John Dunn, MD

Double Board-Certified Hand, Wrist, and Nerve Surgeon

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GANGLION CYST

What is it?

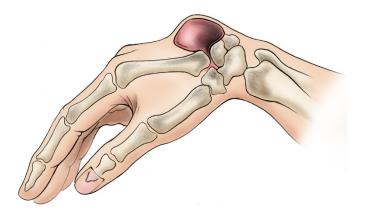
- Ganglion cysts are mucin-filled (clear jelly) masses that form when joint fluid leaks out from the wrist or finger joints.
- Cause pain with extension/loading the wrist like when doing a push-up.
 - O This may occur after trauma like a wrist sprain.
 - There is a tunnel between the joint and cyst so sometimes the mass will get bigger and smaller.
- Almost always benign and not cancerous.

Who gets it?

- Ganglion cysts are the common hand mass (70%)
- 75% are on the back (dorsal) of the wrist and 25% on the palmar side.
 - O These can also exist near the finger joints and may be associated with arthritis.

What can you do about it?

- No MRI/CT is needed in most cases. However, a MRI may be ordered if:
 - There is any question about the type or location of the mass.
 - o The surgeon wants to evaluate the ligaments inside the wrist.
- Brace use at night can be very helpful.
- Some resolve on their own (76% of pediatric ganglion cysts resolve by 1 year)
- Aspiration leads to a high recurrence (75%) and is dangerous on the palmar side.
 - o I do not aspirate ganglion cysts for these reasons.
- Surgery is indicated when non-operative management isn't helpful.

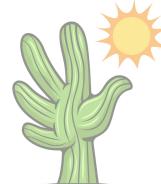


Surgery:

- The surgery involves a 3cm incision over the wrist mass.
- The mass is removed and the track into the joint is excised to reduce the risk of recurrence.

Post-operative course

- Pain pills may be needed for the first 1-2 days – but most people will only need Tylenol.



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- Four black nylon sutures are removed at the first post-operative visit in 2 weeks.
 - o This suture is inert (does not react with your body) and is sturdy.
 - o The wrist is immobilized with soft dressings until sutures are removed.
- You can text, type, and do light duties with the hand before the sutures are removed while the dressing is in place (but no weight bearing)
- After the sutures are removed you can ease back into activity.
- Therapy may be helpful but is not required.

Outcomes

- Significant improvement in wrist pain.
- Scar tissue under incision may take a few months to improve/become less boggy. This can be helped with scar massage with unscented vitamin-E lotion.

Complications

- Risk damage to neurovascular structures (including local sensory nerves or blood vessels), infection, and wound complications.
- Recurrence rate:

o Dorsal wrist masses: 9%.

o Palmar wrist masses: 10-20%.