Treatment. Treatment of ganglion cysts may be simply watching for any changes. However, if the cyst is painful, limits activity, or its appearance is unacceptable to the patient, other treatment may be recommended.

Treatment may include removing fluid from the cyst with a needle and/or the wearing of a splint to keep the hand or wrist from moving. If these nonsurgical treatments fail, surgery to remove the cyst may be recommended by your hand surgeon.

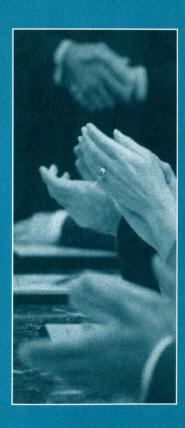
The goal of surgery is to remove the source of the cyst. This may require removal of a portion of the joint capsule or tendon sheath next to the ganglion. If the ganglion is removed from the wrist, a splint may be recommended following surgery. Some patients may feel tenderness, discomfort, and swelling at the site of their surgery a little longer than others, but full activity can be resumed once comfort permits. While surgery offers the best success in removing ganglions, these cysts may return.



Ganglion Cysts

### **MISSION STATEMENT**

The mission of ASSH is to advance the science and practice of hand surgery through education, research and advocacy on behalf of patients and practitioners.





American Society for Surgery of the Hand

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Figure 1

Ganglions, palmar wrist and base of finger.

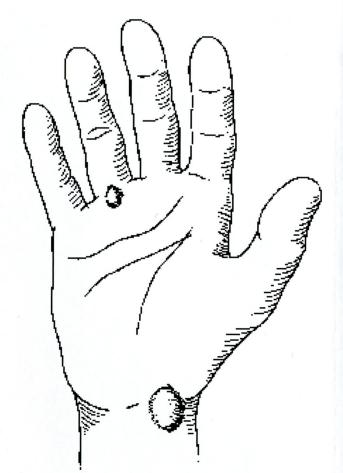


Figure 2

Ganglion dorsum of wrist and end joint of the finger (mucous cyst).

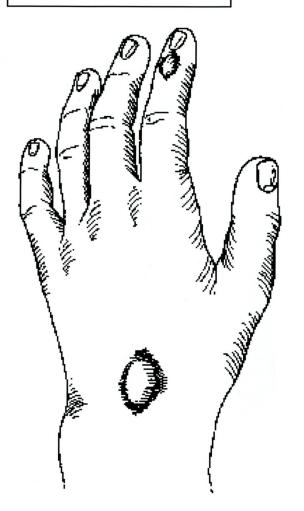
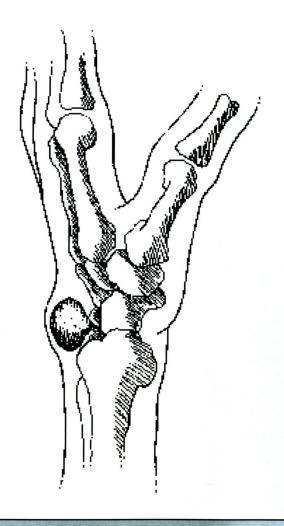


Figure 3

Cross-section of wrist showing root of ganglion.



hat is it? Ganglion cysts are very common masses (lumps) that sometimes grow in the hand and wrist. The cysts are generally found on the top of the wrist, on the palm side of the wrist, the end joint of a finger (mucous cysts), and at the base of a finger (see Figures 1, 2, 3).

Ganglion cysts usually come from nearby joints or tendon sheaths. There is no specific cause. These cysts can be painful, especially when they first appear or with constant or strenuous use of the hand. Ganglions often change in size and may disappear completely. These cysts are not malignant (cancerous).

**Diagnosis.** The diagnosis of a ganglion cyst is usually based on where the cyst is and what it looks like. Your hand surgeon may recommend X-rays to rule out problems in nearby joints.

¿Que es? Los quistes sinoviales o gangliones son masas (protuberancias) muy comunes, que algunas veces crecen en la mano y en la muñeca. Los quistes se encuentran generalmente en la parte superior de la muñeca, lado palmar de la muñeca o en la última articulación de un dedo, (quiste mucoso), y en la base de un dedo. Los quistes sinoviales o gangliones usualmente se originan de articulaciones vecinas o vainas tendíneas. No hay una causa específica. Estos quistes pueden ser dolorosos especialmente cuando recién aparecen o con el uso constante y demandante de la mano. Los gangliones frecuentemente cambian de tamaño, también pueden desaparecer por completo. Estos quistes no son malignos (cancerosos).



