

## DEVELOPMENTAL CYST OF VAGINA

by

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The common cysts of the vagina are inclusion cysts and Gartner's duct cysts. Besides cysts can arise from some aberrant glands in the vaginal walls (Bourne and Claye, 1963). In the present communication a huge cyst in the posterior vaginal wall is described whose origin is uncertain.

### CASE REPORT

Mrs. A.B., aged 28 years was admitted in hospital on 17-11-1977 with the complaint of something coming down per vagina for last 12 years. She was married at the age of 22 years and had an uneventful term delivery at the age of 26 years. The swelling which was present before her marriage went on steadily increasing in size and compelled her to seek medical advice.

**Menstrual History:** Regular.

**General Examination:** Nothing abnormal.

### Local Examination:

There was a large cystic swelling about 8" x 5" x 3" lying underneath the posterior vaginal wall (Fig. 1) The vaginal mucosa was keratinized at places. Downwards the cyst extended almost upto the hymeneal margin (Fig. 2). The cervix was smooth and could be visualised with difficulty. The size of uterus could not be determined.

Rectal examination confirmed that the cyst was situated anterior to rectal wall.

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A provisional diagnosis of 'developmental cyst' of vagina was made and she was operated on 28-11-1977.

### Operation Note

A midline incision was made over posterior vaginal wall. The dense adhesions between the cyst wall and vagina and rectum were separated. But during the process of dissection the cyst ruptured discharging mucoid material. The cyst wall, however, was excised completely with patience and care. The upper limit of the cyst encroached almost upto the floor of pouch of Douglas. Haemostasis was secured. The redundant vaginal mucosa was excised and the vaginal walls were apposed leaving a corrugated rubber drain in the lowermost part. The drain was removed on the following morning. The post-operative period was uneventful and she was discharged on 14th postoperative day. The patient was reviewed 5 months after the operation and no recurrences have been noticed so far.

### Histological Report

Multiple sections from the cyst wall revealed flat cuboidal epithelium lining the cyst. The cyst wall was composed of vascular and oedematous fibromuscular tissue (Fig. 3).

### Discussion

Cysts in the posterior vaginal wall are usually due to inclusion cyst following trauma at childbirth or surgery. Developmental cysts are rare. In this case the origin was uncertain.

### Summary

A large cyst in the posterior vaginal wall is described. It is possible that the

cyst originated from some aberrant glands in the vaginal wall.

**Acknowledgement**

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**References**

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2. Novak, E. R. and Woodruff, J. D.: "Novak's Gynaecologic and Obstetric Pathology", 7th Ed., 1974, P. 58. W. B. Saunders & Co., London.

See Figs. on Art Paper IX