

ADAPTING THE FRAMEWORK

Swaziland's Experience

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Swaziland Context

- HIV prevalence: 26%
 - *38% in women*
 - *23% in men*
- HIV incidence: 2.38%
 - *3.1% in women*
 - *1.7% in men*
- Contraceptive prevalence is 66.1% (2014), increased from 65.6% (2010)
 - *Injections most common method at 17.2%*
 - *Followed by pill at 9.9%*
- Unmet need for contraceptives is 15.2% (2014), increased from 13% (2010)
 - *Among girls 15-19 it is 24.6%*

Adaptation Consultative Meeting

- Meeting held **March 30th and 31st**, 2015 in Ezulwini, Swaziland
- **27 stakeholders** with representation from:
 - *Ministry of Health; SRH Unit, Health Promotion Unit, Swaziland National AIDS Program*
 - *Swaziland National Network of People Living with HIV/AIDS (SWANNEPHA)*
 - *Swaziland Business Coalition on Health and AIDS (SWABCHA)*
 - *mothers2mothers*
 - *Family Life Association of Swaziland*
 - *Elizabeth Glazer Pediatric AIDS Foundation*
 - *UNFPA*
 - *WHO*
 - *Health Communication Capacity Collaborative*
 - *USAID Swaziland*
 - *USAID Washington*

Discussions

- As evidence is inconclusive, many questions as to whether it would be more detrimental than helpful to release this information to the general public
- Stakeholders concerned about potential drop in contraceptive use if information was widely distributed without people fully understanding it (for both WLHIV and those HIV negative)
- Since injection is most common in Swaziland, important to ensure any information provided does not compromise the use of the injection for those seeking to prevent pregnancy
- Important to balance risk with benefits of contraceptive use
- Concern that men may begin to blame women for transmitting HIV as they are the users of hormonal contraception

Outcomes

- Encourage dual protection rather than distributing information on inconclusive studies
 - *Important to strengthen family planning counseling in this regard*
 - *Any materials produced should stress the importance of dual protection*
- Still important for providers to understand the risks and they should be made aware of the concerns around some hormonal contraception
 - *Information should be provided in trainings and guidelines for providers*

Materials Produced

- Updates to the National Family Planning Guidelines
- Updates to the Family Planning Training Manual for providers have been completed and disseminated
- Adapted materials from the South Africa ZAZI campaign on dual protection have been completed and are finalizing translations and printing
 - *Brochure*
 - *Poster*



METHODS TO PREVENT HIV, STIs AND PREGNANCY

MALE CONDOM



The male condom is a covering made of latex that fits over the erect penis.

FEMALE CONDOM



The female condom is put into the vagina before having sex.

INTRAUTERINE DEVICE (IUD)



The IUD is a small thin T-shaped plastic device that either is wrapped in copper or contains hormones that are released. It is inserted into the vagina and placed in the womb (uterus). It is also known as the 'loop'.

IMPLANT



Hormonal implants are small, thin, flexible plastic rods, about the size of a matchstick, inserted under the skin by a healthcare provider, and can be removed at a later stage.

INJECTABLES



An injection of hormones given to you by a healthcare provider.

You need to go for the injection every one, two or three months, depending on the type used.

ORAL CONTRACEPTIVE PILL



The pill comes in a 28-day pack.

The pills contain hormones that regulate your system to prevent pregnancy. Different types of the pill are available at your local clinic.

VOLUNTARY STERILISATION FOR WOMEN



Voluntary sterilisation is the cutting and tying of both of the fallopian tubes to prevent any future pregnancy.

It's a quick and painless procedure done at a hospital.

VOLUNTARY STERILISATION FOR MEN



Male sterilisation is the cutting and tying of the sperm tubes.

It is quick and mostly painless, done at a hospital. Also known as a "vasectomy".

EMERGENCY CONTRACEPTION



Emergency contraception (either an IUD or pill, sometimes called the "morning after pill") is used to prevent an unplanned pregnancy after unprotected sex.

POST-EXPOSURE PROPHYLAXIS (PEP)



PEP is a 28-day course of antiretroviral drugs, which helps prevent HIV from developing.

What is it?

How does it work?

What are the advantages?

What are the disadvantages?

What else do I need to know?

It prevents sperm and infections from passing to or from the penis.

Use water-based lubricants to prevent breakage and slippage.

It protects both partners from passing on HIV and STIs.

