



PATIENT INFORMATION

# Treatment of Bartholin's Cyst/Abscess

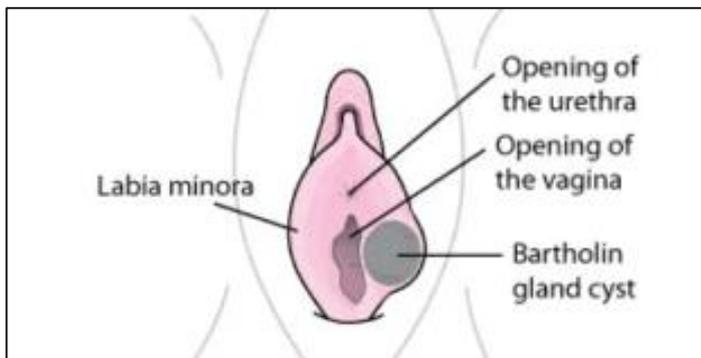


The Bartholin's glands are a pair of pea-sized glands found just behind and either side of the lips that surround the entrance to the vagina.

The Bartholin's glands secrete fluid that acts as a lubricant during sex. The fluid travels down tiny tubes called ducts into the vagina. Sometimes the tiny ducts (tubes) that carry the fluid from the glands can become blocked. This can cause a swelling, which you can feel but is not painful, called a **Bartholin's cyst** (a fluid-filled lump).

It's often not known why the ducts become blocked, but some cases are linked to sexually transmitted bacterial infections (STIs), such as gonorrhoea or chlamydia, or other bacterial infections, such as Escherichia coli (E. coli)

If the gland or cyst becomes infected, this is known as a **Bartholin's abscess**. Symptoms may include pain, and swelling causing difficulty in walking and sitting down.



## Bartholin's Abscess/ cyst

## Draining cysts and abscesses

A number of techniques can be used to drain a Bartholin's cyst or abscess and reduce the likelihood of it returning. The main procedures are described below.

### Balloon catheter insertion

Balloon catheter insertion, sometimes known as catheter placement or fistulisation, is a procedure used to drain the fluid from the abscess or cyst.

A permanent passage is created to drain away any fluid that builds up in the future. This is an outpatient procedure and would allow you to go home 30 minutes of observation after the procedure.

It's usually carried out under local anaesthetic, where you remain conscious, but the area is numbed so you cannot feel anything. It can also be carried out under general anaesthetic, where you're unconscious and unable to feel anything.

A small opening is made in the abscess or cyst and the fluid is drained. A balloon catheter is then inserted into the empty abscess or cyst. A balloon catheter is a thin, plastic tube with a small, inflatable balloon on one end.

Once inside the abscess or cyst, the balloon is filled with a small amount of salt water. This increases the size of the balloon so it fills the abscess or cyst.

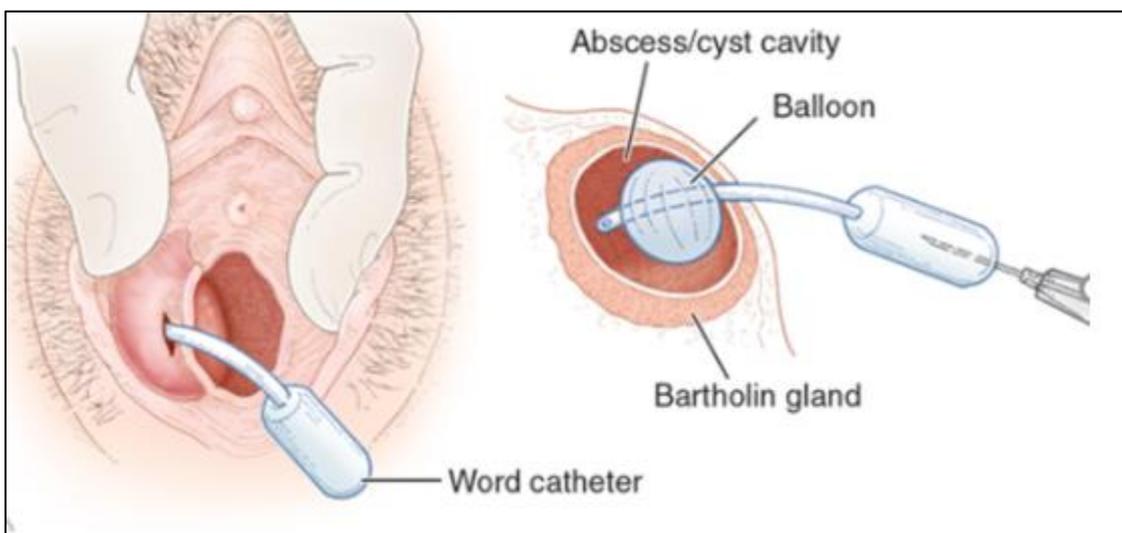
The catheter will stay in place while new cells grow around it (epithelialisation). This means the surface of the wound heals, but a drainage passage is left in place.

