



Juridical study center at Netivot

Founded by Rav **Issachar Meir** zal
Led by major contemporary lawmakers

And mainly by Rav **David Akler**
Rabbi and halachic teacher in Nétivot
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Question answering in the morning: 9.00-9.30 AM 14.30-15.00 - evening: 20.30-22.00

Questions and answers linked to the ectropion

Questions and answers linked to the very essence of the ectropion wound

with tables showing different kinds of wounds

(Each question depends on the wound blood relative to the ectropion blood)

1. Question: How the ectropion is created?

Answer: The ectropion is created by women's hormonal changes such as pregnancy, birth, miscarriage, pill taking. Some think that even a hard menstrual cycle, mainly made of blood lumps makes the ectropion. Other unknown hormonal changes can exist. The same way the ectropion has been created, the same way it can disappear.

I don't know: _____ **I agree:** _____

I disagree because _____

2. Question: Which difference exists in the reality between a small and a big ectropion? Does this depend on the tissue size /on the cells that go out in the cervix area?

Answer: Yes, this depends on the tissue size but it is important to precise that this depends on the ectropion and not on the bleeding because the ectropion can be a big one but it is not bleeding at all because it has not yet been wounded.

I don't know: _____ **I agree:** _____

I disagree because _____

3. Question: How can we make the difference between a superficial ectropion and a deep one?

Answer: In a small ectropion, there is not really a difference between a superficial ectropion and a deep one but in a big ectropion, a deep ectropion seems rougher and is more sensitive to a wound or a bleeding while a superficial one seems less rough and less sensitive to a wound or a bleeding.

I don't know: _____ **I agree:** _____

I disagree because _____

4. **Question:** Does the ectropion exist permanently and only its size does vary or not?

Answer: Some think that the ectropion exists permanently in all women up to the age of transition but because hormonal changes, its size varies.

Nevertheless, others think that the ectropion does not always exist outside and when we are using a normal speculum that only opens the vagina, we cannot see the ectropion but when we are using a speculum that opens the cervix, we can see the ectropion because it exists permanently in the conduit that leads to the cervix but there, it is not defined as an ectropion.

I don't know: _____ **I agree:** _____

I disagree because _____

5. **Question:** Which is the difference between an "active" ectropion and an "inactive" one?

Answer: In medicine, this concept does not exist. We speak about a "bleeding" ectropion and an ectropion that "doesn't bleed".

Although nurses use the term of "active" or inactive", they want to say that an ectropion, before it is rubbed by things that wound it and bleed it is called "inactive" but after having been rubbed by things that wound it and bleed it, it is called "inactive".

We know that even if it's "active", it does not bleed permanently. Later, it can bleed and be wounded by things that are bleeding it.

I don't know: _____ **I agree:** _____

I disagree because _____

6. **Question:** Can the ectropion bleed by itself?

Answer: Commonly, the ectropion does not bleed by itself and even if sometimes, it seems that it is bleeding by itself because the woman has not made an examination, this is because before the bleeding, one thing has wounded the ectropion and has made it bleed.

I don't know: _____ **I agree:** _____

I disagree because _____

7. **Question:** What makes the ectropion bleed?

Answer: A. The woman examination she makes with a test. B. The nurse examination C. The conjugal relationships D. Severe constipation (because the body position and the pressure on the cervix can cause a bleeding) E. To jump and to do huge physical efforts. F. Racing – if there is no sagging of the uterus, it does not bleed because there is no rubbing whereas if there is a sagging of the uterus, a rubbing and a bleeding can exist.

I don't know: _____ **I agree:** _____

I disagree because _____

8. Question: How can we find on the test examination evident signs of a wound and a bleeding ectropion if the ectropion is in the cervix? How can a woman get up to there?

Answer: If the woman puts her entire finger as an experimented woman does, she can get up to there. A fortiori if she puts her leg in height on something and she stoops because at that moment, the uterus goes down a little bit. Indeed, the uterus is not something fixed. It is on a kind of ropes.

I don't know: _____ **I agree:** _____

I disagree because _____

9. Question: How can it be that on the side of the examination test, there are evident signs of blood due to an ectropion wound and not in the middle if the ectropion is at the entry of the cervix?

Answer: This depends on the way the woman is handling the examination test. If she introduces it by the side, the blood of the wound is automatically on the side of the test.

I don't know: _____ **I agree:** _____

I disagree because _____

10. Question: How can the ectropion be wounded? (That is to say that there are visibly signs of blood linked to the ectropion wound on the test) when apart from that, in the extremity of the test, there is a secretion whose different blood tones seem no to be linked to the ectropion?

Answer: When the woman has touched the ectropion wound, there were visibly signs of blood linked to the ectropion on the test but in parallel, there was a clean secretion coming from the uterus passing by this wound. This has become a secretion having different color tones in the vagina. Consequently, when the woman has made the examination test, a secretion which has a certain kind of blood appears on the test, in the extremity of that wound.

