Loop Electrosurgical Excision Procedure

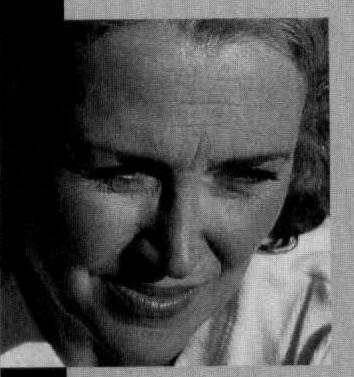




ells on the cervix grow and shed all the time. Sometimes these cells change and become abnormal. This may be an early warning that cancer may occur. When tests show that you have abnormal cells on your cervix, your doctor may suggest the loop electrosurgical excision procedure (LEEP). LEEP is used to remove the abnormal cells from your cervix.

This pamphlet explains:

- How LEEP is performed
- What to expect during and after the procedure
- How to stay well



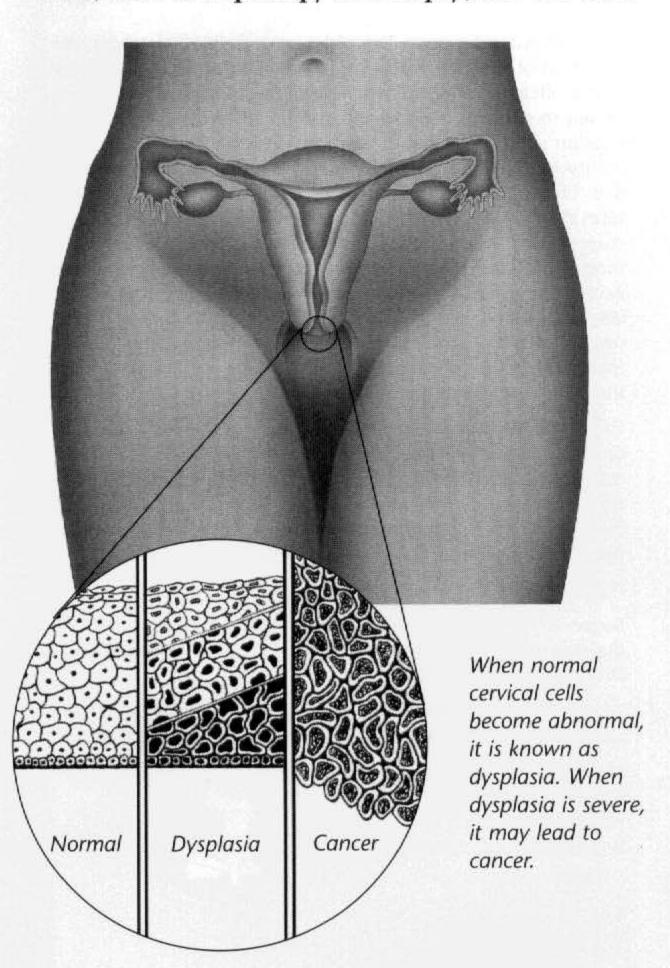
LEEP is an effective and simple way to treat dysplasia.

The Cervix

The cervix is covered by a thin layer of tissue like your skin. The cells that make up this tissue grow all the time. During this growth, the cells at the bottom layer slowly move to the surface of the cervix. When these cells reach the surface, they are shed as a normal process.

When this normal process is changed in some way, cells become abnormal. This condition is known as *dysplasia*. In mild forms, this condition may go away on its own. If it is severe or does not go away, it may lead to cancer of the cervix. Other factors such as smoking and being exposed to sexually transmitted diseases (STDs) also increase the risk of cancer of the cervix.

A Pap test detects changes in the cervix. Other tests, such as *colposcopy* and *biopsy*, also are used.



