Bartholin’s cyst or abscess
Information for patients

What is a bartholin’s gland?
There are two bartholin’s glands and they lie at the entrance of the vagina. They secrete a fluid via a duct that keeps the vulva (external genital area) moist.

What is a bartholin’s cyst and abscess?
Under normal conditions the glands are not noticeable, but occasionally the duct can become blocked. Bartholin’s gland cysts and abscesses are commonly found in women of reproductive age, developing in approximately two per cent of all women. A simple cyst will feel like a soft lump in the vagina, but is not usually painful. You may feel quite dry in the vagina, however, because the lubrication will not be able to flow. If the duct stays blocked, it can become infected and create an abscess in the gland, which will become swollen, red and painful. You may also notice some smelly discharge or pus leaking from the area.

What causes a bartholin’s abscess?
In most cases there is no obvious cause. However, we do know that local infection, sexually transmitted infections, large cysts or 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.

How are these conditions treated?
Treatment depends on the size of the cyst/abscess, 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, you have symptoms as described above, and the gland needs to be drained. You may also need antibiotics to help clear any remaining infection.

The options for treatment are:
1. marsupialisation of the bartholin’s abscess
2. insertion of a word catheter
Marsupialisation

What is a marsupialisation of a Bartholin’s gland?

Marsupialisation is a relatively straightforward procedure that is performed under a general anaesthetic (whilst you are asleep). A tiny, oval wedge of skin and underlying cyst wall is removed and the edges are held back with dissolvable stitches to encourage drainage of the cyst or abscess. The skin edges are sealed to minimise bleeding. 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.

Is there anything I should do to prepare for marsupialisation of a Bartholin’s gland?

If your appointment is in the morning, please do not have anything to eat or drink (not even sweets or chewing gum) after 2.00am on the morning of your operation. If your appointment is in the afternoon, please do not have anything to eat or drink (not even sweets or chewing gum) after 7.00am on the morning of your operation.

If you are able, we advise that you have a shower or bath and we will give you a gown to wear. Do not bring any valuables with you.

Bring all your medications with you, as well as your carer’s telephone number.

What happens on the day of my 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. The general anaesthetic is given to you via a needle in your arm. The procedure takes approximately 20 minutes to perform.

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. You will have a small dressing in the gland. This helps healing and drainage of the cavity, and is removed either later the same day or the following day after surgery. 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. Following surgery, you cannot go home by yourself – a friend or relative must escort you.

Is there anything I need to watch out for at home following marsupialisation?

As you may still be under the effects of the anaesthetic, for the next 24 hours, you must not

- drive a car or ride a motorbike or bicycle
- operate 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 and avoid heavily scented soaps and talcum powder. Pat or blow 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.

Word catheter

What does 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 risks and benefits 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.
Catheter insertion

We will ask you to come straight to the Gynaecology Emergency Room (GER) or to the Acute Gynaecology / Early pregnancy unit (AGU/EPAU) at Queen Charlotte’s & Chelsea Hospitals (QCCH), 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 but you can also keep your own clothes on if you prefer. While you lie on a 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 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 watch out for at home following catheter insertion?

The catheter may fall out. If this happens, contact the GER on 0203 312 2185 or AGU/EPAU on 02033135131 for further advice.

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.

Will I need to visit the hospital again?

Following catheter insertion, yes.

We will ask you to come to the Gynaecology Emergency Room one week after your catheter insertion for a check-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 alternatives?
The treatment offered is determined by your individual needs and on discussion with your doctor. The options are described below:

- Small cysts that do not cause symptoms can be left alone.
- Some abscesses can burst on their own and do need to be surgically drained.
- Hot compresses can encourage an abscess to drain.
- Antibiotics without any other treatment.

Who do I contact for more help or information?
Please call the GER at St Mary’s on 02033122185 or the AGU/EPAU at QCCH on 02033135131
and ask to speak to a nurse.

Support groups/more information
- NHS 111
  Tel: 111 or visit www.nhs.uk
- Royal College of Obstetricians and Gynaecologists
  www.rcog.org.uk

How do I make a comment about my treatment?
We aim to provide the best possible service and staff will be happy to answer any questions you may have. If you were pleased with your care and want to write to let us know we would appreciate your time in doing so. However, if your experience of our services does not meet your expectations and you would like to speak to someone other than staff caring for you, please contact the patient advice and liaison service (PALS) on 020 3313 0088 for Charing Cross, Hammersmith, and Queen Charlotte’s and Chelsea Hospitals or 020 3312 7777 for St Mary’s and Western Eye Hospitals. You can also email PALS at pals@imperial.nhs.uk. The PALS team will listen to your concerns, suggestions or queries and are often able to solve problems on behalf of patients.

Alternatively, you may wish to express your concerns in writing to:
The chief executive
Imperial College Healthcare NHS Trust
Trust Headquarters
The Bays, South Wharf Road
London W2 1NY

Alternative formats
This leaflet can be provided on request in large print, as a sound recording, in Braille, or in alternative languages. Please contact the communications team on 020 3312 5592.