It is important here to underline that this is only when the blood quantity is on the extremities because here, we can say that blood has kept different color tones having passed by the ectropion wound but if the blood quantity is not in the extremities but is extending in a larger part, we cannot say that blood has different color tones because it has passed by the wound itself. In that case, we will have to compare the blood quantity on the test and the one the nurse sees when she is doing her examination test.

I don't know: _____ **I agree:** _____

I disagree because _____

11. Question: Why some examinations that the woman is doing are clean whereas others show visibly signs of an ectropion wound blood?

Answer: Different answers can exist:

- a. Because when the woman has found that the examination test she has done was clean, she didn't touch the ectropion wound but when we find visible signs of blood on the test due to the ectropion, she has touched it and has caused its bleeding.
- b. Because at the beginning, when she has done the test examination, there was a light rubbing and this didn't wound her nor caused the bleeding of the wound. But when she touched again on that part, she rubbed it again and made it bleed.
- c. Because when the results have given a clean result, that woman has drunk sufficient water; that part was not sensitive and didn't come to bleed but when we can see on the test visible signs of the ectropion wound, she didn't drink sufficiently. That area was dry more sensitive and able to bleed.

I don't know: _____ **I agree:** _____

I disagree because _____

Halachic questions related to the fact that we can link the bleeding to the ectropion wound retroactively and in the future.

The questions to come refer to:

- The spot – which as we say does not have blood evident signs due to an ectropion wound and
- The test – for the halachic teaching masters who are not expert in the evident clean blood signs due to the ectropion wound (even for the expert halachic teaching masters on evident blood signs that come from the ectropion wound, it is possible in a test and not in a spot to connect the bleeding to the ectropion wound, retroactively and in the future, beyond time. This is described later and very well described in the "Mar-e David" book].

1. **Question:** When the nurse sees an ectropion wound that bleeds when touching lightly or moderately, how many time are we sure that this wound has existed before in a similar situation that bleeds when touching in order to connect the blood we see on the test (the examination test the woman has made before she has been examined by the nurse) to the ectropion wound (so that the blood quantity that is on the test would be the same as the one that appears when the nurse is making the examination test).

Answer: If the quantity of blood the nurse sees when she examines a woman is small (until half a grain), we are not sure that this has appeared before and made this wound bleed when touching.

If the quantity of blood the nurse sees when she is doing her examination is big (more than half a grain), if the nurse doesn't see a healing process, we are sure that this has existed in a similar bleeding when touching 12 hours before.

I don't know: _____ **I agree:** _____

I disagree because _____

1. **Question:** When the nurse sees an ectropion wound that bleeds when touching lightly or moderately, how many time are we sure that it will exist in this situation in the future so that it will bleed when touching in order that we connect the blood on the test (examination that the woman will do after the nurse examination) to the ectropion wound (so that the blood quantity that is on the test corresponds to what the nurse has found when doing her examination).

Answer: If the blood quantity that the nurse sees when doing her examination is small (until half a grain), we are not sure that it will exist in the future in such a situation when touching. When the blood quantity the nurse sees when she is making her examination is big, (until one grain) and if the nurse does not see a healing process, we can be sure that it will exist also 12 hours after this in a bleeding state when touching.

I don't know: _____ **I agree:** _____

I disagree because _____

2. **Question:** When the nurse sees an ectropion wound that bleeds when touching lightly or moderately, how many time are we sure that this wound has existed before, so that a quantity of blood bigger than a grain has begun to bleed and that we can connect this spot to the ectropion wound (that the woman has seen before having proceeded to the nurse examination?).

Answer: If the nurse has seen a small quantity (until half a grain) we are not sure that she has bled before a bigger quantity than a grain, even if one hour after the spot has appeared, the woman has done the examination close to the nurse.

If she has seen a big quantity (more than one a half grain) – we are sure that this wound has bled before a bigger quantity than a grain, even 8 hours retroactively, provided that before they have discovered the spot, there was a reason for the bleeding of the ectropion (because such as we have described upper, an ectropion is not bleeding without a reason).

More than 8 hours, only 50 % can bleed by itself, if before finding the spot, there was a reason that caused the ectropion bleeding.

I don't know: _____ **I agree:** _____

I disagree because _____

3. **Question:** When the nurse sees in the ectropion a wound that is bleeding when touching lightly or moderately, how many time are we sure that this wound will exist in the future so that it will bleed by itself more than a grain quantity, so that we can connect this spot (that the woman will see after the nurse examination) to the ectropion wound?

Answer: If the nurse has seen a little quantity of blood (up to half a grain):

-up to 8 hours after the nurse has examined the woman, we are sure that this wound can bleed more than a grain (even if we don't know in that period of time what has caused the ectropion bleeding and that only the nurse examination has caused the bleeding of the ectropion (such as we have already mentioned before).

After 8 hours, before having found the spot, it's necessary that a reason has caused the bleeding of the ectropion.

