

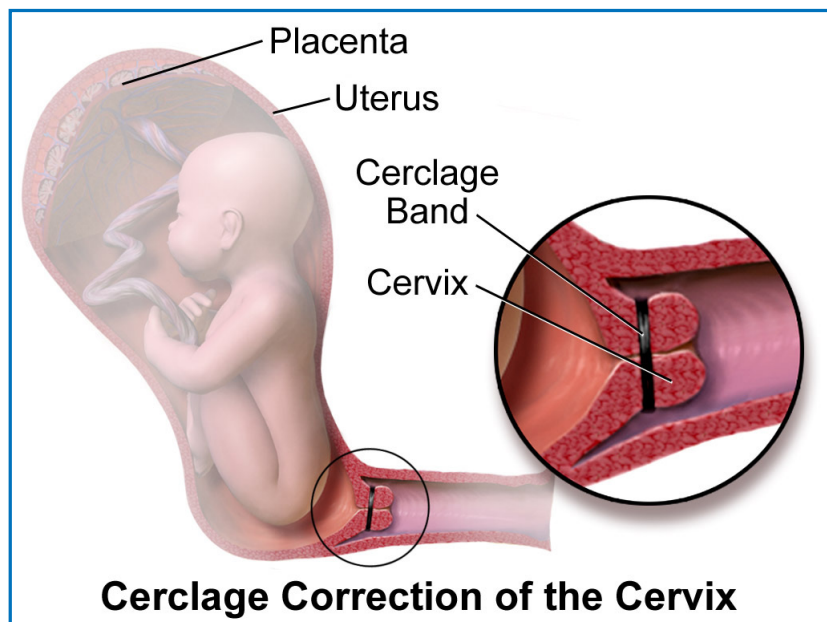
Transvaginal Cervical Cerclage (Cervical suture)

This information leaflet explains what a cervical stitch is, and what you should expect if you choose to have one.

What is transvaginal cervical cerclage?

A cervical cerclage is a suture, or stitch, placed around the cervix (neck of the womb) and tied to prevent the cervix opening too early in pregnancy. We reach your cervix through the entrance of your vagina (transvaginally).

It may also be called a 'Cervical Suture' or a 'MacDonald's Suture'.



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What are the benefits of having a stitch put in?

A stitch can help reduce the risk of pregnancy loss and preterm birth (early delivery). Your consultant will discuss your personal circumstances with you, and why this may be the best course of action. The stitch is helping to keep the cervix closed.

What are the risks?

After cervical cerclage your chance of pregnancy loss or early delivery reduces, but there is still a small chance of this happening. Like any surgery, the cervical cerclage procedure has some risks about which you need to be aware of. These include:

- Bleeding
- Infection
- Bladder, or cervix tearing
- Waters breaking.

What does the procedure involve?

You will be admitted to hospital and the procedure will take place in the operating theatre. The anaesthetist will discuss your health and personal circumstances with you.

The procedure is done under a spinal anaesthetic. This means you will be numb from the waist down, but you will be awake.

Sometimes the procedure may be done under general anaesthetic. This means surgeon will then insert a speculum into your vagina, hold the cervix and put a stitch around it (see the illustration above).

The stitch is then tightened and tied, helping to keep the cervix closed.

When would a suture not be put in?

- If you are in active labour.
- If your waters have broken.
- If you are bleeding vaginally.
- If there is a suspicion that you might have an infection in your womb.

- If there are concerns about baby.
- Not as a routine after 24 weeks gestation.

Are there any alternatives to a cervical cerclage?

Depending on your medical history, your obstetrician may discuss an alternative treatment called progesterone. This is a hormone which is inserted through your vagina instead of using a cervical stitch.

A cervical cerclage can also be placed through the abdomen. If these options are not suitable for you, your obstetrician will monitor you closely by performing regular ultrasound scans.

How soon will I recover?

In hospital after the procedure, you will be transferred to the recovery area and then to the ward. You should be able to go home on the same day. However, your doctor may recommend that you stay a little longer. It is normal to have a small amount of bleeding for a few days.

It is recommended that you rest for a few days after the procedure and then gradually return to normal activities.

You should be able to return to normal activities, including having sex, after 7 to 10 days. However, do not do strenuous exercise.

When will the suture be removed?

Your obstetrician and midwife will carefully plan your antenatal visits to give you and your baby the best possible care. Your obstetrician will remove the stitch at about 36 -37 weeks, usually in the delivery suite.

The removal procedure is usually simple and does not usually need an anaesthetic.

If you have any questions, please make sure to ask when you attend clinic and you will be able to speak to your midwife/consultant.

Patient Advice & Liaison Service (PALS)

The team are available to help with any concerns, complaints or questions you may have about your experience at the Trust. Their office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email.

The contact details are:

Telephone: 01302 642764 or 0800 028 8059

Email: dbth.pals.dbh@nhs.net