Condoms protect women from getting pregnant and both partners from HIV and STIs.

They are free at clinics and hospitals, or can be bought at garages, shops and pharmacies.

Some people have an allergic reaction which causes itching, burning, or swelling.

If you have any problems you should talk to your healthcare provider.

A new condom must be used correctly for every round of sex.

If a condom breaks or tears, you should use emergency contraception to prevent pregnancy and get tested for HIV and STIs.

At the clinic or hospital, you can also ask for and take Post-Exposure Prophylaxis (PEP) drugs to help prevent getting HIV.

It prevents sperm and infections from passing to or from the vagina.

Condoms protect women from getting pregnant.

It protects both partners from passing on HIV and STIs.

It must be taken out immediately after sex.

A female condom can be put in before sex.

They are free from clinics and hospitals or can be bought from pharmacies.

The outer ring may irritate the female.

The male may be able to feel the inner ring of the condom.

A new female condom must be used correctly for every round of sex.

If a condom breaks or tears, you should use emergency contraception to prevent pregnancy and get tested for HIV and STIs.

At the clinic or hospital, you can also ask for and take Post-Exposure Prophylaxis (PEP) drugs to help prevent getting HIV.

It prevents sperm and the egg from meeting, and prevents pregnancy.

It must be inserted and removed by a healthcare worker.

This long-term method can prevent pregnancy for seven to ten years, depending on the type.

Does not affect the enjoyment of sex.

Side effects can be cramping, spotting and pain during and after insertion of the Cu IUD.

Can be pushed out (expelled) from the uterus into the vagina in the first few months of use.

Must be used with a condom every time you have sex to prevent HIV and STIs.

For women taking certain ARVs, implants may not be as effective. It is important to always use a condom and speak to your health care provider.

The hormones in the implant prevent the release of the egg from the ovary and prevent pregnancy.

It thickens the lining of the cervix (the opening to the womb), making it difficult for sperm to pass into the womb.

This effective long-lasting method works for up to three to five years, depending on the implant.

Does not affect the enjoyment of sex.

Some women may have weight gain, headaches, dizziness, nervousness, nausea and changes to menstrual periods.

Must be used with a condom every time you have sex to prevent HIV and STIs.

For women taking certain ARVs, oral contraceptive pills may not be as effective. It is important to always use a condom and speak to your health care provider.

Contains hormones that prevent the release of an egg from the ovary.

It thickens the lining of the cervix (the opening to the womb), making it difficult for sperm to pass into the womb.

It is long-lasting and only needs to be repeated every one to three months, depending on the type of injection.

Does not affect the enjoyment of sex.

If you are late for an appointment or miss an appointment, you will not be protected against pregnancy.

Side effects include changes to the menstrual period, headaches, dizziness, weight gain or breast tenderness.

Must be used with a condom every time you have sex to prevent HIV and STIs.

You should return to the clinic even if you miss an appointment.

The pill prevents the release of the egg from the ovary and prevents pregnancy.

It helps to make your menstrual period more regular.

Does not affect the enjoyment of sex.

Can help to make your menstrual period more regular.

Does not affect the enjoyment of sex.

Less effective if you forget to take a pill, are taking some other medicine, or are vomiting or have diarrhoea.

Some women experience irregular menstrual periods, nausea, weight change, headaches, dizziness, mood changes and breast tenderness.

Must be used with a condom every time you have sex to prevent HIV and STIs.

For women taking certain ARVs, oral contraceptive pills may not be as effective. It is important to always use a condom and speak to your health care provider.

The procedure means that eggs are not released into the womb and pregnancy is prevented.

Has no side effects, causes no lasting pain and causes no change to menstrual periods.

Does not affect enjoyment of sex.

Getting sterilised voluntarily means you will not be able to get pregnant again.

It is difficult and expensive to reverse a vasectomy with no guarantee of success.

Sterilisation is safe and legal for women over the age of 18. It's also safer for women who have had children, as well as for those who have not.

If you choose to be sterilised, you should still use a condom to prevent HIV and STIs.

Sterilisation is safe and legal for women over the age of 18. It's also safer for women who have had children, as well as for those who have not.

If you choose to be sterilised, you should still use a condom every time you have sex to prevent HIV and STIs.

It prevents an egg from being released, so that it cannot get fertilised.