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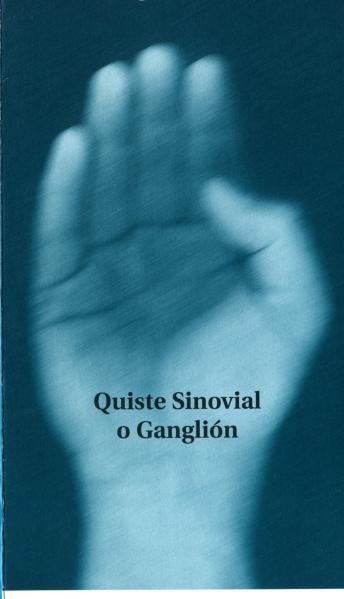




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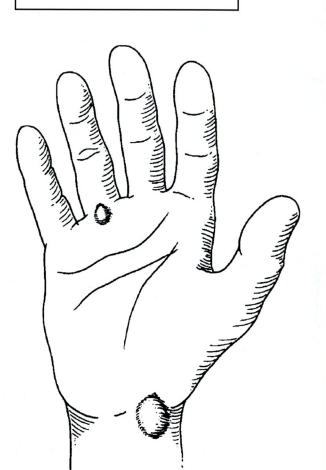
# Sociedad Americana de Cirugía de la Mano



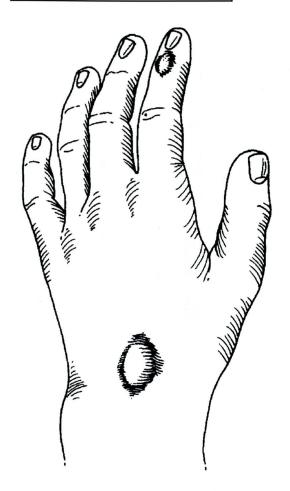


American Society for Surgery of the Hand

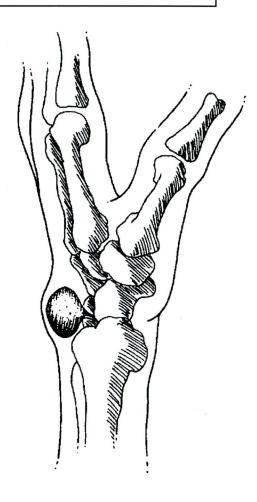
**Figura 1** Ganglión del dorso de la muñeca y en la articulación distal de un dedo (quiste mucoso).



**Figura 2** Ganglión en zona palmar de la muñeca y base de un dedo.



**Figura 3** Corte transversal de la muñeca mostrando la raíz de un ganglión.



Diagnóstico. El diagnóstico de un quiste sinovial o ganglión usualmente se basa por donde este situado y que aspecto tiene. Su cirujano de mano puede recomendarle una radiografía para descartar lesiones en las articulaciones vecinas.

Tratamiento. El tratamiento de un quiste sinovial o ganglión podría ser simplemente la observación de cualquier cambio. Sin embargo, si el quiste es doloroso, limita la actividad, o su apariencia es inaceptable al paciente, se podría recomendar otro

tratamiento. El tratamiento podría incluir la eliminación del fluido del quiste aspir·ndolo con una aguja y/o el uso de una férula o splint para evitar el movimiento. Si estos tratamientos no quirúrgicos fallan, su cirujano de mano podría recomendarle una cirugía para eliminar el quiste.

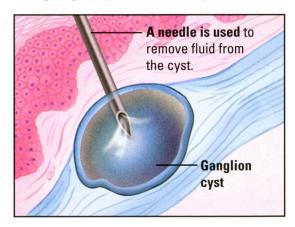
El objetivo de la cirugía es el eliminar el origen del quiste. Esto podría requerir la extracción de un trozo de c·psula articular o de vaina tendínea cercana al ganglión. Si el ganglión es extraído de la muñeca, es posible recomendar una férula o splint para el período post operatorio. Algunos pacientes pueden sentir dolor, molestias e inflamación en el sitio de la cirugía, algún tiempo m·s prolongado que otros, pero la actividad completa puede ser reasumida una vez que ceden las molestias. Aún cuando la cirugía ofrece los mejores resultados de éxito en la extracción de los gangliones, estos quistes pueden recurrir.

# **Treating a Ganglion Cyst**

Your doctor may just watch your ganglion cyst. Many shrink and become painless without treatment. Some disappear altogether. If the cyst is unsightly or painful, or makes it hard for you to use your hand, your doctor can treat it or, if needed, remove it surgically.

