PART II

CHAPTER II

(A) HISTORICAL RETROSPECT

(B) REVIEW OF LITERATURE
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Nothing is known about the vasectomy operation in the pre-historic and historic periods before early nineteenth Century. It is, however, evident that surgery on external genitalia (circumcision and castration) was not unknown among the Egyptians even 2,500 years before Christ as mentioned in "Historical Retrospect, PART I".

History of evolution of vasectomy can be traced to the latter part of 18th Century. Congenital absence or occlusion of vas deferens with no atrophic changes in the human testicles, was detected by Turin (1786), Hunter (1841), Gosselin (1847), Curling (1866), Simmonds (1898) and Brack (1921) as has been noted earlier. This gave impetus for probing further into the effects of such occlusion. Thus commenced subsequent studies on the changes in testis and its appendages as a result of such anomalous conditions.

Vasoligation or vasectomy in human subjects has been in vogue almost universally in prostatic surgery or prostatectomy to prevent spread of infection from the prostatic bed to the epididymis (Rossenbloom, 1956; Phadke, 1961; Aberhart, 1963; Harding, Rains and Melville Capper, 1965).

Experimental vasectomy was first introduced by Sir Astley Cooper, 1823 quoted by Cooper (1845), followed by Gosselin (1853), Brissaud (1880), Curling (1866) and Guyon (1895).
primarily for academic interest that is to mitigate scientific curiosity about the effects of occlusion of the vas deferens on the generative organs, particularly, the testis.

Experimental vasectomy in the field of research was again brought into prominence and extensive use in the early twentieth Century chiefly by Bouin and Ancel (1903, 1904) in course of their endocrinological investigations for finding out the actual element producing the testicular hormone. They first identified the Leydig cells (interstitial cells of testis) as the organ of internal secretion in the mammalian testis and designated them as "Glande interstitiele du testicle". They further declared that the degeneration of seminiferous tubules and concomitant hypertrophy of interstitial cells occur as an effect of vasectomy. Since that time experimental vasectomy came into extensive practice for the purpose of verifying the conclusions of Bouin and Ancel, and a serious controversy arose as would be evident from the statement of Moore (1924, 1926).

During the second decade of 20th Century, vasectomy on human subjects, better known as endocrine surgery or Steinach operation came into practice for the purpose of rejuvenation or in other words, to increase the virility in the sexually weak or impotent person. Sand (1922) and Benjamin (1922) were the chief advocates of the Steinach operation as applied
to the human individuals, but it was adversely criticised by a number of other workers, such as Oslund (1924b), Moore (1924, 1926), Warwick (1925), Rossenbloom (1956) and Turner (1959) who considered it to be based on a false physiological assumption and an obsession created chiefly by the results of the experimental work of Bouin et Ancel (1903, 1904) and Ancel et Bouin (1923).

Vasectomy as an efficient method of sterilization of the male individuals has been in practice in different countries under different circumstances.

(i) It was very much indiscriminately practised by the Nazi Germany upon the Jewish civilians and the Slavs, particularly in 1933 and 1943, to effect mass sterilization for the purpose of racial extermination for economic and political reasons (Rossenbloom, 1956; Hotchkiss, 1963; Shirer, 1965). It is also interesting to note that in 27 of the United States of America, there are laws that permit sterilization of mental defectives and of certain criminals (Hotchkiss, 1963).

(ii) It has also been in practice not very infrequently to prevent future pregnancy for reasons economic to avoid difficulties in maintaining properly a large number of children already born, or when sterilisation of the wife by ligation of tube is contra-indicated for her ill-health (Rossenbloom, 1956; Phadke, 1961).

(iii) Last but not least, it has been in extensive practice
since the recent adoption of family planning programme to
guard against 'population-explosion', particularly in coun-
tries underdeveloped in agriculture and deficit in food
production.