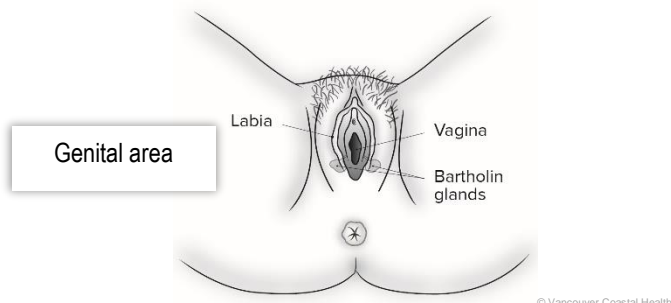


Bartholin Gland Cyst or Abscess

What are Bartholin glands?

Bartholin glands are 2 glands the size of a pea on either side of the vagina opening.



Normally, you cannot see or feel these glands. They make small amounts of fluid. The fluid helps keep the opening of the vagina moist. This fluid drains through a tiny opening called a duct.

What is a Bartholin gland cyst?

Sometimes one of the ducts gets blocked. When this happens, the fluid cannot get out. The gland swells with fluid, forming a cyst. If the cyst gets infected, the swelling fills with pus and we call this an abscess.

How do I know I have a cyst or abscess?

Usually, cysts are small and do not get infected. You might not even notice you have a cyst except for feeling a small lump. If the cyst gets larger, you might have some pain, especially when walking, sitting, or when you have sex.

If an abscess forms:

- It can get very painful very quickly.
- The skin over the abscess is often red and hot to touch.
- You could have some pus draining from it.
- You might feel unwell and have a fever over 38.0°C (100.4°F).

Appointments after treatment

See your family practitioner or surgeon in 6 weeks.

My appointment is on: _____

Will I need tests?

If you have an abscess, the doctor might take a sample to find out what kind of germ caused the infection.

If you are 50 years or older, the doctor might take a sample of cells from the gland called a biopsy to check for cancer. While cancer in a Bartholin's gland is rare, it can happen.

How is a cyst or abscess treated?

How you are treated depends on your age and how the cyst is affecting you.

Small cysts that do not cause you any pain or discomfort usually go away on their own. If it doesn't bother you, it is often better to leave it alone. However, you should always report any lumps around your vagina to your doctor.

Soaking in a warm bath several times a day can help small abscesses break open and drain on their own.

Large cysts and abscesses need to be treated. The main goal is to prevent cysts and abscesses in the future. To do this, the doctor removes the fluid or pus and opens the duct or makes a new opening (see the next page).

Family practitioner – Refers to family doctor or nurse practitioner

Different ways to treat large cysts and abscesses

Drain the cyst or abscess:

- Your skin is numbed with medicine similar to dental freezing.
- The doctor makes a small cut (incision) in the cyst or abscess to allow the fluid or pus to drain out.
- The doctor might put a small, rubber drain tube (catheter) with a small balloon on the end inside the cyst or abscess.
- The balloon is inflated to hold the tube in place and keep the cyst or abscess open to drain while it heals.
- The catheter might fall out on its own in the first 2 weeks. If not, your doctor removes it in about 4 to 6 weeks.

Antibiotics:

- Your doctor might prescribe antibiotics if the cyst is infected or if tests reveal you have a sexually transmitted infection.

Procedure to keep gland open:

(Called marsupialization – say *mar-soo-pee-ul-eye-zay-shun*)

- An anesthesiologist gives you medicine to sleep through the surgery.
- The doctor makes an incision in the cyst or abscess.
- Stitches (sutures) are put in around the edges of the incision to hold the incision open and allow the fluid or pus to drain out while the new opening heals.

Gland and cyst/abscess removal surgery:

- Done only when other treatments do not stop cysts from forming.

Caring for yourself after treating the cyst or abscess

Your incision

Wear a sanitary pad for the next week to absorb any fluid, pus, and/or blood.

Do not use tampons until the area has healed.

Keep the area as clean and dry as possible.

- Wash the area with warm water after each time you go pee (urinate).
- Pat the area dry or blow the area dry with a hairdryer on cool setting.
- Wear cotton underwear and loose clothing.
- **No** soaps, gels, body washes, creams, lotions, or ointments on the area, unless directed by your doctor.
- **No** baths, swimming, or hot tubs for the next 6 to 8 weeks.

Any stitches (sutures) you might have will dissolve or come out on their own.

If taking antibiotics, make sure you continue to take them until they are all finished.

Activity and Rest

Rest the area while it is healing. This means nothing in your vagina until your doctor tells you it is okay (for up to 6 weeks).

