Objective
To describe the gestational evolution of cervical length in singletons and twins, and to analyse potential influencing factors affecting uterine cervical length measurements.

Methods
We retrospectively analysed a series of 11769 measures of uterine cervical length collected throughout the whole pregnancy between 1999 and 2007 at the University Institute IVI Valencia (Spain) in 1852 women (2008 pregnancies). The sample comprised 7556 cervical length measurements in singletons (1432 women, 1572 pregnancies) and 4213 cervical length measurements in twins (420 women, 436 pregnancies). Uterine cervical length was measured by transvaginal ultrasound using the FMF technique.

Results
Uterine cervical length remains fairly constant until mid-pregnancy, decreasing thereafter, more abruptly in twins (P<0.001). Factors determining lower cervical length in singletons are: previous miscarriages (P<0.05), previous preterm deliveries (P<0.05), uterine malformations (P<0.05) and low maternal body mass index (BMI). In twins, these factors are: nulliparity (P<0.05), low maternal age (P<0.05), smoking habit (P<0.05), uterine malformations (P<0.05) and low maternal BMI (P<0.05).

Conclusion
Normal references ranges for cervical length differ in the second half of pregnancy between singletons and twins. Epidemiological variables may influence uterine cervical length measurements.