About Your Loop Electrosurgical Excision Procedure (LEEP)

This information explains what to expect during and after your loop electrosurgical excision procedure (LEEP).

A LEEP is a procedure to remove abnormal tissue from your cervix (the bottom part of your uterus, located at the top of your vagina). It may be done to confirm a cancer diagnosis or treat precancerous conditions of your cervix. During a LEEP, a thin wire loop is used to excise (cut out) abnormal tissue. Your cervix is then cauterized (burned) to stop any bleeding. The area usually heals in 4 to 6 weeks.

The procedure will take about 10 minutes. You’ll be in the procedure room for about 30 minutes. You’ll have little or no discomfort from the procedure.

Before Your Procedure

- Don’t take aspirin or any medications that contain aspirin for 7 days before your procedure.
  - Read our resource *Common Medications Containing Aspirin and Other Nonsteroidal Anti-inflammatory Drugs (NSAIDs)* ([www.mskcc.org/pe/common_meds](http://www.mskcc.org/pe/common_meds)) for more information.
- Eat and drink as you normally would. You won’t need to change your diet the day of your procedure.
- Schedule your procedure for 1 week after your period. This will help your doctor know the difference between vaginal bleeding caused by your procedure and vaginal bleeding during your period.
- If you think you may be pregnant, tell your doctor.
Call your doctor if you have any of the following symptoms 2 to 3 days before your procedure:

- A fever of 101°F (38.3°C) or higher
- Chills (feeling cold and shivering)
- Abnormal vaginal bleeding

**During Your Procedure**

- If you’re between the ages of 11 and 50, your doctor will ask you to take a urine (pee) pregnancy test before your procedure.
- You’ll meet with a nurse and patient care technician. They will show you the LEEP equipment.
- Your doctor will talk to you about the procedure, answer your questions, and ask you to sign a consent form.
- The nurse or technician will help you get into position for the procedure. You’ll be in the same position that you would be in for a regular pelvic exam. Since the procedure uses electricity, a grounding pad will be placed on your thigh. This is used to keep you from getting shocked and to protect you from getting hurt.
- Your doctor will numb your cervix by injecting it with a numbing medication called lidocaine. You may feel some pressure and slight burning as it’s injected. The medication may also make your heart beat a little faster.
- Your doctor will turn on the LEEP equipment. The equipment makes a loud noise that sounds like a vacuum.
- Once your cervix is numb, your doctor will pass the thin wire loop through the surface of your cervix to remove the abnormal cells. Sometimes, your doctor may need to do it a second time.
- Your cervix will be cauterized to stop any bleeding.
- Your doctor will place a special solution on your cervix. This will prevent any further bleeding.
- The equipment will be removed. You’ll be helped into a comfortable resting position. We will ask you to rest for 10 to 15 minutes.
After Your Procedure

Before you leave, your nurse will explain how to care for yourself at home. Here are some guidelines to follow:

- Rest for the rest of the day after your procedure. You can go back to work or school 1 or 2 days after your procedure.
- Take acetaminophen (Tylenol®) or ibuprofen (Advil®, Motrin®) if you have any discomfort.
- You can shower as usual, but don’t take a bath until your doctor says it’s okay.
- Don’t place anything inside your vagina (such as tampons or douches) or have vaginal intercourse for at least 4 weeks after your procedure. It usually takes about this long for your cervix to heal. During your follow-up appointment, your doctor will examine you and see if your cervix has healed.
- You may notice a brown discharge for 1 to 2 days after your procedure. This is from the solution put on your cervix after your procedure. You can use a sanitary pad for vaginal discharge.
- You may also have vaginal bleeding that looks like menstrual flow for 1 to 4 days after your procedure. You may notice more vaginal bleeding 10 to 12 days later as you’re healing. The amount of discharge and bleeding varies for every woman. Use sanitary pads for vaginal bleeding.
- Don’t do any strenuous activity (such as running or aerobics) for 1 week after your procedure.
- You may have a late or heavy period after your procedure. This is normal.

If you don’t already have a follow-up exam scheduled, call your doctor’s office to set up an appointment for 4 weeks after your procedure.
Call Your Doctor or Nurse if You Have:

- A fever of 101° F (38.3° C) or higher
- Chills
- Blood clots or heavy vaginal bleeding (needing to change your sanitary pad every 1 to 2 hours) that isn’t because of your period
- Pain that doesn’t get better after taking medication
- Any unexpected or unexplained problems

If you have any questions, contact a member of your healthcare team directly. If you're a patient at MSK and you need to reach a provider after 5:00 PM, during the weekend, or on a holiday, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.