

ACOG Issues Guidelines on Cerclage for Managing Cervical Insufficiency

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New guidance from the American College of Obstetricians and Gynecologists outlines which women may be candidates for cervical cerclage to lower the risk for preterm birth.

The procedure may be indicated in the second trimester in women with singleton pregnancies who:

- * Have a history of second-trimester pregnancy loss associated with painless cervical dilation without labor or placental abruption;
- * Have had cerclage in a previous pregnancy due to painless dilation;
- * Currently have painless cervical dilation;
- * Previously had a spontaneous preterm birth before 34 weeks and, in the current pregnancy, have a cervical length under 25 mm before 24 weeks' gestation.

On the other hand, cerclage is not recommended for women with short cervical length in the second trimester without a history of preterm birth.

The authors note that complications associated with cerclage, while infrequent, may include rupture of membranes, chorioamnionitis, and cervical lacerations.

LSOG Jan 2014