

LEEP Procedure

The treatment of *Dysplasia* of the cervix, which has been diagnosed from a colposcopy examination, may involve a procedure called Loop Electrosurgical Excision Procedure, or LEEP. This procedure involves the removal of the abnormal cells from the surface of the cervix with a wire loop, using an electrical current. The procedure is done in the office with a local anesthetic, and is usually associated with minimal cramping. The procedure is best done when you are not on your menstrual period. The tissue removed will be studied in the lab to confirm the original diagnosis.

Following the brief office procedure, you may resume your usual activities; however, you should refrain from intercourse, douching, or tampon use for 2 to 3 weeks. You may need a mild over-the-counter pain reliever for a day or two following LEEP. Expect to have some light spotting and watery discharge for 2-3 weeks as the cervix heals.

Risks with the LEEP procedure are minimal, but may involve excessive bleeding or infection. Some patients may feel faint during the procedure. These can usually be easily managed. You should call the office if you have any of the following:

- Bleeding heavier than a normal period
- Bleeding with clots
- Severe abdominal pain
- Fever (greater than 100.4 F)
- Foul smelling vaginal discharge

Follow up after the LEEP procedure will involve exams with pap smear and colposcopy at an interval to be recommended by your doctor. These exams are important to assure that the dysplasia has been fully treated. Most importantly, you will need regular pelvic exams and pap smears in the years following the LEEP procedure. In addition, stopping smoking reduces your risk of cancer of the cervix. Limit your number of sex partners, and use condoms to reduce your risk of sexually transmitted diseases.

For more information, please refer to the following website <http://www.leep-procedure.com/>