

## HOW COMMON ARE LEEPS?

Although cervical cancer is a rare condition, precancerous lesions are relatively common. Approximately 10% of women undergoing cervical screening will have an abnormal Pap and/or positive HPV test result, but less than 1% will have cancer.

Approximately 3% to 5% of women have precancerous cells (high-grade cervical dysplasia) and need a LEEP.

## CAN A LEEP IMPACT MY ABILITY TO HAVE A BABY?

A LEEP isn't likely to impact fertility. However, there is a small risk of future pregnancy loss or pre-term birth associated with a LEEP. This is due to the weakening of the cervix due to the removal of tissues. The vast majority of women who have LEEPs experience no side effects go on to have healthy pregnancies and healthy babies.

## HOW DO I KNOW IF THE LEEP WAS SUCCESSFUL?

The tissue removed during the LEEP is sent to a pathologist for review. Depending on the findings, you could be sent out to a specialist for additional treatment.

If the surgery successfully removed the abnormal cells, you'll usually have a follow-up appointment in six months that will include a new PAP test to make sure there are no new concerns.

## ABOUT DR. SHEHATA

Led by Dr. Hannah Shehata, MHA provides top-tier medical care for women. Our office specializes in gynecologic care for women ages 35-70 years old. Our goal is to help women be the best version of themselves inside and out.

We recognize that female sexual health concerns are often brushed aside, especially as women get older. Therefore, MHA specializes in treating women who are in menopause and/or going through the changes of menopause. Our office offers innovative treatments for urinary leakage, loss of sexual desire, decreased sexual sensitivity, and painful sex. We also offer hormone replacement therapy.



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LEEP

**MHA**  
**MURRIETA HEALTH**  
*& Aesthetics*

## LOOP ELECTROSURGICAL EXCISION PROCEDURE



*Emphasizing Female Sexual Health*

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## WHAT IS A LEEP?

A Loop Electrosurgical Excision Procedure (LEEP) is considered a “minor” surgery because it is minimally invasive with a quick recovery time. A LEEP is a surgical procedure to remove abnormal cells of the cervix. Your surgeon will use a heated wire loop to remove precancerous cells when there is a concern that the cells will turn into cervical cancer if left untreated.

## WHY IS A LEEP PERFORMED?

A LEEP is usually performed only after an abnormal Pap Test and after a the physician performs an additional test called a “colposcopy.” It is both a diagnostic tool and a form of treatment. Removing the tissue often cures cervical dysplasia by eliminating the abnormal cells. The abnormal cells are then tested for cancer. This can lead to early detection of cervical cancer.

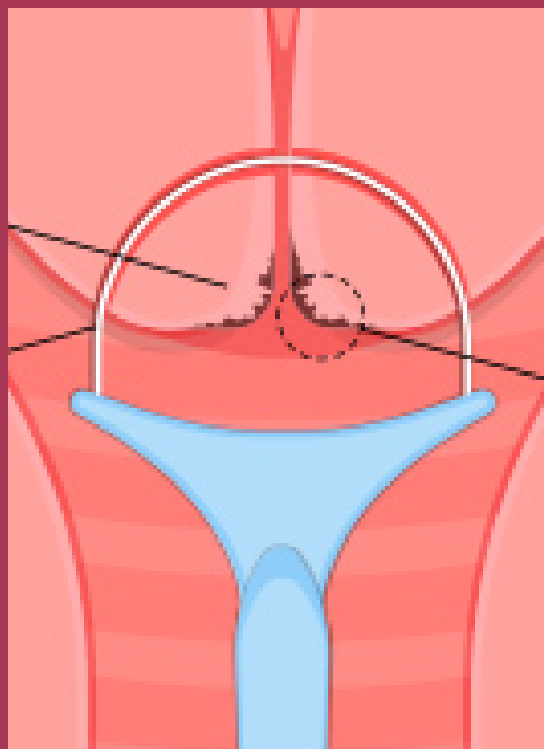
In some instances, you may need a repeat procedure to remove all the cells completely. You may also need an additional LEEP if abnormal cells return. You’re at a greater risk of recurrence if you’re infected with a high-risk strain of the human papillomavirus, or HPV. HPV is responsible for the cell changes associated with cervical dysplasia that can lead to cervical cancer without treatment.

A LEEP is a safe and effective way to prevent cervical cancer. The success rate for LEEP is excellent, with a 90% cure rate. A LEEP's success depends on various factors, including how advanced your cervical dysplasia is and how much tissue must be removed. In those instances where abnormal cells grow back, your provider may recommend an additional LEEP or other treatments.

## HOW IS A LEEP PERFORMED?

A LEEP is done at the outpatient surgery center while you are in a twilight sleep. This procedure usually takes 20–30 minutes, but you will spend half a day in the surgery center.

The LEEP is performed during a pelvic exam – there are no incisions on the abdomen. Our surgeon uses a hot wire loop to cut out the abnormal tissue on the outside of the cervix. About a quarter of the cervix is removed, which is about the size of the tip of your finger up to the first knuckle. A sample of the tissue inside the cervical canal is also taken. All tissue is sent to pathology to confirm all abnormal cells have been removed.



## HOW DO I PREPARE?

### Before your surgery:

- Make sure you get any lab work ordered in a timely manner.
- Make sure you write down all questions for your doctor to answer at your preop visit.

### For at least 24 hours before surgery:

- Do not douche
- No Tampons
- Do not use any vaginal medications
- Do not have sex
- No pool or bathtubs

### On the day of surgery:

- Nothing to eat or drink after midnight
- Have someone drive you to and from the surgery.
- Have someone stay with you the first night after your surgery.

## WHAT CAN I EXPECT DURING MY RECOVERY?

Overall, it is an easy recovery. Most people feel good enough after 2–3 days to return to work. If you are uncomfortable, over-the-counter pain medications will be enough to counteract any pain.

You will have brown or black, funny smelling discharge after surgery due to the solution placed on the cervix during surgery. You will need to wear a sanitary pad until the discharge stops. You cannot put anything in the vagina or get your heart rate up (exercise) until the discharge stops. It could take as long as two weeks for the discharge to stop.