

# Ganglion Cysts

## What is a Ganglion?

- Ganglions are cyst that originate from joints of tendon sheaths in the body.
- They are filled with joint fluid that condenses over time and forms a gel.
- The fluid escapes through a small gap in a joint capsule or tendon sheath
- Ganglions **are not** dangerous or cancerous. They are usually very unlikely to cause permanent harm, if left untreated.

## What causes a Ganglion Cyst?

- The exact cause of Ganglions is unknown,
- An injury or heavy use can cause a ganglion to get bigger
- A joint with arthritis is more likely to develop a ganglion
- It occurs most commonly between ages of 15-40yrs

## How does it present?

- Most ganglions present with a **lump**.
- A small ganglion may not be visible but can **cause pain**.
- Ganglions can **fluctuate in size**.
- Ganglions can press on nerve and cause pins and needles and/or numbness.
- Ganglions can rupture. If superficial they discharge clear fluid.
- An ultrasound can confirm the diagnosis of a ganglion.
- Ganglions can occasionally spontaneously resolve, especially in children.

## What can be done?

- **Immobilisation** with brace/splint to help reduce size of ganglion and relieve pressure on nerves.
- **Aspiration** draining the fluid out of the ganglion with a needle can help alleviate symptoms but will not prevent the ganglion from reforming.
- Use of an anti inflammatory, for discomfort caused by a ganglion.

## When is surgery considered?

- When non operative treatment is unsuccessful
- If there is persistent pain or discomfort
- If the ganglion is interfering with movement/function of a joint
- If symptoms
  - Stop you doing the '**things you have to do**' and/or
  - The '**things you love to do**' in life
- If you would prefer a **definitive cure** for the problem.
- If appearance is unacceptable

## How does surgery work?

- This surgery is usually done under general anaesthetic
- It is done as a day case in a hospital
  - but you cannot drive home after the procedure
  - and you should not be home alone on the night of your surgery

## What do we do in surgery?

- A skin incision is made directly over the ganglion
- The ganglion is removed including the sac and an area of joint capsule where the ganglion originates. Removing the "stalk" minimizes the chance of recurrence.
- Local anaesthetic is injected around the wound for pain relief
- The wound is closed and a dressing and bandage are applied.

## After the Surgery

### In Hospital

- A large bandage is applied to the hand.
- It is important that the hand remains elevated 'higher than your heart' to help limit swelling
- Do not hesitate to ask for pain killers. It is much better to 'stay on top of pain', than 'to catch' up when it is severe.
- If the bandage feels too tight, do not hesitate to remove it.
- It is usual to leave hospital 2-3 hrs after surgery

### At Home

- Continue to elevate your arm until swelling in your fingers subside.
- Move your fingers (making a full fist and straightening your fingers out fully about 10-20 times a day).
- Keep the wound dry covered and clean.
- If it is not uncomfortable, leave the bandage in place until your first appointment after surgery
- Blood thinning medication (if you are on any) can be started 2 days after surgery
- An appointment usually arranged with my practice nurse at about 1-2 weeks after surgery.

### The Recovery

- The wound usually heals over 1-2 weeks and any sutures are then removed
- **Self care** (washing, dressing, eating) with the operated hand – usually around 5 days
- **Driving:** when you are able to control a steering wheel with your operated hand and you are not taking strong pain relief anymore (usually 5-10 days post surgery)
- Most **moderate activities** (equivalent to lifting a pot of the stove or pouring a full kettle) can usually be achieved by 4-6 weeks,
- It can take **3-6 months for stiffness and deep scarring** in the site of the operation to resolve.
- Returning to **heavy manual activities can take 3-6 months**

- **Golf, fishing, cycling etc.:** usually around 3-4 months, but it can be longer (6 months)

### **What can go wrong?**

- **Infection**
- **Stiffness** of the joint (wrist/finger). You will be given some exercises to do at home, but may need hand therapy.
- It is common to have a bit of **numbness next to the scar**. Sometimes the scar can be very sensitive for a long time
- **Recurrence**, the excision may be unsuccessful and need to be done again.
- **Very rarely** (around one in a thousand) a severe pain reaction, (CRPS) can develop, which can be disabling for years.
- A **anaesthetic** can have complications, such as nausea, heart and lung problems. Please discuss it with your anaesthetist before the operation.

### **What can you expect the final outcome to be?**

Full recovery is usually expected