It must be taken as soon as possible after having sex, within 72 hours (three days) for the pill or within 120 hours (5 days) for the IUD to prevent pregnancy. The sooner you take it, the more effective it will be.

Sterilisation is permanent and no other contraceptive method will be needed to prevent pregnancy.

Has no side effects and causes no lasting pain.

Some women experience nausea, vomiting, headache, dizziness, cramping, breast tenderness or vaginal bleeding.

Condoms still need to be used for three months after the operation to prevent pregnancy. You should revisit the facility for a sperm count to confirm total sterilisation.

If you choose to be sterilised, you should still use a condom every time you have sex to prevent HIV and STIs.

PEP must be taken within 72 hours (three days) after unprotected sex or rape.

The drugs help the body's immune system to stop the virus from multiplying.

In an emergency situation, if a person has been raped or exposed to HIV in another way, PEP can prevent a person from contracting HIV.

It is available from health facilities.

You DO NOT have to report the rape to the police to receive PEP.

In order to receive PEP, you must first take an HIV test.

UNLOCKING YOUR SEXUAL HEALTH

We all have dreams and aspirations for our future. To fulfil these dreams, we have a responsibility to make choices that will help us achieve our goals in life. Our sexual health is an important part of our lives. Having a healthy sex life means using our knowledge to give us the strength to prevent pregnancy, HIV and STIs.

PREVENTING PREGNANCY

If you are sexually active, you and your partner need to speak about whether you are ready or not to have children. Having a child is an emotional commitment and you will need to have money to buy things like:



If you and your partner are not ready to have a child, you should choose a contraceptive method that works best for both of you to prevent pregnancy.

IN CASE OF AN EMERGENCY...

Should the condom burst or you forget to use contraceptives, the morning after pill (emergency contraception) can help to prevent pregnancy, but not HIV or STIs. Taking a combination of ARVs, antibiotics and the morning after pill within 72 hours can reduce the risk of pregnancy and HIV. This is called post-exposure prophylaxis or PEP.

DOUBLE UP AT YOUR CLOSEST CLINIC

This brochure gives you information about how to **DOUBLE UP** – two methods are better than one – to prevent pregnancy, HIV and STIs. Contraceptives help to prevent pregnancy, but doubling up with a condom helps to prevent pregnancy, HIV and STIs. You and your partner have the power to decide why to **DOUBLE UP** and to choose a contraceptive that works best for you. It explains what you can do in case of an emergency, such as rape or the condom breaking, to prevent pregnancy, HIV and STIs.

These methods and condoms are available free of charge at your nearest government clinic.

PREVENTING PREGNANCY, HIV AND STIs

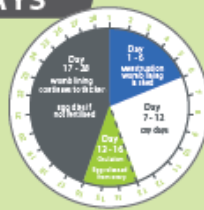


In addition to planning your pregnancy, you and your partner should also think about preventing HIV and other STIs. Male and female condoms are the only methods that prevent pregnancy, HIV and STIs. Knowing your HIV status, being screened for STIs and speaking openly with your partner about your relationship can help you make an informed decision about how to best prevent pregnancy, HIV and STIs.

If you are raped, you should go to your clinic immediately and access PEP to help prevent you from getting pregnant, STIs and HIV. Rape is a crime and you are encouraged to report it to your nearest police station, but even if you decide not to report the rape, you can still get PEP from your local clinic for free.

KNOW YOUR FERTILE DAYS

A woman's reproductive system is designed so that once a month, an egg leaves one of the ovaries and travels down the fallopian tubes towards the womb (uterus). If the egg is not fertilised by the male sperm at this stage (ovulation phase), the womb sheds its tissue lining, and the blood and unfertilised egg leaves the uterus, passing through the vagina. This blood is known as the menstrual period.



The menstrual cycle starts on the first day of a period – to the start of the next period. The complete cycle may last between 24–28 days (or longer in some women).



Day 1–6: The menstrual cycle starts – the womb lining and unfertilised eggs shed and the woman has a period.



Day 7–12: During this time, a new egg becomes fertile and is ready to be released into the womb.



Day 12–16: This is the Ovulation phase, where the egg is released from the ovaries into the womb. The egg is now ready to be fertilised by a sperm. If no contraceptive methods is used, this is the time a woman is most likely to become pregnant.



Day 17–24: The egg will die off during this period if it is not fertilised. The lining of the womb thickens and is then shed in the next period (days 1–6).

