

## Cervical Cerclage in Neuropathy

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Cervical cerclage refers to a variety of procedures that use sutures or synthetic tape to reinforce the cervix during pregnancy in women with a history of a short cervix. The cervix is the lower part of the uterus that opens to the vagina. Your health care provider might recommend cervical cerclage if your cervix is at risk of opening before your baby is ready to be born or, in some cases, if your cervix begins to open too early.

Your health care provider might recommend cervical cerclage if your cervix is at risk of opening before your baby is ready to be born or, in some cases, if your cervix begins to open too early. However, cervical cerclage isn't appropriate for everyone. It can cause serious side effects and doesn't always work. Some women who have a cerclage placed for a short cervix might experience preterm labor. Understand the risks of cervical cerclage and whether the procedure might benefit you and your baby.

To report on our center's experience of a novel modified approach for laparoscopic cervical cerclage, and to perform a preliminary evaluation of its safety and efficacy of this approach preliminarily. A Retrospective descriptive study was done. Single academic institution study is well nurtured in neuropathy. Pregnant and non-pregnant women who underwent the Modified Laparoscopic Transabdominal Cervical Cerclage with Transvaginal Removing (MLTCC-TR) from June 2016 to April 2019 were enrolled. Eligible participants had multiple adverse obstetric histories or the short cervix and were not suitable for a second transvaginal cerclage. Pre-conceptional or post-conceptional Modified Laparoscopic Transabdominal Cervical Cerclage with Transvaginal Removing (MLTCC-TR). Pregnancy outcomes including the incidence of term labor were defined as the primary outcomes. Neonatal survival, surgical morbidity, and perioperative complications were reviewed and evaluated as the secondary outcomes. Measurements and Main Results:

A total of 24 participants (including 3 first-trimester singleton pregnant women) underwent the MLTCC-TR, giving birth to 27 infants. Among 21 cases women who underwent of preconception cerclage, there were 26 cases of post operational pregnancies were noted after the operation, and the incidence of term labor was 73.07%, which was significantly higher than that in the pre-cerclage group ( $P < 0.001$ ). Their mean s r cete5cantly 3eva opens adeer(evaluatl )0.6(cerOrt newof this apuatnt the M

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