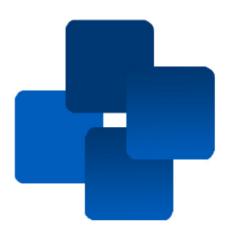


Patient Information Bartholin's Cyst / Abscess

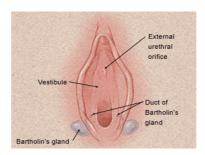
Women's Services



Introduction

A Bartholin's cyst is a small fluid-filled sac just inside the opening of a woman's vagina.

You may feel a soft, painless lump. This doesn't usually cause any problems.



However, if the cyst grows very large, it can become noticeable and uncomfortable. You may feel pain in the skin surrounding the vagina (vulva) when you walk, sit down or have sex.

The cyst can sometimes affect the outer pair of lips surrounding the vagina (labia majora). One side may look swollen or bigger than usual.

If the cyst becomes infected, it can cause a painful collection of pus (abscess) to develop in one of the Bartholin's glands. Signs of an abscess include the affected area becoming red, swollen, tender and hot. You may also notice some smelly discharge or pus leaking from the area. It can also cause a high temperature of 38°C (100.4°F) or above.

What causes Bartholin's cyst?

The Bartholin's glands are a pair of pea-sized glands found just behind and either side of the lips that surround the entrance to the vagina. The glands aren't usually noticeable.

The Bartholin's glands secrete fluid that keeps the vulva (external genital area) moist. The fluid travels down tiny tubes called ducts. If the ducts become blocked, they can fill with fluid and expand to form a cyst. You may feel quite dry in the vagina because the lubrication will not be able to flow.

It's often not known why the ducts become blocked, but some cases are linked to local infection, sexually transmitted infections, or an injury to the vulval area can cause blockage and infection of the gland. Diabetics are more prone to abscesses. Even if you are not known to be diabetic we may perform a simple blood test to confirm your blood sugar level is within normal limits if the abscess is recurrent.

Who's affected?

It's estimated that around 1 in every 50 women will develop a Bartholin's cyst or abscess at some point. The condition usually affects sexually active women aged 20 to 30.

Bartholin's cysts don't usually affect children because the Bartholin's glands don't start functioning until puberty. The cysts are also uncommon after menopause as this usually causes the Bartholin's glands to shrink.

How are these conditions treated?

Treatment may be offered as either an outpatient basis (day case) or as an admission to hospital depending on the size of the cyst, whether it is painful or if it has developed into an abscess.

Admission to hospital (for one or two days) usually means a large abscess is present and the gland needs to be drained. You may also need antibiotics to help clear any remaining infection.

The options for treatment are:

- Marsupialisation of the Bartholin's cyst/abscess, or
- Insertion of a Word Catheter.

Marsupialisation of the Bartholin's Gland

Marsupialisation is a relatively straightforward procedure that takes about 20 minutes. The procedure is performed under a general anaesthetic (whilst you are asleep), which is given to you via a needle in your arm.

The cyst is first opened with a cut and the fluid is drained out. A tiny, oval wedge of skin and underlying cyst wall is removed and the edges are held back with dissolvable stitches to encourage further drainage of the cyst or abscess. The skin edges are sealed to minimise bleeding.

The treated area will have a small dressing to soak up fluid from the wound and to help healing. This is usually removed either later the same day after surgery, or the following day. The area heals over time (usually 4-6 weeks) to allow normal drainage of the gland. The recurrence rate after this procedure is about 10 per cent.

What should I do to prepare for marsupialisation of a Bartholin's gland?

If you are able, we advise that you have a shower or bath before you come to hospital. Bring all your medications with you (if any) as well as your partner/friend/carer's telephone number. We will give you a gown to wear for the procedure. We advise that you do not bring any valuables with you, and leave them at home.

What happens on the day of my operation?

Before your operation/procedure, your doctor will ask you to sign a consent form to give us permission to perform surgery. This is to make sure that you understand the risks and benefits of having the operation. We will then ask you to change into a hospital gown and remove any jewellery, contact lenses, glasses or dentures. A member of the nursing staff will escort you to theatre.

What happens after the operation?

The nursing staff will monitor you regularly to make sure you are recovering well from your operation. You can have something to eat and drink provided you feel well enough to do so. It is important that you are able to pass urine after the operation; if you are having difficulties please let us know.

When can I go home following marsupialisation?

When you have eaten and drunk, passed urine and feel well enough to travel you will be able to go home. Although following surgery, you cannot go home by yourself – a friend or relative must escort you and should stay with you for at least 24 hours as you may still be under the effects of the anaesthetic for this time.

Is there anything I need to be aware of at home following marsupialisation?

For the next 24 hours, as you may still be under the effects of the anaesthetic, you **must not** do any of the following:

- drive a car or ride a motorbike or bicycle;
- operate any machinery (including kitchen equipment);
- drink alcohol or take any sleeping tablets, cough or cold remedies;
- make any important decisions or sign any legal documents;
- participate in sports or do any heavy work or lifting;
- travel alone on public transport.

It is important that you maintain good hygiene. Have a daily bath or shower but avoid using heavily scented soaps and talcum powder. Gently pat dry the area after washing and wear cotton underwear and loose clothing for comfort.

Do not use tampons and avoid sexual intercourse until the area has completely healed and you feel comfortable. The stitches will dissolve and fall away within 7-10 days. Remember to finish your antibiotics if you are given some to take home.