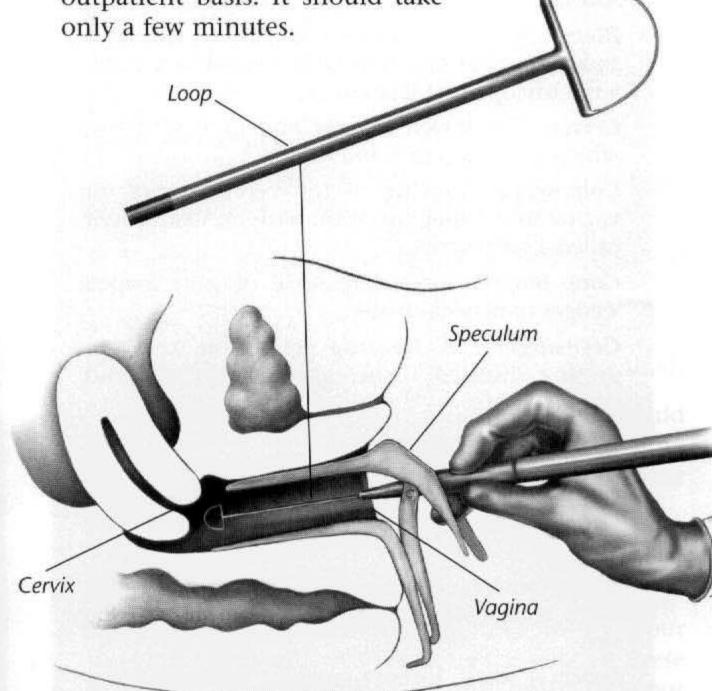
Treating Dysplasia

Abnormal cells can be removed with LEEP. This allows new healthy cells to grow. LEEP is just one way to treat dysplasia. Dysplasia also can be treated with other procedures such as *cryosurgery*, *electrocautery*, *laser*, or *cone biopsy*. The decision of which method to use depends on how much cervical tissue needs to be removed and where on the cervix the abnormal cells are located.

The LEEP Procedure

LEEP uses a thin wire loop that acts like a scalpel (surgical knife). An electric current is passed through the loop, which cuts away a thin layer of the surface cells.

The procedure should be done when you're not having your menstrual period. This allows a better view of the cervix. In most cases, LEEP is done in a doctor's office or in a clinic on an outpatient basis. It should take



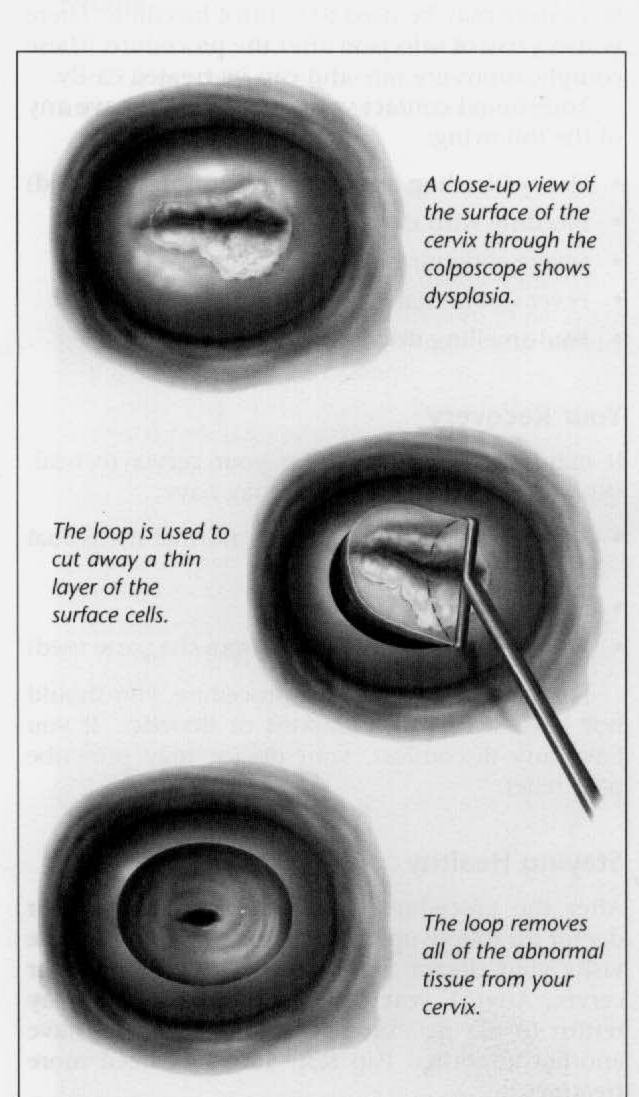
The doctor will insert a speculum into your vagina in the same way as for a pelvic exam. The loop is inserted through the vagina to the cervix. Different sizes and shapes of loops can be used.