New draining passage usually takes around 2-4 weeks, although it can take longer. After epithelialisation, the balloon will be drained and the catheter removed in your follow-up appointment usually in 2-3 weeks in the Gynaecology Assessment Unit.

A few small studies have reported more than 80% of women healed well and their cysts or abscesses didn't return after balloon catheter insertion.

Possible complications of balloon catheter insertion include:

1. pain while the catheter is in place
2. pain or discomfort during sex
3. swelling of the lips around the opening of the vagina (labia)
4. infection
5. bleeding
6. Recurrence – the risk is very low, four in 100 people experience a recurrence.



**Picture showing placement of the Word Catheter**

### **Marsupialisation**

If a cyst or abscess keeps coming back, a surgical procedure known as marsupialisation may be used.

The cyst is first opened with a cut and the fluid is drained out. The edges of the skin are then stitched to create a small opening for the gland to drain.

When the procedure is complete, the treated area may be loosely packed with special gauze to soak up fluid from the wound and stop any bleeding. This will usually be removed before you go home.

Marsupialisation takes about 10 to 15 minutes and is usually performed as a day case procedure, so you won't have to stay in hospital overnight. It's usually carried out under general anaesthetic, although local anaesthetic can be used instead.

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

After marsupialisation, you'll be advised to take things easy for a few days. You should avoid having sex until the wound has completely healed, which usually takes about 2 weeks.

## **Removing the Bartholin's gland**

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

This operation is usually carried out under general anaesthetic and takes about an hour to complete.

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.

## **Advice after surgery**

To help your wound heal and reduce the risk of infection after surgery, you may be advised to avoid:

- having sex and using tampons for up to 4 weeks
- using perfumed bath additives for up to 4 weeks
- driving or performing tasks that need careful attention for 24 to 48 hours after having a general anaesthetic

**If your symptoms or condition worsens, or if you are concerned about anything, please call your GP, 111, or 999.**

### **Patient Experience**

We know that being admitted to hospital can be a difficult and unsettling time for you and your loved ones. If you have any questions or concerns, please do speak with a member of staff on the ward or in the relevant department who will do their best to answer your questions and reassure you.

### **Feedback**

Feedback is really important and useful to us – it can tell us where we are working well and where improvements can be made. There are lots of ways you can share your experience with us including completing our Friends and Family Test – cards are available and can be posted on all wards, departments and clinics at our hospitals. We value your comments and feedback and thank you for taking the time to share this with us.

### **Patient Advice and Liaison Service (PALS)**

If you have any concerns or questions about your care, we advise you to talk with the nurse in charge or the department manager in the first instance as they are best placed to answer any questions or resolve concerns quickly. If the relevant member of staff is unable to help resolve your concern, you can contact the PALS Team. We offer informal help, advice or support about any aspect of hospital services & experiences.

Our PALS team will liaise with the various departments in our hospitals on your behalf, if you feel unable to do so, to resolve your problems and where appropriate refer to outside help.

If you are still unhappy you can contact the Complaints Department, who can investigate your concerns. You can make a complaint orally, electronically or in writing and we can advise and guide you through the complaints procedure.

### **How to contact PALS:**

**Telephone Patient Services: 0300 123 1732 or via email at: [wah-tr.PET@nhs.net](mailto:wah-tr.PET@nhs.net)**

### **Opening times:**

The PALS telephone lines are open Monday to Thursday from 8.30am to 4.30pm and Friday: 8.30am to 4.00pm. Please be aware that a voicemail service is in use at busy times, but messages will be returned as quickly as possible.

If you are unable to understand this leaflet, please communicate with a member of staff.