If it hurts to sit, try sitting on a doughnut-shaped pillow.

Depending on the type of work you do and how you feel, you might need to take 2 to 5 days off.

Ask your doctor when you can drive. **Do not drive or drink alcohol** if you are taking an opioid medication.

Drinking and Eating

You might feel sick to your stomach (nausea) or throw up (vomit). This should not last long. It is important to stay hydrated.

You might get constipated if you are less active, eating less fibre, or taking opioid pain medication. It is important to prevent constipation so you don't strain to have a bowel movement.

To prevent constipation:

- Drink at least 6 to 8 glasses of liquid each day (unless you have been told differently because of a medical condition).
- Eat high fibre foods such as bran, prunes, whole grains, vegetables, and fruit.
- Walk and move around as much as you can.

If you continue to be constipated, talk with a pharmacist or family practitioner about taking a laxative.

Managing pain

If you have been living with pain before this, be sure to tell the doctor or surgeon how you manage this pain, such as with medicines, herbs, supplements, cannabis products, other substances, massage, yoga, meditation, etc. This helps us create the best plan with you for managing pain after surgery.

The doctor or surgeon gives you instructions to take pain medicine. This might include non-prescription pain medicines, a prescription for an opioid (narcotic), or both.

Take your pain medicine regularly for the first day or so, even if you have just a little pain. Also, do other things to help ease your pain or distract you from the pain, such as slow breathing, listening to music, watching T.V.

You might have some bruising and swelling in the area. This goes away in a week or so. To reduce the swelling and ease the pain, put a gel pack or ice in a cloth (such as a pillow case) and place over your incision area for 10 to 20 minutes, 4 to 6 times a day, for the first 2 days.

Non-prescription pain medicines:

- acetaminophen (Tylenol®)
 - non-steroidal anti-inflammatory drugs (NSAIDs)
- Examples: ibuprofen (Advil®, Motrin®)
 naproxen (Naprosyn, Aleve®)

NSAIDs are not for everyone. If you have (or have had) health problems such as stomach ulcers, kidney disease, or a heart condition, speak with your family practitioner or surgeon before using NSAIDs.

Prescription pain medicines with opioids (narcotics):

- Tramacet® (tramadol and acetaminophen)
- Tylenol #3® (codeine and acetaminophen)
- Oxycocet® / Percocet® (oxycodone and acetaminophen)

Note: These medications also have 300 to 325mg acetaminophen in each tablet. All total, **do not** take more than 4000mg of acetaminophen in 24 hours (too much can harm your liver).

Always read the label and/or information from the pharmacist about how to take medication safely.

Questions about medications?

Speak to your local pharmacist.
 After-hours, call 8-1-1 and ask to speak to a pharmacist.

Safe use of opioid pain medicines

If you are using any medicines that have opioids (narcotics) in them, take note of the following safety information.

- Tell your surgeon if you have sleep apnea. Opioids can make your sleep apnea worse.
- Your pain should lessen over the first week. You should not need to take opioid pain medicine for more than 1 week.
- Always use the least amount possible for the shortest amount of time.
- Common side effects include constipation, feeling sick to your stomach (nausea), a dry mouth, sweating, dizziness, and feeling drowsy.
- **Do not** crush, cut, break, chew, or dissolve opioids before taking. Doing this could cause serious harm, even death.
- While taking opioid pain medicines, **do not** drive, drink alcohol, or start taking any new sleeping pills.
- Store opioid medicines in a secure place. Keep out of sight and out of reach of children, teens, and pets.
- Never share your opioid medicine with anyone else.
- Take any unused opioid medicines back to your pharmacy to be safely disposed.
Do not keep unused medicines at home.

When to get help

Call your family practitioner or surgeon

if you have any of the following:

- a fever over 38°C (101°F)
- pain does not ease with pain medicine, or stops you from moving or recovering
- swelling in the area that gets worse
- a bad smell or fluid coming from the area
- bleeding from the area that does not stop or gets worse
- stinging, burning, or pain when going pee (passing urine)
- throwing up and cannot drink any liquids

Can't contact your surgeon or family practitioner?

Have any questions about your recovery?

• Call Fraser Health Virtual Care

10:00 a.m. to 10:00 p.m., daily

1-800-314-0999

fraserhealth.ca/virtualcare

• Call 8-1-1 (HealthLinkBC) to speak to a registered nurse any time - day or night.

HealthLinkBC is available in 130 languages.

For an interpreter, say your language in English.

Wait until an interpreter comes on the phone.

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www.fraserhealth.ca

This information does not replace the advice given to you by your health care provider.