

Useful contact telephone numbers

NHS 111 (non-emergency medical help or advice) ☎ 111

Lister Hospital Switchboard ☎ 01438 314333

Colposcopy Secretaries ☎ 01438 286177
(Monday to Friday, 9am - 4pm) ☎ 01438 286174

Bancroft Clinic Reception, Pink Zone, Lister ☎ 01438 284650

Patient Information

Cervical Ectropion

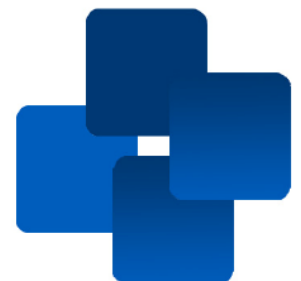
Women's Services

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information in a different
format or another language.



What is cervical ectropion?

Cervical ectropion (or erosion) is a red and often raw looking area on the outer surface of the cervix (neck of the womb). This is a common condition and harmless. It is not linked to cervical cancer.

Cervical ectropion occurs when cells from inside the cervical canal (glandular cells) are present on the outside surface of the cervix. The glandular cells are fragile and are accessible to trauma during intercourse.

How do you get cervical ectropion?

Cervical ectropion can be caused by hormonal changes, pregnancy and use of combined oral contraceptive pill. This can be seen when examination with a speculum is performed.

Symptoms of cervical ectropion

For the majority of women, cervical ectropion does not cause any problems and may resolve on its own over time. However, in some women it may cause unexpected vaginal bleeding, spotting or blood stained vaginal discharge, particularly during or following sexual intercourse. If you have persistent abnormal bleeding, you should be investigated by your GP.

What if I'm pregnant?

Cervical ectropion is very common during pregnancy. Pregnant women are more likely to experience symptoms due to hormonal changes and high level of estrogen in their body. Although these changes are common, any unusual discharge or bleeding in pregnancy should be investigated by your GP, midwife, early pregnancy unit or maternity triage depending on the stage of your pregnancy to ensure there is no other cause of the bleeding.

What treatments are available?

Treatment is not usually necessary and symptoms may resolve by themselves within 3-6 months. Sometimes switching from combined oral contraceptive pill to a different contraception can help to resolve a cervical ectropion. However, if you find the symptoms troublesome, or persistent for more than 6 months, your GP can provide you with more help and refer you for treatment, if necessary.

Treatment is usually performed at a colposcopy clinic. Treatment aims at destruction of the delicate cells to stop them from bleeding, although this is not recommended in pregnancy.

The different treatment options available are:

Silver nitrate - This uses a chemical stick to superficially cauterise (burn) the ectropion. You will not usually need a local anaesthetic.

Cold coagulation - This involves cauterising the ectropion with a hot metal probe for 30-60 seconds. This is performed using local anaesthetic.

Diathermy - This uses an electric current to cauterise the ectropion. It is performed under local anaesthetic.

It is normal to experience 'period like pain', mild vaginal bleeding and discharge after treatment. It may last for 1-4 weeks. Tampons, penetrative intercourse and swimming should be avoided until the bleeding and discharge has completely settled to reduce the risk of infection.

You should seek medical advice if you have any of the following symptoms after treatment:

- A smelly discharge
- Fever or high temperature
- Heavy vaginal bleeding
- Severe abdominal pain

Please note, treatment does not always resolve symptoms completely, and any improvement in symptoms may be short lived. If your symptoms persist or recur after treatment, speak with your GP.