

Patient
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Cervical ectropion and other conditions affecting the cervix

Introduction

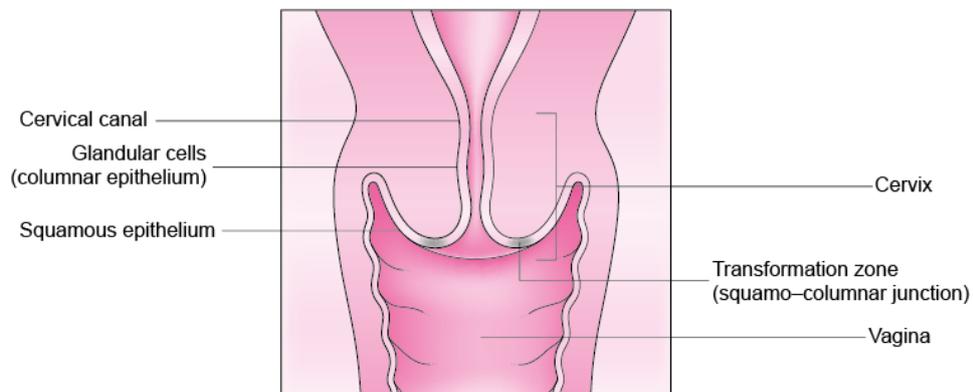
This leaflet gives you information about the symptoms and treatment of cervical ectropion (bleeding from the cervix) and other condition affecting the cervix.

What is cervical ectropion?

There are 2 types of cells found in the cervix (neck of the womb):

- Squamous cells - these are hard cells and cover the outer part of the cervix
- Columnar/glandular cells – these are soft cells and line the inside of the cervix

Where these 2 types of cells meet at the cervical opening, is an area called the squamocolumnar junction (SCJ).



© Jo's Cervical Cancer Trust

Figure 1: Image of the cervix taken from Jo's Cervical Cancer Trust

At birth, the SCJ is positioned at or within the cervical opening but as you age, and especially after puberty the increased amount of female hormone (oestrogen) causes the size of the uterus (the womb) to increase. As this happens, the rim of the cervix rolls outwards, causing more of the columnar cells to be visible on the cervix. This is similar to what happens if you roll out your lips, the inside of your mouth is then more visible. This is called an ectropion. When the doctor or nurse looks at your cervix they will see a red area, this is the soft (glandular) cells.

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What are the signs and symptoms of cervical ectropion?

Cervical ectropion can be caused by hormonal changes, pregnancy and taking the contraceptive pill. It is **not** linked to the development of cervical cancer or any other condition that causes cancer.

Cervical ectropion does not cause any problems for most women and usually goes away without treatment.

Cervical ectropion may cause a discharge, bleeding or pain during or after sex. It can also sometimes cause pain during or after cervical screening.

If you have abnormal vaginal bleeding you should always see your GP as soon as possible for this to be checked out.

What treatment is available?

If you choose to have treatment, it is usually performed in a Colposcopy Clinic.

At Gloucestershire Hospitals NHS Foundation Trust we offer treatment using a mild acid based solution called Solcogyn® which is applied to the cervix. Alternatively and for persisting problems we may offer ball cautery. This treatment will harden the glandular soft cells to stop them from bleeding.

Solcogyn® treatment

Solcogyn® is a solution that is applied to the cervix using a small cotton swab. This procedure only takes a few minutes to complete.

A second treatment is recommended within 4 to 6 weeks to complete the course. You will be discharged from the clinic following the final treatment.

Solcogyn® treatment is painless however some patients have reported a stinging or hot sensation that quickly settles.

Solcogyn® does not have any effects on other medicines and will not affect your ability to drive vehicles or operate machinery. After the treatment you will be able to carry on with your normal activities.

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You do not need to avoid bathing, swimming or sexual intercourse. Any discomfort following the treatment should settle quickly.

Possible side effects

As with any medicine, Solcogyn® may cause side effects, although not everyone will have them. Sometimes patients can feel a slight burning/ stinging sensation which settles very quickly after the solution is applied. If the burning/stinging persists or you have pain or itching then please let your GP know.

Ball cautery treatment

This is used mainly when other methods to treat ectropion's have not been successful. A local anaesthetic is injected into the cervix to numb the area. An electrical probe is then rolled over the cervix to seal the glandular (soft) cells.

As the cervix heals, you will have a brown vaginal discharge. You may have some bleeding but this should be no heavier than a period. The bleeding can last from a few days up to 6 weeks. After 10 to 14 days it is not uncommon to get a period type bleed, this is caused by healing as the treatment 'scab' comes away from the cervix.

You should only use sanitary towels for protection following ball cautery. **Do not** use tampons for 4 weeks, this will help to reduce the risk of infection.

While your cervix is healing, it is vulnerable to infection and damage. For this reason we advise you not to have sex for 4 weeks or until the discharge has stopped completely.

Most women have an improvement of their symptoms after ball cautery. However, in some cases the symptoms may return.

Other conditions affecting the cervix

There are other conditions that, although not a cause for worry, may need treatment.

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Nabothian cysts

Nabothian cysts are tiny cysts that form on the surface of the neck of the womb (cervix). Nabothian cysts are filled with fluid (mucus), which is secreted by the glands of your cervix. These cysts can range in size from just a few millimeters to 4 centimeters wide and are white or yellow in colour. Nabothian cysts are common and do not usually cause any symptoms, although some people experience a discharge. These cysts are usually discovered when you have an internal examination or a smear test. They do not normally need any treatment.

Cervical polyps

A polyp is a small growth on either the surface or the inside of the neck of your womb (cervix). Polyps happen in around 4 out of 100 women and are most common in women in their 40s and 50s. They can also happen during pregnancy. Some women have more than one polyp.

Polyps are not cancerous and do not change into cancer. They often cause no symptoms and are usually only noticed when you have a cervical smear or are examined by a doctor or nurse for an unrelated reason.

If they do cause symptoms then these are most likely to be vaginal discharge or vaginal bleeding after sexual intercourse or in between your periods.

When a polyp has been noticed, it is usually recommended that you have it removed. This is a simple procedure that does not cause pain. You will not need an anesthetic for this procedure.

Contact information

If you have any questions about the treatment or if you need advice, please contact the Colposcopy Clinic Advice Line below.

Please note we are unable to give out results over the phone.

Colposcopy Advice Line

Tel: 0300 422 2385

This is an answerphone service. Your call will be returned between Monday to Friday 9:00 am to 5:00 pm.

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Appointments

Tel: 0300 422 2914

Monday to Friday, 9:00 am to 5:00 pm

If you require urgent medical advice out of the above hours please contact your GP or NHS 111.

NHS 111

Tel: 111

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