

## Having a LLETZ Treatment (Loop Excision)

You will be offered this if you have:

- A moderate or severely abnormal smear
- Abnormal glandular cells on your smear
- A biopsy that shows CIN 2 or 3
- A biopsy that shows abnormal glandular cells
- Your abnormal cells are not visible on the outside of your cervix

This can be offered at the first visit. The procedure will be explained, and you will be asked to sign a consent form. A colposcopy examination will then be carried out as above. Occasionally it may be more appropriate to have the procedure under a general anaesthetic but if this is the case, your clinician will explain everything and arrangements for a future day case admission will be made.

**We advise all patients with coils who are due for loop excision to avoid sexual intercourse or use barrier contraception (e.g. condoms) for 7 days prior to treatment just in case the coil needs to be removed (FFPRHC 2006) Please see section later.**

### What actually happens?

A fast-acting local anaesthetic will be given into your cervix. Whilst it is taking effect the rest of the equipment will be set up: a sticky pad is attached to your thigh to ensure a safe return path for the electric current being used to avoid injury and a plastic tube attached to the top of the speculum to circulate cool air.

Some of the anaesthetic can sometimes make you feel a little strange: it can make you heart beat faster and your legs feel wobbly. If this happens please do not panic, it is quite normal and will settle quite quickly. Breathe normally and don't worry about shaky legs.

Once we are sure that the anaesthetic is working, a thin electrical wire loop is used to remove the abnormal area – hence the name. The area is then sealed to stop it bleeding with another type of electrical instrument. It is a very safe procedure and takes about 15 minutes.

## **What if I have a coil? (Intra-uterine contraceptive device, IUS, IUCD)**

You will be offered the choice of having the coil removed or leaving it in. Both options have associated problems.

If the coil is left in the strings may get cut by the loop. This will not have any immediate effects but may cause difficulty when the coil needs to be removed.

Taking the coil out can only be done if there is no chance of you getting pregnant. Hence you will be asked whether you have had sex in the last 7 days. If there is any doubt or concern, the treatment will be delayed until the coil can be safely removed. If it is taken out, it can be replaced 6 weeks later but this is not done in the hospital.

**We advise all patients with coils who are due for loop excision to avoid sexual intercourse or use barrier contraception (e.g. condoms) for 7 days prior to treatment just in case the coil needs to be removed (FFPRHC 2006).**

## **Is the treatment painful?**

It is usually painless or minimally uncomfortable because of the local anaesthetic used. Some patients experience period type pains for a day or two, but this will settle with usual over the counter painkillers.

## **Does the treatment have any side effects?**

LLETZ treatment is generally very safe but as with all surgery there can be complications:

- Up to 50% of patients will experience 10 days of bleeding and discharge which may be moderate to heavy
- Many experience pain for a day or two afterwards
- Bleeding is more likely if you get an infection in the raw area on your cervix which takes about 4 weeks to heal
- If you do get an infection there will be a smelly discharge or increased bleeding. In this case contact your GP for antibiotics
- In very rare cases the bleeding is severe, and the patient needs to be admitted to hospital.
- Bleeding can occur 2 weeks after the procedure as a result of bacteria living in the vagina causing the blood vessels to open up.
- Some patients notice a difference in the timing and length of their periods afterwards
- There is a small chance that as the cervix heals it scars up making the canal narrow and makes it difficult for the blood to escape when you have a period. This is called stenosis.
- Research suggests that with a loop of less than 10mm deep there is no associated increase in the chance of pre-term labour or pre-term rupture of the membranes. There may be a small increase in miscarriage before 20 weeks, but this is small and controversial. Deeper and repeat treatments could increase your chance of premature delivery.
- We aim the treatment to remove all the abnormal cells but occasionally some get left behind (residual abnormality). This is why it is important to attend for your follow up smear which will recognise if any abnormal cells and HPV virus are still present.
- Damage to other tissues is very rare

- Loop excision does not affect how easy or otherwise it is for you to get pregnant

**Please note that some travel insurance companies will not provide you with health insurance following this procedure. You may wish to rearrange your colposcopy treatment appointment if you are going on holiday or flying within four weeks of the treatment date.**

To keep the risk of infection as low as possible you **MUST AVOID**:

- Sexual intercourse for 4 weeks
- Using tampons for 4 weeks
- Swimming for 4 weeks
- Taking long soaks in the bath for 2 weeks (shower instead)
- Undertake excessive exercise for 2 weeks

If you have any problems relating to a treatment you can speak to our colposcopy administrators by telephoning:

**0151 702 4266 – Crown Street Site**

**0151 529 3378 – Aintree site**

(These lines are ONLY for post treatment issues)

**Out of hours Contact your own GP or call 111 for advice Please attend the Gynecology Emergency Department (GED) at Liverpool Women's Hospital if you have an emergency need.**

## **Can I bring someone with me?**

Yes of course. It is easier to have someone to take you home afterwards although you are safe to drive. You should take it easy for the rest of the day.

## **What about work?**

You can go back to work the day after as long as it does not involve lifting or strenuous activity. If so, you may need to take a few days off.

## **What if I am due to go on holiday?**

We recommend waiting until after a holiday to have treatment because of the restriction with swimming and sex as outlined above. We can re-book you to have your treatment at a later date. Please do not worry that this will cause you problem to get worse: it won't. If you are pregnant we wait until you are 3 months post-delivery before performing treatment.

Please note that some travel insurance companies will not provide you with health insurance following this procedure. You may wish to rearrange your colposcopy treatment appointment if you are going on holiday or flying within four weeks of the treatment date.

## **What happens next?**

The removed tissue is sent to the lab and we write to you with the results usually within 6 weeks. We do not give results over the telephone. Sometimes more treatment is needed so we will ask you to return to the clinic to talk through your choices.

You will be asked to have a smear 6 months post treatment to ensure that there are no abnormal cells or HPV virus left behind. This may be done in the hospital clinic or at your GP surgery. For 95% of patients this will be all that is needed.

For a few patients the problem returns, and you have to have a second treatment. For about 3 in every 10,000 treated people, cancer can still develop and that is why it is so important to have follow up cervical screening tests.

On very rare occasions a hysterectomy may be needed, but this will all be discussed if and when necessary.

**This leaflet can be formally translated on request via our Patient Experience Team, although response times to have information translated can vary. To request formal translation services or if you would like to make any suggestions or comments about the content of this leaflet, please contact the Patient Experience Team on 0151 702 4353 or by email at [pals@lwh.nhs.uk](mailto:pals@lwh.nhs.uk)**

Liverpool Women's NHS Foundation Trust  
Crown Street  
Liverpool  
L8 7SS

Tel: 0151 708 9988

Issue Date: 01/11/2018

Reference: Gyn\_2024-175-v5

Review Date: 14/07/2027

© Liverpool Women's NHS Foundation Trust