



# Transvaginal Drainage for Pelvic Fluid Collections: An Alternative Approach

골반 내 액체 저류의 경질 배액술: 대안적인 천자경로

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Percutaneous drainage has become the preferred treatment modality for intra-abdominal and pelvic abscesses, largely replacing more invasive surgical interventions. Drainage of fluid collections deep in the female pelvis, however, poses unique technical and clinical challenges for interventional radiologists (1, 2). In particular, a successful drainage procedure must accomplish two main objectives: first, to evacuate the initial purulent or hemorrhagic contents of the abscess cavity; and second, to maintain continuous drainage through a catheter, thereby removing debris and preventing re-accumulation (3, 4).

Selecting an appropriate access route is crucial, and requires balancing several factors. The path to the fluid collection should be as direct, safe, and short as possible, while avoiding critical structures, such as the bowel and major vessels. Conventionally, interventional radiologists have relied on several routes to gain access to pelvic fluid collections, including anterior transabdominal, transgluteal, transrectal (endorectal), and transvaginal approaches. Of these, a transabdominal approach is often preferred because of the ease of catheter placement and patient comfort. However, deep pelvic lesions may be inaccessible if the bowel, bladder, uterus, or bony and vascular structures interfere (5). In such instances, either a transrectal or a transvaginal route can provide a safe alternative (6-8).

Lee et al. (8) reported on an important study of transvaginal drainage for pelvic abscesses, highlighting its efficacy and safety profile. When deep pelvic abscesses cannot be drained by a conventional transabdominal or transgluteal route, whether because of challenges in patient positioning or complex pelvic anatomy, a transvaginal approach provides precise, minimally invasive access, particularly with a smaller-bore drainage catheter (e.g., 7 Fr) and shorter access route. Moreover, real-time ul-

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trasound guidance enhances the accuracy and safety of catheter placement.

I hope that this approach will expand the options available to interventional radiologists for the management of pelvic abscesses. Transvaginal drainage can be an excellent choice for some patients, offering shorter procedure times, reduced discomfort, and a lower risk of injury to the surrounding structures.

### Conflicts of Interest

The author has no potential conflicts of interest to disclose.

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