KNOW YOUR SEXUAL RIGHTS

YOU HAVE THE RIGHT

To receive services from health care providers that demonstrates courtesy, human dignity, patience, empathy and tolerance.

YOU HAVE THE RIGHT

To demand maintenance for your child from the father of your child. Caring for the child is as much his responsibility as it is yours.

YOU HAVE THE RIGHT

To receive confidential counselling for contraceptives and HIV counselling and testing without discrimination, coercion or violence. You should provide your health care provider with relevant and accurate information so that they can give you the best counselling and information about different contraceptive methods to help you make an informed choice.

YOU HAVE THE RIGHT

To receive emergency contraception to prevent getting pregnant and to start ARVs to prevent HIV if you have been forced to have sex against your will. If you have forgotten to use condoms or if the condom has burst. Your sexual and reproductive health, pregnancy or HIV status is confidential and may not be disclosed without your permission, except if required in terms of any law or any order of court.

YOU HAVE THE RIGHT

To receive information about all contraceptive methods available to you in a language that you understand and to choose a method that works best for you to prevent getting pregnant.

YOU HAVE THE RIGHT

To lodge a complaint if a health care provider or community health care provider has not respected your rights or tells others about you accessing contraceptives or reveals your HIV status. You also have the right for your complaint to be investigated and to receive a full response. Complaints can be filed at the Customer Care services at health facilities.

IF YOUR RIGHTS ARE NOT RESPECTED, CONTACT:

Customer Care Office or Nurse in Charge. If this fails, please contact the Regional Matron.

If you are unable to reach the above-mentioned people, please contact the Department of Health, Directorate of Quality Assurance.

HOW TO USE A FEMALE CONDOM



1. Check expiry date, open package carefully, make sure not to damage the condom, correct size/width or to be fit.



2. Hold the ring and separate into the shape the number eight.



3. Insert as far into the vagina as it will go.



4. Do not touch the dots.



5. Carefully use guide pins to slide the condom.



6. To remove, separate and roll out of ring and pull out.



7. Wipe the condom in toilet paper and throw away in the rubbish bin. Do not flush it down the toilet.

Its MY Responsibility to:

- Protect myself against unwanted/unplanned pregnancies, STIs and HIV.
- Know my HIV status.
- Find out more about contraceptive choices that suit my needs and lifestyle.
- Use contraceptives as advised on the packaging and by my health care provider.
- Go to a health care provider when I am worried about my health, when I need advice and information.
- Go to the health care provider when I experience side effects and find out more about them, rather than just stop using the method.
- Keep to my appointments and if I miss my appointment, make another appointment.
- Take emergency contraception/PEP if I have been raped or sexually assaulted.
- Take emergency contraception/PEP if I have had unplanned/unprotected sex and I do not want to get pregnant.
- Take all medication as prescribed.
- Check the expiry date on medicines and condoms.
- Be honest with the health care provider when asked a question.

It is My and My Partners Responsibility to:

- Protect each other against unwanted pregnancy, STIs and HIV.
- Know each others HIV status – both my own and my partners'.
- Respect each other's choices – for example: to use a condom or not to have sex.
- Plan for a healthy pregnancy and minimise HIV transmission – for ourselves and our baby.

DOUBLE UP – TWO METHODS ARE BETTER THAN ONE



A condom + a contraceptive – the best way to prevent pregnancy and HIV and STIs. A contraceptive only helps to prevent pregnancy. So **DOUBLE UP** and protect yourself against pregnancy, HIV and STIs.

HOW TO USE A MALE CONDOM



1. Check the expiry date and ensure the condom is not damaged. Do not use if the condom is expired or if it is not in its original packaging.



2. The penis must be erect before rolling on the condom.



3. Open the package, make sure not to damage the condom, do not use teeth or nails for this.



4. Roll on an erect penis, make sure the foreskin is pulled back.



5. Make sure the condom is the right way round in order to be used.



6. Push the tip of the condom up, as this forms a bubble, which can burst during sex.













7. Squeeze the condom as far as it will go to cover the full of the penis.



8. Use only water-based lubricants, such as KY-Jelly, with water-based latex male condoms. Do not use oil-based lubricants, such as Vaseline, as these can break down the condom.



