Cervical ectropion (cervical erosion)

This leaflet explains about cervical ectropion. If you have any further questions, please speak to a doctor or nurse caring for you.

What is cervical ectropion?
Cervical ectropion (also known as cervical erosion and ectopy) is a common condition caused when cells from inside the cervical canal, known as glandular cells (soft cells), are present on the outside surface of the cervix (neck of the womb).

The area where the soft cells meet the squamous epithelial cells (hard cells), which are those found on the outer surface of the cervix, is called the transformation zone. If a woman has cervical ectropion, it can be seen by the nurse during a cervical screening test (smear test) and the area appears red (because soft cells are red).

Cervical ectropion can be caused by hormonal changes, pregnancy and being on the pill.

It is **not** linked to the development of cervical cancer or any other condition that causes cancer.

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What are the signs and symptoms?
For the majority of women, cervical ectropion does not cause any problems and it usually goes away by itself without needing any treatment.

However, as soft cells bleed more easily and can produce more mucus than hard cells, cervical ectropion may cause discharge, or bleeding/pain during or after sex. It can also sometimes cause pain during or after cervical screening. If any of these symptoms are causing problems for you, you may wish to look into treatment options. A member of the colposcopy team or your GP can provide you with more help on this and refer you for treatment, if necessary.

What treatments are available?
If you choose to have treatment, it is usually given at a colposcopy clinic and will be done using heat/cautery, which hardens the soft cells to stop them from bleeding.

The 2 different treatment options are listed below:
- Silver nitrate to cauterise/burn off the soft cells (this should not be painful, however you may experience some mild discomfort).
- Cold coagulation which uses heat to cauterise/burn off the soft cells (you will be given a local anaesthetic to numb the area).

Both treatments can result in some bleeding or discharge, as well as some ‘period-like’ pain. This could last for around a week (1st method) or two to four weeks (2nd method) after the treatment. Tampons and penetrative intercourse should be avoided until you are fully healed, usually one week (1st method) or up to four weeks (2nd method). Speak to you doctor or nurse for more information about these options.

Information for this leaflet has been adapted from the Jo’s Cervical Cancer Trust website: jostrust.org.uk