

ask the SPIN DOCTOR

Bob asks, “Back in rehab, I never gave much thought to the idea of being a father...it just didn't seem like it was in the cards, and so I didn't really absorb much information about the subject when it was presented to me. Well, things have changed—and now I need to figure out what my options are. Can you help?” To answer Bob's question, we turned to Shea Hocaloski, Sexual Health Clinician at Vancouver Coastal Health.



The subject of male fertility after SCI is riddled with myths. For example, an often-voiced assumption is, “If I can't ejaculate, I guess I will never have kids.”

The bottom line for the majority of men with SCI is that they indeed still have the ability to father a child. First, some basic facts:

- An SCI does not remove your body's ability to produce sperm. However, an SCI may reduce sperm quality.
- Sperm quality is an important factor in fertility. It's assessed by looking at how many sperm are present in semen, their size and shape, and what percentage are swimming and moving (sperm motility).
- Sperm exits the body in semen, and ejaculation is typically how semen comes out of the body. SCI can have a negative impact on men's ability to ejaculate.

If you have a complete SCI, chances are the ability to ejaculate will be quite low. If your injury is above T10 (higher level), there is a greater possibility that ejaculation can occur with the use of specialized devices. Lower injuries often require more invasive options.

If you have an incomplete SCI, the ability to ejaculate is difficult to predict and is often unreliable. This is due to messages being sent from the brain which can interrupt the ejaculation reflex.

The best method of determining your ability to ejaculate without any intervention or medically-oriented assistance is to explore. Do this with curiosity, but be cautious about your blood pressure getting too high, which can lead to autonomic dysreflexia (AD). Also be aware that if you're trying too hard to ejaculate as your main goal, it can lead to frustration.

If you're unable to ejaculate on your own, you have several sperm retrieval options.

Vibrostimulation is a procedure where a specialized vibrator is applied to the head of the penis to attempt to provoke ejaculation. The vibrators used for this procedure

need to be higher powered than ones you would typically find at a sex shop (the Ferticare, shown to the right, is one example). A consultation with a medical professional before trialing something like vibrostimulation is strongly recommended. AD commonly occurs with vibrostimulation, therefore it's not recommended that it be done at home without medical advice beforehand.

Electroejaculation is one procedure that's used when vibrostimulation fails and is most commonly used for sperm retrieval when the SCI is below T10. This procedure can occur either in the clinic (if there is no anal sensation; complete injury) or in the operating room (when anal sensation is present; incomplete injury). This procedure involves the insertion of a Foley catheter. This is to block the bladder neck so that the semen comes forward out of the penis rather than back into the bladder. A rectal probe delivers an electrical current to the prostate through the rectum. This procedure is quite effective in producing an ejaculate for reproductive purposes.

Surgical sperm retrieval is an option when vibrostimulation and electroejaculation have been tried and the results have been poor. This procedure is done by placing a needle into the testicle or surrounding structures to remove sperm cells. The number of sperm cells retrieved by this procedure is considerably less than the other methods.

It's also important to know that sperm retrieval is the first step in determining your fertility potential. Once sperm is obtained, it needs to be sent to a lab for an analysis to determine semen quality. The quality of sperm will determine the most appropriate method for insemination.

Where can you go for help? Your best option is the Vancouver Sperm Retrieval Clinic, where you'll find specialists working in this field. You need to see your own family physician to get a referral to the clinic.

Despite changes to ejaculation after SCI, becoming a father is still possible.

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SCI BC and Vancouver Coastal Health's Sexual Health Rehabilitation Service have teamed up to create and launch an incredible online resource for people with SCI to learn about sexuality, relationships, fertility, parenting, and much more. Point your browser to sexualhealth.sci-bc.ca today and get the facts and help that you need.

