

Bartholin's Cyst or Abscess

Information for patients



This information sheet explains what a Bartholin's cyst and a Bartholin's abscess are, what the various treatments involve, and the risks of having treatment. Around 2 in every 100 women (2%) will develop a Bartholin's cyst or abscess at some stage in their life. It is unclear why this happens, and there is generally little you can do to prevent it happening.

We hope this information will help to answer some of the questions you may have, but if you have any further concerns, please speak to a member of our team.

What is a Bartholin's Cyst?

Bartholin's glands are located on each side of the vaginal opening. They allow passage of fluid into the vagina which acts as lubrication. When these passages (ducts) become blocked, a fluid-filled sac can form. This is known as a Bartholin's cyst. It is not normally painful, but you may become aware of a swelling and occasional discomfort.

What is a Bartholin's Abscess?

If the cyst becomes infected, this is known as a Bartholin's abscess. These can be very sore, hot to touch, and you may notice swelling and redness around the skin surrounding the abscess. Many women find it painful to sit down or walk due to the discomfort. Cysts or abscesses normally occur on one side, and you might notice some pus leaking from it which may smell bad.

What are the different treatment options?

There are three treatment options that may be offered to you. This will depend on the size of your cyst or abscess, the symptoms you are experiencing, and whether or not it has already started to leak fluid or pus. Unfortunately, having any of these treatments does not guarantee that another cyst or abscess will not develop in the future.

Please see page 2 for treatment options.

Non-surgical treatment options

'Watch and wait' Conservative management

If your cyst or abscess is small (generally less than 3cm across), has started to discharge itself, or isn't causing you discomfort then your doctor may advise leaving it as it will likely heal over time. Simple pain relief along with soaking the area in warm water for 20 minutes, three times a day will help the cyst/abscess to discharge.

Antibiotics

If your cyst or abscess is small and your doctor feels it would be less likely to heal by itself, they may offer you a course of antibiotics to resolve your symptoms.

Surgical treatment options

If the cyst or abscess is causing a lot of symptoms, or other treatments have not worked, you may be offered surgical treatment. There are two ways of doing this, both of which aim to keep the duct open to allow the cyst to drain and then heal: Insertion of a 'Word' Catheter or 'Marsupialisation'. Please see below for details of each treatment.

'Marsupialisation'

This surgical procedure can be done when you are awake (using local anaesthetic) in the gynaecology clinic, or when you are asleep (under general anaesthetic) in the operating theatre. It takes around 10-15 minutes and involves making a small cut in the skin over the cyst or abscess and draining the fluid or pus from inside. The edges of the cyst or abscess are then stitched to the numbed area around it to keep the cut open and allow fluid to continue to drain out. Dissolving stitches are used. Sometimes a wick (a long thick thread) may be inserted into the Bartholin gland to encourage all of the trapped fluid to drain. This can be removed at home or at the hospital after 24 to 48 hours.

'Word' balloon Catheter

You will be awake for this surgical procedure which takes around 10-15 minutes. It will take place in the gynaecology clinic with a nurse assisting the doctor. The doctor will inject some local anaesthetic around the cyst to make it numb. They will then make a cut into the numbed area and drain out the fluid or pus from inside. A small, specially designed balloon will then be inserted into the cyst or abscess and inflated with sterile water. This will stay in place for up to 4 weeks to allow a new tract to form. Sometimes the balloon falls out before this, and sometimes it may need reinserted to continue to allow the area to heal. 86% of patients who had this procedure performed in our unit were happy that their symptoms had resolved within 4 weeks.

Surgical treatments are suitable for Bartholin's cysts or abscess greater than approximately 3cm across. If you have any allergies to local anaesthetic or any skin cleaning agents, please let your doctor know.

What can I do afterwards?

If you have any discomfort, this should be manageable with paracetamol and/or ibuprofen. You should be able to carry out normal daily activities with the catheter in. Strongly perfumed shower gels or washes should be avoided. Vigorous exercise may be uncomfortable in the first couple of days. If it is comfortable, you may resume sexual intercourse. If you are using tampons, take care to not accidentally dislodge the balloon when removing the tampon.

What if the Word Catheter falls out after I go home?

If the balloon falls out before it has been in place for 5 days, please contact your local Gynaecology Team to let them know and a new one can be inserted. If the balloon has been in place for at least 5 days before it fell out, but you have ongoing symptoms, please let the team know and they will arrange to review you again. You do not need to keep the balloon.

What is the follow up for the Word Catheter?

You will be followed up with a phone call after 3-4 weeks and if the catheter is still in, we will make an appointment to remove it. This is very simple and just involves removing the fluid from the balloon; there is no need for further anaesthetic.

What if it happens again?

If a further Bartholin's cyst or abscess develops, please see your GP who can refer you to the Gynaecology Team if needed. Treatment options remain as described in this leaflet.

Contact telephone numbers

You will be able to go home immediately after a procedure done under local anaesthetic, or 2-4 hours after general anaesthetic. You should not drive the same day as a having general anaesthetic, so you will need to arrange to be picked up afterwards.

You can help the area to heal by keeping it clean and dry. If you are given antibiotics, make sure you complete the course. The stitches used are dissolvable and will disappear or fall out over 10-14 days. If you are concerned that it is not healing or you feel unwell (bleeding, increased swelling or redness in the area, fever, increase in pain) then see your GP, call 111, or contact the hospital where you had your treatment:

Royal Infirmary of Edinburgh:

Gynaecology Triage: 0131 242 2551 (Mon-Fri 08:30 –16:30hrs)

Ward 210 Gynaecology: 0131 242 2104 (at other times)

St John's Hospital, Livingston:

Ward 12 Gynaecology: 01506 524 112 (24 hours/day)

