



Patient Information: LLETZ

What will be done?

LLETZ stands for "Large Loop Excision of the Transformation Zone". This procedure will remove a small segment of the cervix (the lower part of your womb or uterus). This procedure is often combined with a dilation and curettage (see information sheet).

Why is this done?

This procedure is performed for the diagnosis and management of abnormal cell growth (dysplasia). You should have a clear understanding of your reason for this surgery.

How is this done?

The procedure is may be performed under a general or a local anaesthetic. If it is to be performed under a general anaesthetic you will require day surgery admission. A drip is inserted into your arm. An examination is made under anaesthesia, the cervix is stained and the abnormal area is visualised under high magnification by an instrument called a colposcope. A fine wire loop with a special high frequency current allows for the precise removal of the abnormal tissue from the cervix. If curettage is to be performed, the cervix is dilated and the lining of the uterus (endometrium) is sampled. The procedure itself takes approximately fifteen minutes or more, but you can expect to be in theatre and recovery for a number of hours. If the procedure is to be performed under a local anaesthetic, this is injected prior to the procedure

What should I do before the procedure?

Any investigations or consultations arranged at the preoperative consultation should have been completed. You should continue your regular medications, unless advised otherwise. Stop smoking. Should you develop an illness prior to your surgery, please contact our office immediately.

What should I do on the day of the procedure?

Unless otherwise specified, you should stop eating and drinking at the following times on the day of the surgery:

1. at midnight for a morning procedure; or,
2. at 6 am for an afternoon procedure.

You should continue all your usual medications, unless otherwise specified.

You should bring:

- toothbrush / paste / toiletries
- nightwear
- underwear
- sanitary pads
- all usual medications
- all X Rays

What should I expect after the procedure?

When you wake from the anaesthetic, you will be in the recovery room. Depending on the procedure, you should be able to leave that day. You should expect some pelvic or lower back

discomfort. You may have a vaginal discharge or bleeding that will decrease over the subsequent two weeks. A light discharge may persist for up to four weeks. You will be given specific discharge medication if required, but you may use panadol or panadeine as required (one to two tablets every four hours up to a maximum of eight tablets per day).

After discharge from hospital, you should:

- eat and drink normally
- remain mobile
- use sanitary pads (not tampons) if required
- shower normally (in preference to bathing)

You should not:

- have intercourse for six weeks

You should expect a bloody vaginal discharge for several days after the procedure, which should settle within one to two weeks. A clear discharge may persist for up to six weeks. You should be able to return to work the following day, but may require more time off work, depending on the procedure performed. Follow up appointments are vital if a LLETZ has been performed so that further management options (such as further Pap smears or colposcopy appointments) can be discussed.

What are the complications of this procedure?

Every surgical procedure has associated risks. Complications include, but are not limited to:

1. the anaesthetic
2. the surgery
 - perforation of the uterus with consequent injuries to internal organs or blood vessels, requiring further surgery, blood transfusion or longer admission; partial obliteration of the uterine cavity with consequent retention of menstrual fluid and pain; damage to the cervix causing stenosis, incompetence and rarely result in miscarriage
3. the recovery period
 - infections of the bladder, cervix, abdomen or lungs; blood clots that may form in the leg or pelvis and travel to the lung; variable postoperative pain and recovery; nausea, vomiting or pain necessitating overnight admission

Any other specific risks and complications will be discussed prior to the procedure.

What if I have any problems?

You should seek medical attention if you experience:

- fever or feeling unwell
- offensive vaginal discharge or heavy bleeding
- intractable nausea or vomiting
- inability to empty your bladder or bowels
- severe pain

Please contact the office on 07 3332 1999 or attend the Mater Emergency Department if you require urgent attention.