Abstract

Forty-seven antenatal patients with clinical diagnosis of cervical incompetence were subjected to a structured scoring system before insertion of McDonald Stitch. All other possible causes of midtrimester abortion were ruled out and the patients followed up to the end of their pregnancies. Significantly there were fewer preterm deliveries in the high score group (P less than 0.01) and no abortions. The mean cerclage-delivery interval was shown to rise with increasing scores. Significantly better fetal salvage ratio was also seen in the high score group (P less than 0.05). The scoring system shows promise as a selective and prognostic tool and is recommended for trial on a wider scale