

Post treatment care

- You should wear a sanitary pad to absorb discharge, not tampons until the area has healed. There may be some bleeding or discharge from the surgical area. This should only last for about one week.
- Keep the area as clean and dry as possible. This can be achieved by washing the area with warm water every time you pass urine. Avoid using soaps and body washes. The area should be patted dry after each washing or use a hairdryer on cool setting.
- Avoid spas, bath and swimming pools for 6-8 weeks.
- You should maintain pelvic rest, (i.e. nothing in the vagina) while the Word catheter is in place or any incision is healing.
- Simple pain relief such as paracetamol should be all the pain relief that is required.
- It is important to ensure you are passing urine well and as frequently as you normally would. It is also important to ensure a regular bowel habit is maintained. Ensure a high fiber diet and fresh fruit and vegetables to avoid constipation.
- If you are prescribed antibiotics by the doctors, you must complete the full course.

The Word catheter is left in place for at least four weeks to promote formation of a tract so any fluid can continue to drain.

If you experience persistent discomfort despite pain relief, seek medical advice. You should call to be examined if you experience increasing swelling, pain, vaginal discharge/bleeding, or fever.

Follow-up

We will arrange for you to return to the EPAU clinic at Greenlane Clinical Centre in 4 weeks to have the catheter removed.

If the word catheter falls out before 4 weeks and the pain and swelling still persists, you may need a repeat Word Catheter placement or another procedure. If the problem has resolved, then you may not need to have follow up and can be discharged to be seen by GP.

If recurrent cysts occur, then marsupialisation or excision can be performed, usually in an operating room or ambulatory surgical facility.

Te Whatu Ora
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Te Toka Tumai Auckland

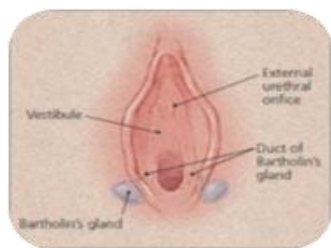
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Te Whatu Ora
Health New Zealand

**Bartholin's
Cyst/Abscess**

What is a Bartholin's cyst?

All women and girls have 2 Bartholin's glands just below the opening of the vagina. The Bartholin's glands make small amounts of fluid. The fluid helps keep the vulva moist. (The vulva is the area around the opening of the vagina.) If something blocks the opening of a Bartholin's gland, fluid can build up and become a small sac of fluid called a cyst. This usually happens in just 1 gland, not both at once. If this fluid then becomes infected, it is then called a Bartholin's abscess.



What are the symptoms?

For a Bartholin's gland cyst

Most women notice a lump in the vulva, but Bartholin's gland cysts often do not cause any other symptoms. If they do, the main symptoms are pain or discomfort when a woman walks, sits, or has sex.

For a Bartholin's gland abscess

If a Bartholin's gland cyst gets infected, it can form an abscess. An abscess is an infected lump. Symptoms of an abscess include:

- Severe pain – A woman might not be able to walk, sit, or have sex.
- Swelling
- Redness

Will I need tests?

Maybe. If you have an abscess, the doctor or nurse will send a sample of the pus to a lab for testing. This can show what type of germ caused the infection. You might need antibiotics for an infection caused by certain germs.

If you are older than 50, the doctor or nurse will do a test called a "biopsy" to check for cancer. (Cancer in a Bartholin gland is rare, but it can happen). In this test, the doctor takes a small sample of tissue from the area and sends the tissue to a lab. Another doctor looks at it under a microscope to check for cancer.

How is a Bartholin's gland cyst treated?

Treatment depends on your age and whether the cyst is causing symptoms. If you do not have symptoms, you might not need any treatment. Otherwise, treatments can include:

Antibiotics

Doctors give these medicines if an abscess is caused by certain types of infection. These are not always needed.

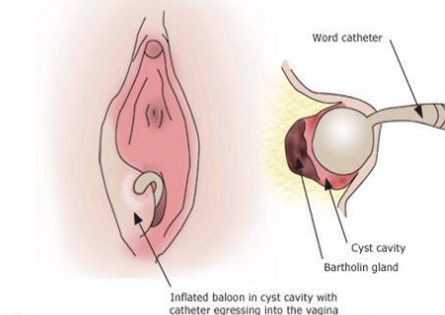
Draining the cyst or abscess

This is called placing a Word Catheter.

In this procedure, the doctor cuts a small hole to let fluid or pus out. Then the doctor puts a tiny balloon in the hole to keep it from closing completely. The balloon is connected to a tiny tube called a "catheter" that helps fluid drain from the Bartholin's gland. This procedure is normally done in the Women's Assessment Unit, but if you

have a large or deep abscess, you might need treatment in the operating theatre. The nurse takes the balloon out after about 1 month. It leaves a small opening where fluid can drain.

Placement of Word catheter in a Bartholin gland cyst cavity after drainage



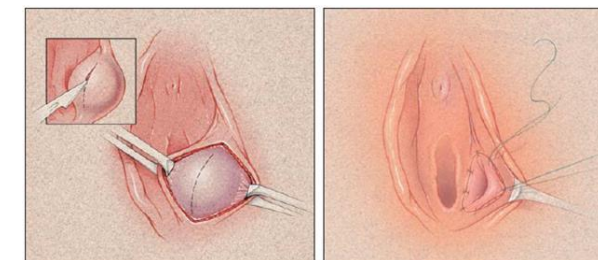
Inflated balloon in cyst cavity with catheter egressing into the vagina

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Surgery

Surgery is used if draining fluid and putting in a balloon does not work well. This may be:

1. Under a general anaesthetic a doctor can make a new opening to help drain the fluid. The abscess can be kept open using stitches so that all the pus will drain. This is called Marsupialisation.
2. A doctor can remove the gland and any cyst or abscess. Surgery has a higher risk of side effects than other treatments, so it is not done as often.



Marsupialization of Bartholin's duct cyst. (Left) A vertical incision is made over the cen-