9. Wipe the condom in toilet paper and throw it away in the rubbish bin. Do not flush it down the toilet.

| | METHODS THAT PREVENT HIV, STIs AND PREGNANCY | | DUAL PROTECTION Contraceptives prevent pregnancy. Condoms prevent pregnancy, HIV and STIs. | | | | | METHODS TO BE USED IN CASE OF EMERGENCY | | |
|-----------------------------|---|--|---|---|---|---|--|--|--|---|
| | MALE CONDOM | FEMALE CONDOM | INTRAUTERINE DEVICE (IUD) | INJECTABLES | IMPLANT | ORAL CONTRACEPTIVE PILL | VOLUNTARY STERILISATION FOR WOMEN | VOLUNTARY STERILISATION FOR MEN | POST-EXPOSURE PROPHYLAXIS (PEP) | EMERGENCY CONTRACEPTION |
| What is it? |  |  |  |  |  |  |  |  |  |  |
| How does it work? | <p>The male condom is a covering made of latex that fits over the erect penis.</p> <p>It prevents sperm and infections from passing to or from the penis.</p> <p>You can use a water-based lubricant with a condom to increase the enjoyment of sex, but do not use any oil-based lubricant.</p> <p>Lubricants prevent a condom from breaking or slipping.</p> <p>A new condom must be used for every round of sex.</p> <p>If a condom breaks or tears, you should use emergency contraception and get tested for HIV and STIs.</p> | <p>The female condom is put into the vagina before having sex.</p> <p>It prevents sperm and infections from passing to or from the vagina.</p> <p>A new female condom must be used with each round of sex.</p> <p>If a condom breaks or tears, you should use emergency contraception to prevent pregnancy and get tested for HIV and STIs.</p> <p>It must be taken out immediately after sex.</p> | <p>The IUD is a small, thin T-shaped plastic device that is either wrapped in copper or contains hormones that are released in the body. It is inserted into the vagina and placed in the womb (uterus). It is also known as 'the loop'.</p> <p>It prevents sperm and the egg from meeting, and prevents pregnancy.</p> <p>It must be inserted and removed by a healthcare provider.</p> <p>It does not protect against HIV and STIs.</p> <p>You must use a condom every time you have sex to prevent HIV and STIs.</p> | <p>The injectable contains hormones given to you at regular intervals by a healthcare provider.</p> <p>You need to go for the injection every one, two or three months depending on the type used.</p> <p>It contains hormones that prevent the release of an egg from the ovary.</p> <p>It thickens the lining of the cervix (the opening to the womb), making it difficult for sperm to pass into the womb.</p> <p>You must also use a condom every time you have sex to prevent HIV and STIs.</p> <p>You should return to the clinic even if you miss an appointment, so that you can be given alternative contraception to prevent pregnancy.</p> | <p>Hormonal implants are small, thin, flexible plastic rods, about the size of a matchstick, inserted under the skin by a health care provider, and can be removed at a later stage.</p> <p>The hormones in the implant prevent the release of the egg from the ovary and prevent pregnancy.</p> <p>You must also use a condom every time you have sex to prevent HIV and STIs.</p> | <p>The pill comes in a 28-day pack.</p> <p>The pills contain hormones that regulate your system to prevent pregnancy.</p> <p>Different types of the pill are available at your local clinic.</p> <p>The pill prevents the release of the egg from the ovary and prevents pregnancy.</p> <p>You must use a condom every time you have sex to prevent HIV and STIs.</p> | <p>Female sterilisation is an effective and permanent form of contraception.</p> <p>It involves the cutting and tying of the fallopian tubes to prevent any future pregnancy.</p> <p>Female sterilisation is safe for women who have had children, as well as for those who have not had children.</p> <p>You must also use a condom every time you have sex to prevent HIV and STIs.</p> <p>It's a quick and painless procedure done at a hospital.</p> | <p>Male sterilisation is the cutting and tying of the sperm tubes.</p> <p>It is quick and mostly painlessly done at a 'vasectomy'.</p> <p>The sperm tubes which carry sperm from each testicle are cut and tied, so that sperm does not get into the man's semen.</p> <p>Condoms still need to be used for three months after the operation, or for the next 15-20 times that the man has sex to prevent pregnancy.</p> <p>You must also use a condom every time you have sex to prevent HIV and STIs.</p> | <p>PEP is a 28-day course of antiretroviral drugs, which helps prevent HIV from developing in the body.</p> <p>PEP must be taken within 72 hours (three days) after unprotected sex or rape.</p> <p>The drugs help the body's immune system to stop the virus from multiplying.</p> <p>It is available from clinics and hospitals.