

Cervical Cerclage

Cervical cerclage is a surgical procedure used to keep the cervix closed during pregnancy. The cervix is the lowest part of the uterus and extends into the vagina. During normal pregnancy it remains closed until the third trimester.

When is it used?

Cervical cerclage is used to prevent a miscarriage or premature delivery if you have an incompetent cervix. An incompetent cervix is a cervix that opens without labor too early in a pregnancy. Stitching around the cervix helps keep it closed as the baby grows. The procedure may be used if you have a history of miscarriages during the middle third of pregnancy. If you have a history of second-trimester miscarriages, a cerclage may be done at the beginning of your second trimester. Otherwise it may be done at the time Dr. Baniyas finds that your cervix is opening too early. An alternative treatment for an incompetent cervix is bedrest that may last for several months.

How do I prepare for the procedure?

Follow instructions provided by your doctor. If you are to receive a general anesthetic, eat a light meal such as soup or salad the night before the procedure. Do not eat or drink anything after midnight before the procedure. Do not even drink coffee, tea, or water.

What happens during the procedure?

You will be given a general, spinal, or epidural anesthetic. Your doctor will then stitch a band of strong thread around your cervix and the thread will be tightened to hold the cervix firmly closed.

What happens after the procedure?

You may stay in the hospital for several hours or overnight so that you can be monitored for premature contractions or labor. Your doctor may give you medicine to reduce the chance that the procedure will start premature labor. Ask your doctor when you can have sexual intercourse again.

How long is the cerclage thread left in?

The thread is generally removed at the 37th week of pregnancy. If you have contractions or your bag of water breaks while the thread is still in, call Dr. Baniyas right away.

What are the benefits of this procedure?

Cervical cerclage prevents miscarriage or premature delivery caused by cervical incompetence. The procedure is successful in 85% to 90% of cases. A cerclage procedure will probably be done for each of your next pregnancies.

What are the risks?

There are some risks associated with general anesthesia. If you are to have general anesthesia, discuss these risks with your doctor.

This procedure is commonly done with a spinal anesthetic. Complications may include but are not limited to:

- * premature labor;
- * infected cervix, and an infection may cause fever, chills, cramping, or a bad-smelling vaginal discharge; and
- * premature labor with the stitching in your cervix, your contractions may tear open your cervix so it is important that the stitching be removed before or during early labor. It is usually taken out without anesthesia.

All of these complications rarely occur.

When should I call the doctor?

Call your doctor if you have:

- * contractions;
- * lower abdominal or back pain that comes and goes like labor pains;
- * vaginal bleeding that seems to be more than your doctor has told you to expect;
- * a fever over 100.5 degrees F (38 degrees C);
- * chills;
- * a bad-smelling vaginal discharge; and/or
- * rupture of the membranes (your bag of water breaks).

Patient Initials

Date