We are now a smoke-free site: smoking will not be allowed anywhere on the hospital site. For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.
Who is the leaflet for? What is its aim?

This leaflet is for you if you have been informed that you have a condition called cervical ectropion (previously known as cervical erosion).

This leaflet explains what the condition is, the treatments available and will give you contact numbers if you have any queries.

What is cervical ectropion?

It is a normal occurrence in which the delicate cells that line the cervical canal spread out onto the surface of the cervix. It appears red because the cells that line the cervical canal are thinner compared to the thicker cells that are on the outside of the cervix.

Cervical ectropion is related to the hormone oestrogen and is therefore common in young women, pregnant women and those taking the oral combined contraceptive pill.

References/ Sources of evidence

www.cancerscreening.nhs.uk/cervical


Privacy & Dignity

We acknowledge that the procedure can be embarrassing or distressing. Every effort will be made to ensure your privacy and dignity throughout.
A minority of women have no improvement in their symptoms and may require further assessment.

There is a small risk of bleeding, which may occur during the procedure and is easily controlled.

**Alternatives**
Hormonal treatment is an alternative to cautery of the ectropion. You can discuss this with your GP or practitioner.

**Contacts/Further information**
If you have any queries please contact any of the nursing staff in:

- Clinic 21 - gynaecology outpatient clinic: 01223 216482, Monday to Friday 08:30 to 12:30.
- Community Sexual Health Clinic (icash) 0300 300 30 30
- Emergency gynaecology assessment unit (Clinic 24) 01223 217636 Monday to Friday 08.00 – 20.00 Weekends 08.30 – 14.30
- Inpatient gynaecology ward (Daphne ward) 01223 257206 or 01223 349755 All other times

**Signs and symptoms**
Usually there are none, however, a few women notice an increased vaginal discharge or unexplained vaginal bleeding which may occur between menstrual periods or after sexual intercourse. There may be bleeding at the time of a cervical cytology test (smear) if you are eligible for this.

**Treatment**
Before undertaking treatment it is important to rule out infection, inflammation and any possibility of abnormality. This may include swabs being taken and occasionally a cervical biopsy may be taken.

After investigations the ectropion may be treated if your symptoms are troublesome. A decision to treat your ectropion will depend on any tests that have been performed recently by your GP or any investigations performed in clinic.

You may decide that you do not wish to be treated. If so then the delicate skin on your cervix will gradually change into the thicker skin. How long this takes is variable. You may therefore continue to have symptoms but can be reassured that you will come to no harm. It is important that you attend for cervical screening within the recommended screening schedule.

The ectropion can easily be treated with cautery; either using:
- Diathermy (under local anaesthetic)
- Cryocautery
- Silver Nitrate

For all treatments you will be placed on a couch with your legs supported and an instrument called a speculum is inserted into the vagina to allow us to visualise your cervix.
The type of treatment performed will be discussed with you by your practitioner prior to the procedure.

**Cautery using diathermy**

Local anaesthetic is injected into the cervix. An instrument called a coagulation ball which uses an electric current is used and the top layer of cells on your cervix are cauterised.

**Aftercare**

You may have a slight bloody, watery discharge for up to two weeks. It is advisable to use pads and not tampons during this time to help reduce the risk of infection. You may wish to avoid sexual intercourse until the discharge has settled.

You may experience ‘period’ type pain after the treatment once the local anaesthetic has worn off. You may take whichever pain relief you normally use, such as paracetamol.

**Cryocautery**

Cryocautery is a freezing technique used to treat the ectropion. A small probe with a metal tip is placed onto the cervix or the cervix is treated with a cold spray. The treatment lasts approximately 90 seconds and you may experience some period like pains during this time. Local anaesthetic is not required.

**Aftercare**

If the period like pains are still there when you get home, you may take whichever pain relief you normally use, such as paracetamol.

You may have a heavy, watery discharge for approximately two weeks. It is advisable to use pads and not tampons during this time as to help reduce the risk of infection. The discharge should not be yellow or foul smelling. If this occurs, see your GP who can prescribe antibiotics. You may wish to avoid sexual intercourse until the discharge has settled.

**Cautery using silver nitrate**

Silver nitrate is a chemical stick that is applied to the ectropion and cauterises the area. It takes approximately one to two minutes. It is not used on large areas. Local anaesthetic is not required.

**Aftercare**

You may get some watery, black discharge for up to one week. This will stain your underwear. It is advisable to use pads and not tampons during this time to help reduce the risk of infection.

You may wish to avoid sexual intercourse until the discharge has settled. If you do have intercourse, it is advisable to use a condom as the silver nitrate on the cervix may burn your partner.

**Benefits**

Treatments are effective in helping to improve your symptoms.

**Risks /side effects**

In some cases the treated cervix may become infected and if the discharge becomes particularly heavy with an offensive odour you should contact your own GP for investigation and treatment if needed.