

The Association of Minimally Invasive Gynecologic Surgeons

...dedicated to safe, state-of-the-art surgery and health life-styles for women of all ages

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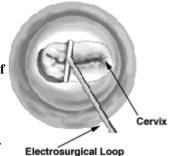
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Loop Electrosurgical Excision Procedure (LEEP)

What is LEEP?

"LEEP" is an abbreviation for loop electrosurgical excision procedure. It is a way to test and treat abnormal cell growth on the surface tissue of the cervix. LEEP is prescribed after abnormal changes in the cervix are confirmed by Pap tests and colposcopy. (Colposcopy is a non-invasive procedure in which a device similar to a microscope is used to view the cervix.) LEEP allows your physician to remove the abnormal tissue and, if necessary, test it for cancer (biopsy). (Illustration at right: Frontal view of cervix - The electrosurgical loop removes a thin layer of surface cells from the cervix)

Abnormal cell growth on the surface of the cervix is called cervical dysplasia. Though cervical dysplasia is not cancer, over time it can worsen and lead to cancer. In some cases, LEEP may be used to treat early stages of cervical cancer.



Loop

How is LEEP performed?

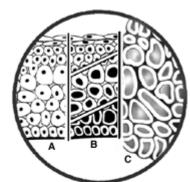
LEEP begins much like a regular pelvic exam. Though you will remain awake throughout the procedure, you should feel only minor discomfort. First, you will be asked to lie back and rest your feet in stirrups at the end of the examination table. A speculum will be inserted into the vagina and opened so that the cervix can be seen. (Illustration at left: Positioning for loop electrosurgical excision procedure)

A solution is applied to the cervix to make the abnormal cells visible. Your physician then places a colposcope near the opening

of the vagina. The colposcope, which remains outside of the vagina, provides a magnified view of the cervix.

The cervix is then numbed with local anesthesia. An electrically charged loop made of thin wire is inserted through the speculum and up to the cervix.

As the loop is passed across the cervix, it cuts away a thin layer of surface tissue, removing the abnormal cells. This tissue will be later tested for cancer. Finally, a medicated paste is applied to the area to prevent bleeding.



Three microscopic views of tissue cells from cervic - Cells in view A are normal cells. Cells in view B show dysplasia. View C shows cancer cells.

How long does the procedure take?

The procedure takes 10 to 20 minutes to perform. You will be able to go home as soon as the procedure has been completed.

Are there other treatments for cervical dysplasia?

Yes. There are a number of ways your physician can remove abnormal tissue from the cervix. These methods include:

- Conization--Removal of a cone-shaped wedge of tissue from the cervix. Conization provides a larger sample of tissue for testing than LEEP.
- Laser cone excision--Heat from a high-intensity beam of light is used to cut away abnormal tissue.

The treatment that is best for you will depend on factors such as the amount and location of the abnormal tissue.

Is LEEP safe?

Yes. LEEP is very safe. Complications are rare and the procedure can be completed without use of general anesthesia. However, there are some risks, such as infection. Discuss any concerns you may have with your physician.

Recovering at home

- Vaginal drainage or spotting is normal for 1 to 3 weeks following the procedure. The medication paste will produce a greenish-yellow discharge immediately after the procedure. A brownish-black vaginal discharge is also normal.
- Tampons or pads may be used for discharge. Do not leave tampons in for more than 3 hours.
- Your menstrual cycle will not be disrupted by this procedure.
- Avoid excessive activity for 48 hours after the procedure. Refrain from exercising for at least 1 week. You can begin exercising again in 1 to 2 weeks. Stop exercising if bleeding other than normal menstruation occurs. If excessive bleeding occurs after you resume normal activities, call your physician.
- Abstain from sexual intercourse for 3 to 4 weeks.
- Showers and tub baths are allowed.

Relieving discomforts

During your recovery, you may experience vaginal bleeding and mild cramping. Tampons or pads may be used for discharge. To relieve abdominal cramping, take a non-aspirin, over-the-counter pain reliever such as ibuprofen (Motrin, Advil) or acetaminophen (Tylenol).

You will need a follow-up checkup 3 to 4 weeks after the procedure.

When to contact your physician

Contact your physician if you experience any of the following symptoms during your recovery:

- Heavy bleeding (more than a normal menstrual flow)
- Bleeding with clots
- Vaginal discharge that has a foul odor
- Fever over 100.4 degrees Fahrenheit

• Severe abdominal pain