Bartholin’s Cyst/Abscess

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Bartholin’s glands

Bartholin’s glands are two pea size glands that are located next to the vaginal entrance (one on the right and one on the left) and they cannot normally be seen or felt. A small amount of mucous-like fluid is made in the glands and leaves through a duct to keep the entrance to the vagina moist. If the duct becomes blocked this can form a fluid-filled swelling (a cyst). If the cyst becomes infected the swelling may become filled with pus (then called an abscess). Bartholin’s cyst or abscess affect up to 3 in 100 women and is often treated with a small operation to drain the collection of fluid or pus.

Symptoms of a Bartholin’s cyst/abscess

A Bartholin’s cyst or abscess usually only affects the gland on one side. Bartholin’s cysts which remain small and do not become infected may not give any symptoms and do not usually need any treatment. However if the cyst becomes large it may cause discomfort or pain, especially when walking, sitting, or during sex. If an abscess forms it can enlarge quickly, over hours or days, and is usually very painful. The skin over the abscess often becomes red and hot and there may be discharge from it. It may also be associated with feeling unwell and a high temperature.
Diagnosis

Bartholin’s cysts and abscesses have characteristic appearances and can be diagnosed by an examination by a doctor. No tests are usually required to make the diagnosis.

Treatments

A small cyst that does not cause symptoms may resolve by itself and often does not require any treatment. However a ‘lump’ in the area around the vagina should always be reported to your doctor and examined by them. If a cyst is large or causes symptoms it may need treatment.

A Bartholin’s abscess usually requires treatment as it can be very painful. Antibiotics may help in the early stages but a small procedure is often needed to drain the pus. The main aim of treatment is to remove the pus (to treat the abscess) and to create a new opening or duct to prevent blockage (and therefore a cyst or abscess forming) in the future.

There are different ways of treating the abscess:

1. **Bartholin Gland Balloon (Word Catheter):** performed under local anaesthetic
2. **Marsupialisation:** performed under general anaesthetic
3. **Incision and Drainage:** can be used to treat other types of cyst or abscess but is not usually recommended for Bartholin’s cyst or abscess

**The Bartholin Gland Balloon (Word Catheter)**

This technique has been designed to treat Bartholin abscesses. It is a thin rubber tube 3cm long with an inflatable balloon at one end which is inserted under local anaesthetic. A numbing (local anaesthetic) cream is applied to the cyst or abscess to make the procedure comfortable and then a small local anaesthetic injection may also be given. A small cut is made in the cyst or abscess and the fluid or pus is drained. The head of the catheter
is then inserted into the cyst or abscess and the balloon is inflated to keep the catheter in place for 2-4 weeks.

The aim of the Word catheter is to stop the opening from closing up, so that a new duct can form over the catheter. Keeping the new duct open helps to allow normal secretions from the Bartholin’s gland to escape which can help to prevent blockage in the future.

**Marsupialisation**

In some circumstances it may not be possible to perform a procedure under local anaesthetic and in these cases ‘marsupialisation’ is recommended, which is performed under a general anaesthetic.

The procedure of ‘marsupialisation’ involves making a small cut in the cyst or abscess, draining the fluid or pus and then placing some dissolvable stitches around the edges to allow the new opening to heal. This allows any fluid or pus that is left to drain freely. It also allows the normal secretions of the Bartholin’s gland to drain and helps to prevent a cyst or abscess forming again in the future.

Sometimes a small gauze dressing is used, which is left in the duct following this operation to help healing. You will be told if this has been used and when it needs to be removed following the procedure.

**Incision and Drainage**

Incision and drainage can be used to treat other types of cyst or abscess and involves simply making a small cut in the cyst or abscess and letting it drain. For example, it can be used to treat a cyst or abscess in a hair follicle. It can be performed under local or general anaesthetic.

However it is not usually recommended for cysts or abscesses affecting the Bartholin gland because it does not help the duct to stay open. This means there is a higher chance of the
Bartholin’s duct becoming blocked again leading to another cyst or abscess in the future.

Complications
As with any procedure there may be complications. The risk of complications during treatment of a Bartholin’s cyst or abscess is very small. The risks to be aware of for the Bartholin Gland Balloon (Word Catheter) and Marsupialisation include:

- Discomfort at the site where the small cut is made (and where stitches are placed in the case of Marsupialisation)
- Infection – increasing redness, inflammation or pain around the area or feeling feverish and unwell. You will be given antibiotics to help treat the abscess which greatly reduces the risk of further infection
- Bleeding – from the small cut made in the skin
- Bruising – around the abscess
- Recurrence of the cyst or abscess

If you are concerned about any of these or feel unwell following your procedure, you can contact the ward using the contact details below or see your GP.

Recovery
You may be sent home with a course of antibiotics and painkillers to take. It is important to keep the area clean and dry to help it heal. We advise using warm water to wash and avoid soaps or gels.

Bartholin Gland Balloon (Word Catheter)
While the catheter is in place it is ok to go about normal daily activities and most women are not aware of it. You may find warm baths are helpful if there is any discomfort. You are advised to avoid tampons and intercourse whilst the catheter is in place.
If the catheter should fall out do not worry – please contact the ward and you will be seen at the next appointment. Most women still find that the treatment has worked even if the catheter has fallen out.

You will be given an appointment to return to the clinic in 2 weeks – most women will have the catheter removed at this time as it will have done its job and the duct is now open. Some women may need the catheter in for a further 1 or 2 weeks.

**Marsupialisation**

Once you wake up from the general anaesthetic you will be in ‘Recovery’, which is made up of a few beds close to the operating theatres. You will stay here to rest until you are fully awake and feeling well enough to return to Cotswold ward.

On Cotswold ward the nurses will check your vital signs (blood pressure, pulse and breathing). Once you have had something to eat and drink, have passed urine and feel well enough, you will be able to go home later the same day. Very rarely we may recommend you stay in overnight, and will explain why we are recommending this for you.

Before you go home you will be seen by a doctor who will explain the procedure, check that you are well enough to go home and answer any questions.

The medicines in a general anaesthetic can stay in your system for several hours and can affect your reaction times and judgement. Here is some advice for after you have had a general anaesthetic:

- You MUST NOT drive or operate machinery (including cooker/oven) for the following 24 hours
- You should have somebody with you for the following 24 hours
- You should avoid alcohol in the following 24 hours
You should rest and take things easy until you are feeling fully recovered
You should not make important decision or sign legal documents

Recurrence

Unfortunately the Bartholin’s gland duct can become blocked again in the future which can lead to a further Bartholin’s cyst or abscess. This might mean that treatment needs to be repeated.

The Bartholin balloon catheter has been approved as a treatment for Bartholins abscesses and the risk of another abscess developing low with this treatment.

Prevention

Bartholin’s cysts or abscesses usually appear ‘out of the blue’ for no apparent reason so there is usually no way to prevent them. However some Bartholin’s abscesses are caused by sexually transmitted infections so using a condom during sex can help to prevent some cases.
How to contact us:

Southmead Hospital
Bristol
BS10 5NB

Cotswold Ward
0117 4 14 6785

www.nbt.nhs.uk

If you or the individual you are caring for need support reading this leaflet please ask a member of staff for advice.

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