</p> <p>You DO NOT have to report the rape to the police to receive PEP.</p> | <p>Emergency contraception (either an IUD or pill, sometimes called the 'morning after pill') is used to prevent an unplanned pregnancy after unprotected sex or condom breakage.</p> <p>It prevents an egg from being released, so that it cannot get fertilised.</p> <p>It must be taken as soon as possible after having sex, within 72 hours (three days) for the pill or within 120 hours (5 days) for the IUD to prevent pregnancy. The sooner you take it, the more effective it will be.</p> <p>You should have an HIV test at the same time to know your HIV status. If you are negative, you should start PEP to prevent HIV. You should have a follow-up test after six weeks.</p> |
| What are the advantages? | <p>Condoms protect women from getting pregnant and both partners from HIV and STIs.</p> <p>They are free at clinics and hospitals or can be bought at garages, shops and pharmacies.</p> | <p>A female condom can be put in before sex.</p> <p>Condoms protect women from getting pregnant and protect partners from passing on HIV and STIs.</p> <p>They are free from clinics and hospitals or can be bought from pharmacies.</p> | <p>This highly effective long-lasting method can prevent pregnancy for seven to ten years, depending on the type.</p> <p>It does not cause weight gain.</p> <p>It does not affect the enjoyment of sex.</p> | <p>It is a highly effective method.</p> <p>Only needs to be repeated every one to three months, depending on the type of injection.</p> <p>It does not affect the enjoyment of sex.</p> <p>Can be used by breastfeeding mothers.</p> <p>It does not affect the enjoyment of sex.</p> | <p>This highly effective long-lasting method works for up to three to five years, depending on the type of implant.</p> <p>It does not affect the enjoyment of sex.</p> | <p>The effective method can help to make your menstrual period more regular.</p> <p>It does not affect the enjoyment of sex.</p> | <p>It is highly effective, permanent and no other contraceptive method is needed to prevent pregnancy.</p> <p>It has no side effects, causes no latching pain, and will not cause any change to menstrual periods.</p> <p>It does not affect enjoyment of sex.</p> | <p>It is highly effective, permanent and no other contraceptive method will be needed to prevent pregnancy.</p> <p>It has no side effects and causes no latching pain.</p> <p>A man can still have erections, reach orgasm and ejaculate normally.</p> | <p>In an emergency situation, if a person has been raped or exposed to HIV in another way, PEP can prevent a person from contracting HIV.</p> <p>You will also be given emergency contraception to prevent pregnancy and antibiotics to prevent STIs.</p> | <p>The ECP should be used if a condom breaks during sex. It should not be used as a regular contraceptive.</p> <p>It can also be used if you are raped or forced to have sex. In this situation, you can also be given PEP to prevent HIV and antibiotics to prevent STIs.</p> |
| What are the disadvantages? | <p>Some people have an allergic reaction which causes itching, burning, or swelling.</p> <p>If you have any problems you should talk to your healthcare provider.</p> | <p>The outer ring may irritate the female.</p> <p>The male may be able to feel the inner ring of the condom.</p> | <p>Side effects may include cramping, spotting, pain during and after insertion of the Cu IUD.</p> <p>Can be pushed out (expelled) from the uterus into the vagina, in the first few months of use.</p> | <p>If you are late for an appointment or miss an appointment, you will not be protected against pregnancy.</p> <p>Side effects may include changes to the menstrual period, headache, spotting, mood changes, dizziness, weight gain or breast tenderness.</p> | <p>Side effects may include weight gain, redness, headaches, dizziness, mood changes, nausea and changes to menstrual periods.</p> <p>The implant may not be effective if you are obese.</p> | <p>It is less effective if you forget to take a pill, are taking some other medicine, or are vomiting or have diarrhea.</p> <p>Side effects can include irregular menstrual periods, nausea, weight change, headaches, dizziness, mood changes and breast tenderness.</p> | <p>Female voluntary sterilisation is permanent and cannot be reversed.</p> <p>This means you will not be able to get pregnant again.</p> | <p>It is difficult and expensive to reverse a vasectomy with no guarantee of success.</p> | <p>Side effects may include nausea, vomiting, headache, dizziness, cramping, breast tenderness or vaginal bleeding.</p> | |

Thank You

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