If the nurse has seen a big quantity (more than half a grain)

-up to 12 hours after having realized the nurse examination, we are sure that this wound will bleed a bigger quantity than a grain (even if we ignore in that period of time the reason that should have caused the bleeding of the ectropion because the nurse examination is one reason that has caused the bleeding of the ectropion such as we have explained upper)

After 12 hours, it is necessary that before having found the spot, there was a reason that has caused the bleeding of the ectropion.

I don't know: _____ **I agree:** _____

I disagree because _____

We have to use/teach those tables only after having studied the attached letter

Rabbinat manager: Dr Bougdar 03.618.11.93 – 054.685.11.93

In order to get more information, you can ask:

Dr Bruno Rozen: 050.309.83.11

Dr Tsion Tal: 050.673.41.50

Mrs Friedberg: 054.843.20.71

Mrs Amar: 04.904.03.03 / 052.769.89.19

Because of this subject: in this table, you can find only the minimal time where the wound is existing definitely.

The test

The ectropion wound / in the cervix / the vagina / the lips

Kind of wound	Period of time when the wound exists definitely retroactively and in the future (the wound is not healing)	Quantity of blood we can connect one another	The main characteristics where we can connect to beyond time, detailed in this table
Ectropion wound	<p>If the blood quantity of this wound is until half a grain: we don't have a fixed period of time. **</p> <p>If the blood quantity of that wound is beyond half a grain: 12 hours</p>	The quantity that is in the test has to correspond to the one which has been found on the nurse examination test.	If we are sure
Wound on the cervix	<p>Small: we don't have a fixed time *</p> <p>Big: 12 hours</p>	The quantity that is in the test has to correspond to the one which has been found on the nurse examination test.	If we are sure
Wound on the vagina ----- Wound on the lips	<p>Small: we don't have a fixed time *</p> <p>Big: 8 hours</p>	The quantity that is in the test has to correspond to the one which has been found on the nurse examination test.	a. If we are sure b. If we feel pain (only if we consider that wound in the future but retroactively, there are different opinions)
Skin illness in the cervix	<p>Small: one hour *</p> <p>Big: 24 hours</p>	The quantity that is in the test has to correspond to the one which has been found on the nurse examination test.	If we are sure
Skin illness in the vagina ----- Skin illness on the lips	<p>Small: one hour *</p> <p>Big: 24 hours</p>	The quantity that is in the test has to correspond to the one which has been found on the nurse examination test.	a. If we are sure b. If we feel pain (only if we consider that wound in the future but retroactively, there are different opinions)

*small: until half a grain

* big: beyond half a grain

A spot bigger than a grain

The ectropion wound / in the cervix / the vagina / the lips

Kind of wound	Period of time when the wound exists definitely retroactively and in the future (if today, it is bleeding less than a grain)	Period of time when the wound exists definitely retroactively and in the future (if today, it is bleeding more than a grain)	The main characteristics where we can connect to beyond time, detailed in this table	The main characteristics where we can connect to beyond time, detailed in this table
Ectropion wound	Until half a grain: we don't have a fixed period of time ** More than half a grain: retroactively: 8 hours On the future: 12 hours	Retroactively. 8 hours In the future. 12 hours	When before having found the spot, a reason has caused the ectropion wound (for example the examination test made by the woman, the nurse, conjugal relationships, a severe constipation, jumping (a strong physical effort), not by itself.	We cannot connect the one with another
Wound on the cervix	We don't have a fixed period of time	8 hours	When before having found the spot, a reason has caused the ectropion wound (for example the examination test made by the woman, the nurse, conjugal relationships, a severe constipation, jumping (a strong physical effort), not by itself.	We cannot connect the one with another
Wound on the vagina	We don't have a fixed period of time	8 hours	When before having found the spot, a reason has caused the ectropion wound (for example the examination test made by the woman, the nurse, conjugal relationships, a severe constipation, jumping (a strong physical effort), not by itself.	We cannot connect the one with another
Wound on the lips	We don't have a fixed period of time	8-12 hours	If there is a rubbing: 12 hours If there is no rubbing: 8 hours	We cannot connect the one with another
Skin illness in the cervix	We don't have a fixed period of time	8 hours	This depends on the kind of the illness. Sometimes it is bleeding by itself. Sometimes it is bleeding only if there is a reason.	We cannot connect the one with another
Skin illness in the vagina	We don't have a fixed period of time	8 hours	When before having found the spot, a reason has caused the ectropion wound (for example the examination test made by the woman, the nurse, conjugal relationships, a severe constipation, jumping (a strong physical effort), not by itself.	We cannot connect the one with another
Skin illness on the lips	we don't have a fixed period of time	8 hours	When before having found the spot, a reason has caused the ectropion wound (for example the examination test made by the woman, the nurse, conjugal relationships, a severe constipation, jumping (a strong physical effort), not by itself.	We cannot connect the one with another