Dear Lori,

Although the thought of having your cervix poked and prodded might not have you LEEPing for joy, rest assured that LEEP is actually a very effective and efficient method for having dysplastic (abnormal) cervical tissue removed. To get you up to speed on exactly what this procedure entails, LEEP stands for loop electrosurgical excision procedure. It involves the use of a low-voltage, high-frequency radio wave that's run through a thin loop of wire. With this instrument, it's possible to remove dysplastic tissue from the cervix, which can then be sent to a pathology laboratory in order to detect the presence of any cancerous or pre-cancerous cell activity. Now, how long is too long to wait to have a LEEP after receiving news of dysplasia \[2\]? Fortunately, your ETA of four weeks seems just about average, so unless your health care provider has indicated that yours is a particularly urgent case, waiting those four weeks is likely just fine. And, though it may take a little longer to recover from LEEP than a biopsy, knowing a bit more about what to expect can help you prepare for the recovery period and hopefully put your mind at ease.

On the topic of scheduling, you may want to consider a few other factors when deciding the best time to have the procedure. Some medical professionals recommend you schedule your LEEP shortly after your menstrual period ends, so that your cervical tissue has plenty of time to heal up before your next period. You might also want to consider choosing a time when a trusted friend, partner, or family member can come to the appointment with you. Having someone there with you might help you feel more relaxed or less anxious. Finally, if you're currently pregnant, it's highly recommended that you wait to have the LEEP until after you deliver your baby. While it's
critical to have the abnormal tissue removed in a timely manner, precancerous cervical cells aren't all that fast-growing, and the LEEP could be dangerous for your pregnancy. And, as always, it's recommended that you chat with your health care provider when deciding when to schedule your LEEP — s/he is the one who is familiar with your lab results and likely has a good sense of when it would be best for you to have the procedure.

One concern many have is whether LEEP will cause discomfort. Usually, LEEP is performed using a local anesthetic, but it can, nonetheless, cause varying degrees of discomfort for some. The procedure only lasts a few minutes, and the experience is much like having a plain ol' pelvic exam or Pap smear (in other words: it involves stirrups, speculum, and the like). After the tissue is removed, your health care provider would likely put a special paste on your cervix to stop any bleeding. All in all, recovery takes about one month. While you can go about your life relatively normally following the procedure, you may experience the following:

- Watery, pink discharge
- Mild cramps
- Brownish-black discharge (this discharge would be from the paste that's used to stop the bleeding)

To relieve any mild pain or cramping, you may take some over-the-counter (OTC) pain relievers, such as acetaminophen or ibuprofen. It’s recommended that you use a sanitary pad (not a tampon) to address any discharge, which typically lasts for several weeks. It’s also good to make sure you wash the outer labia with plain water several times a day for a few days following the procedure, in addition to showering. Follow-up appointments with your health care provider after the procedure will help inform how soon you can resume penetrative sex and the use of tampons. Waiting until s/he gives you the okay will give your cervix adequate time to heal and reduce the risk of an infection. For even more information on how to prepare for your recovery period, check out the Go Ask Alice! Q&A When is it okay to start having intercourse after a LEEP?

And, while LEEP is a safe and effective procedure that many women undergo, it never hurts to be "in the know" about potential complications or risks before having a procedure. In the case of LEEP, potential risks include:

- Bleeding in the weeks following the procedure (seeking medical attention is encouraged if bleeding is heavy)
- Damage to the pelvic or vaginal wall
- Pelvic infection
- Reaction to the local anesthesia
- Narrowing of the cervix (which is rare, but can cause problems with menstruation and getting pregnant)
- Pregnancy complications, including premature births or low birth weight babies (although the risk is only slightly increased)
Each person’s experience varies, and it’s normal for a person waiting to have a LEEP procedure to experience some anxiety. That being the case, don’t be afraid to check in with your health care provider about any additional questions you have prior to the procedure as well as any about any potential symptoms following the procedure.

Best of luck,

Alice!

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