You may be given pain relief before the doctor begins. During the procedure you will lie on your back and place your legs in stirrups. The doctor then will insert a *speculum* into your vagina in the same way as for a pelvic exam.

A solution is applied to your cervix to show the abnormal cells. Colposcopy will be used to magnificable assertion the control of the control

fy the cervix during the surgery.

Your cervix will be numbed with local anesthesia. It is given through a needle attached to a syringe. You will remain awake during the procedure. You may feel a dull ache or cramp.



The loop is inserted through the vagina to the cervix. There are different sizes and shapes of loops that can be used. After the procedure, a special paste may be applied to your cervix to stop any bleeding. The tissue that is removed will be studied in a lab to confirm the diagnosis.

Risks

Although problems seldom occur with LEEP, there can be some complications. You may feel faint during the procedure or have some bleeding. Electrocautery may be used to control bleeding. There is also a risk of infection after the procedure. These complications are rare and can be treated easily.

You should contact your doctor if you have any of the following:

- Heavy bleeding (more than your normal period)
- Bleeding with clots
- · Severe abdominal pain
- Fever (more than 100.4°F)
- · Foul-smelling discharge

Your Recovery

It may take a few weeks for your cervix to heal. While your cervix heals, you may have:

- Vaginal bleeding (less than a normal menstrual flow)
- · Mild cramping
- · A brownish-black discharge (from the paste used)

For a few weeks after the procedure, you should not have sex or use tampons or douches. If you have any discomfort, your doctor may prescribe pain relief.

Staying Healthy

After the procedure, you will need to see your doctor for follow-up visits during the year. At these visits your doctor will check the health of your cervix. After 1 year of normal results, you may return to having exams once a year. If you have another abnormal Pap test, you may need more treatment.

By making a few lifestyle changes after the procedure, you can help protect the health of your cervix:

- Have regular pelvic exams and Pap tests.
- Stop smoking—smoking increases your risk of cancer of the cervix.
- If you have more than one sexual partner, limit your number of partners and use condoms to reduce your risk of STDs.

Finally

LEEP is an effective and simple way to treat dysplasia. The procedure can be done in only a few minutes. Your recovery time is brief in most cases.

Glossary

Anesthesia: Relief of pain by loss of sensation.

Biopsy: A minor surgical procedure to remove a small piece of tissue that is then examined under a microscope in a laboratory.

Cervix: The lower, narrow end of the uterus, which protrudes into the vagina.

Colposcopy: Viewing of the cervix, vulva, or vagina under magnification with an instrument called a colposcope.

Cone Biopsy: Surgical removal of cone-shaped wedges of cervical tissue.

Cryosurgery: A freezing technique used to destroy diseased tissue; also known as "cold cautery."

Dysplasia: A noncancerous condition that occurs when normal cells on the surface of the cervix are replaced by a layer of abnormal cells. Dysplasia is classified as mild, moderate, or severe.

Electrocautery: A procedure in which an instrument works with electric current to destroy tissue.

Laser: A small, intense beam of light used as a surgical tool.

Speculum: An instrument used to spread the walls of the vagina so that the cervix can be seen.