow-up. No method of birth control is 100% effective and there is a small chance of pregnancy, even many years following the procedure.

Complications may include the following:

- Bruising on the scrotum
- Infection of the incision/puncture in the scrotum
- Painful testicles (epididymitis)
- Sperm may leak into the surrounding tissue forming small lumps (granuloma) in the scrotum

What are some key risks and complications associated with the Essure procedure?

Some of the key risks and complications of the Essure procedure are the following:

- Failure to place 1 or both devices in the correct location
- Failure to obtain tubal occlusion by 3 months after the procedure
- Cramps (like menstrual cramps)
- Temporary pain and/or discharge (like a light menstrual flow or spotting)
- Mild nausea or vomiting (related to anesthesia)
- Fainting or light-headedness following the procedure (related to anesthesia)

What is an HSG?

An HSG is an x-ray of the inside of your uterus and fallopian tubes. A dye is infused to confirm blockage of the tubes. The test takes about 15-30 minutes and is performed much like a Pap smear. You may experience cramps during the procedure that can last for a few minutes after the procedure is completed. Two to four x-rays are taken during the entire procedure for further review