# **Nonsurgical Treatment**

To shrink the cyst, your doctor may massage the fluid back into the surrounding tissue, or remove (aspirate) the fluid with a needle. If the cyst hurts, your doctor may also give you an injection of an anti-inflammatory, such as cortisone, to relieve the irritation. Your hand may then be wrapped to help keep the cyst from recurring.



# Surgery

If the cyst reappears after treatment, your doctor may remove it surgically. A section of the tissue that lines the joint or tendon is removed along with the cyst. This helps prevent another cyst from forming. Usually, only your hand or arm is numbed, and you can go home a few hours after surgery. Your hand may be in a splint for several days.

# **Common but Harmless**

Ganglion cysts are quite common. Many people get them at some time in their lives. These cysts are not dangerous, and often go away on their own. Ganglion cysts are never cancerous, and don't lead to other problems in the hand. Rarely do they keep you from doing the things you enjoy, such as playing sports or a musical instrument.



### Consultant:

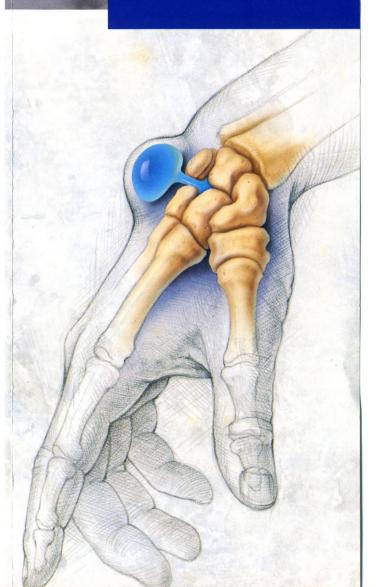
H. Relton McCarroll, Jr., MD, Orthopaedic Surgery

This brochure is not intended as a substitute for professional medical care.

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# Ganglion Cysts



# What Is a Ganglion Cyst?

A ganglion (GANG-lee-on) cyst is a firm, fluid-filled lump that can suddenly appear on the front or back of the wrist or at the base of a finger. These cysts grow from normal tissue in the wrist and fingers, and range in size from a pea to a peach pit. Although ganglion cysts are common, they don't spread, and they don't become cancerous. They can occur after an injury, but many times it isn't known why they grow. Ganglion cysts can change in size, and may go away on their own.

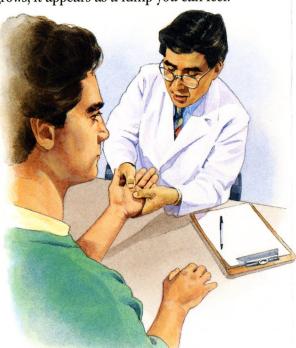
# **Symptoms**

A ganglion cyst is sometimes painful, especially when it first occurs. Constantly using your hand or wrist can make the cyst enlarge and hurt more. Some hand and wrist movements, such as grasping things, may also be difficult.



# How a Ganglion Cyst Develops

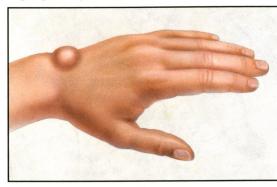
Your wrist and hand are made up of many small bones that meet at joints. Tendons attach muscles to the bones at the joints. The tendons allow the joints to bend and straighten. Both tendons and joints are lined with tissue called **synovium**. This tissue produces a thick fluid that keeps the joints and tendons moving easily. Sometimes the tissue balloons out from the joint or tendons and forms a cyst. As the cyst fills with fluid and grows, it appears as a lump you can feel.



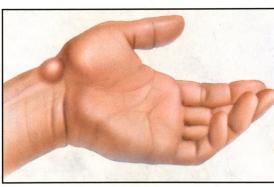
# **Where Ganglion Cysts Occur**

A ganglion cyst can occur anywhere on the hand near a joint. Cysts most commonly appear on the back or palm side of the wrist, or on the palm at the base of a finger. Your doctor can usually diagnose a cyst by examining the lump. He or she may draw off a little fluid or order an x-ray to rule out other problems.

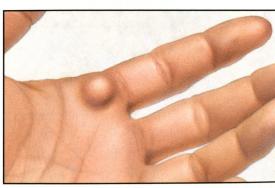
A ganglion cyst can occur...



... on the back of the wrist,



...on the palm side of the wrist,



...or at the base of a finger.