Incompetent Cervix and Cerclage

The cervix is the part of a woman’s anatomy that connects the uterus to the vagina. During pregnancy, the cervix normally stays closed until labor begins. An incompetent cervix, however, opens too soon, usually in the middle of the pregnancy. This is painless, but there may be vaginal bleeding or spotting. Finally, the bag of waters that surrounds the baby ruptures. The result is usually miscarriage or delivery of a premature baby.

An incompetent cervix may be the result of a birth defect. If a woman’s mother took the drug diethylstilbestrol (DES) during pregnancy, it may have caused an abnormality in the cervix or uterus of her unborn daughter. An incompetent cervix can also occur because of damage sustained during cervical surgery, a biopsy, or during a previous birth.

Sometimes an incompetent cervix is revealed by ultrasound findings or discovered during a physical examination. Apart from such accidental discoveries, however, it is impossible to prevent the cervix from opening prematurely.

When a woman is known to have an incompetent cervix, cervical cerclage can be used to prevent miscarriage. A cerclage is a stitch that is placed in the cervix to keep it from opening too early. The stitch is usually put in place from the vagina. Sometimes it is necessary to place the cerclage through an abdominal incision. The abdominal cerclage requires a Cesarean delivery.

Bed rest is usually recommended for 24 hours following the placement of a cerclage. In some cases, bed rest is continued for the rest of the pregnancy. The doctor will increase prenatal visits so that the cerclage can be checked regularly until it is removed around the 37th week of pregnancy. It is removed at this time so that the cervix does not sustain injury during labor.