Although complications after marsupialisation are rare, they can include:

- infection;
- the abscess returning;
- bleeding;
- pain you may be given painkillers for the first 24 hours after the procedure.

If you experience any of the above, or are concerned, please contact the Woodlands Clinic for advice - details on the back page.

Word Catheter

What does a word catheter insertion involve?

This procedure involves drainage of the abscess using a small rubber tube called a **Word Catheter**. First, local anaesthetic is injected to numb the area and to relieve some of the pain you have been experiencing. A small cut is made in the swelling to drain the fluid/pus and the catheter is then inserted into the gland and held in place by a tiny water-filled balloon.

The catheter is left in place for four weeks to allow complete drainage and healing of the abscess. Eventually a new gland opening will form.

What are the benefits and risks of word catheter insertion?

The benefit of this treatment for Bartholin's cyst is that it avoids the need for surgery and a general anaesthetic. There is a good success rate and in many cases, the abscess/cyst does not return. You can also carry on with your normal life while the catheter is in place.

Risks associated with this procedure include a 10% chance that the abscess returns. You may find the procedure uncomfortable, but it is not generally painful.

There is also a chance that the catheter may fall out. It can be re-inserted but if for some reason it keeps falling out, we will discuss alternative treatment with you.

Having the catheter insertion

You will be seen in one of the gynaecology treatment rooms situated in the Woodlands Clinic (Pink zone) where one of our team will explain the procedure to you and give you the opportunity to ask questions.

We can provide you with a hospital gown to change into or you can keep your own clothes on if you prefer. You will have to undress from the waist down so it's best to wear separates for your clinic visit, i.e. skirt or trousers and a longer or loose top. When you are lying comfortably on the couch, the doctor will inject some local anaesthetic into the gland before inserting the catheter.

The whole procedure will take about five to ten minutes to complete. You will be able to leave hospital and resume your normal activities immediately afterwards.

Will I feel any pain?

The local anaesthetic will numb the area for the catheter to be inserted but as this wears off, the area around the gland will be swollen and sore. We will give you painkillers to help make you more comfortable.

Is there anything I need to be aware of at home following catheter insertion?

You can resume your normal activities (including work and exercise) once the catheter has been inserted. You can have sex when you feel comfortable enough to do so.

It is important that you keep the area clean by washing it at least twice a day in the shower. If you do not have a shower, then make sure that you rinse the area with clean water after washing and do not use scented soap, shower gel, bubble bath, bath oils or talcum powder, as these will irritate the wound.

We suggest that you use sanitary towels to protect your underwear for the next four weeks while the catheter is draining the abscess. If you have a period during this time and usually wear tampons you can continue to do so if you feel comfortable inserting and removing it. There is a small risk, however, of dislodging the catheter. If this happens, let us know.

It is also possible for the catheter to fall out completely. If this happens, contact the **Woodlands Clinic on 01438 286190** for further advice.

Will I need to visit the hospital again?

You will need to visit the hospital again following catheter insertion.

We will call you after 72 hours to provide support and to answer any concerns you may have. We will ask you to come to the Woodlands Clinic two weeks after your catheter insertion for a follow-up.

Please tell us if the catheter is uncomfortable as we can relieve this by draining some of the water from the balloon that holds the tube in place.

We will then ask you to return three weeks later for the catheter to be removed. We will make your follow-up appointments for you before you leave the department after your first visit.

What are the alternative treatments?

The treatment offered is determined by your individual needs and after discussion with your doctor.

The following are possible alternative options to those treatments already described:

 Small cysts that do not cause symptoms can be left alone and will either resolve, not requiring any further assessment, or may develop into larger cysts which could cause some discomfort.

- Cysts that cause discomfort can be treated conservatively with a course of antibiotics and may resolve, not requiring any further assessment. However, they could develop into an abscess.
- Some abscesses can burst on their own and do need to be surgically drained.
- Hot compresses can encourage an abscess to drain.
- A course of antibiotics, without any other treatment, may be offered in the first instance with a review at the Woodlands Clinic towards the end of the course.

Removing the Bartholin's gland

Surgery to remove the affected Bartholin's gland may be recommended in some cases where other treatments haven't been effective and you have repeated Bartholin's cysts or abscesses.

This operation is usually performed under general anaesthetic and takes about an hour to complete. You may need to stay in hospital for two or three days afterwards.

Risks of this type of surgery include bleeding, bruising and infection of the wound. If the wound does become infected, this can usually be treated with antibiotics prescribed by your GP.

Preventing Bartholin's cysts

As it is not clear exactly why Bartholin's cysts develop, it isn't usually possible to prevent them.

However, as some are thought to be linked to sexually transmitted infections (STIs), such as gonorrhoea or chlamydia, practising safe sex (using a condom every time you have sex) can help reduce your chances of developing a cyst or abscess.

Any further questions?

If you have any questions or concerns regarding your condition or treatment, please contact the Woodlands Clinic or your GP.

Please use like to ask:	this	space	to writ	e down	any	questions	you	may

Useful contact telephone numbers

Woodlands Clinic, Pink zone, Lister Hospital ☎ 01438 286190

(Monday to Friday, 8.00am - 8pm; Saturday and Sunday, 9am - 5pm)

Additional information

www.nhs.uk/Conditions/Bartholins-cyst

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Date of publication: September 2015

Author: SS/FC

Reference: Bartholin Version: 02 (April 2017)

Review Date: April 2020

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