Cervical cerclage with use of new dedicated device for absence of an ectocervix following uterine cervical conization.

Takeshi Murakoshi, T. Yokouchi, S. Terada, M. Kobayashi, H. Konno, M. Matsushita, T. Suzuki, and Y. Torii

Obstetrics and Gynecology, Maternal and Perinatal Care Center, Seirei Hamamatsu General Hospital, Hamamatsu City, Japan

Objective: Absence of the vaginal portion of the cervix following uterine cervical conization makes it difficult to perform cervical cerclage. To evaluate the efficacy of cervical cerclage for absence of an ectocervix with new-dedicated tenaculum forceps.

Methods:
- From 2013 to 2017
- Cervical cerclage for 27 without detectable protrusion of ectocervix, and 25 for normal cervix as control.
- new dedicated tenaculum was designed as illustrations (wide tip for external blade, thin and narrow tip on internal blade)

Results:
- All patients were successfully treated with cervical cerclage without any complications.
- Between the new-device and control groups, no difference were found in maternal age, parity, BMI, GA at surgery, operation time, and total amount of bleeding
- No differences were also found in miscarriage (0 vs 4%), preterm labor <32wks (15 vs 5%), and GA at delivery (38.1 vs 38.1wks)

Conclusion: With new-dedicated tenaculum forceps, we can perform cervical cerclage for absence of an ectocervix following cervical conization as easily and safe as for normal cervical length cerclage