

Ganglions

Introduction

This leaflet carries general information about hand ganglions including operative and non-operative treatments. The information may not be applicable in your case. Please discuss any concerns or questions that you may have with your Clinician or Nursing staff.

What is a ganglion?

Ganglions have been recorded since the time of Hippocrates and are the commonest lump found on the hand.

The reason for seeking medical advice are usually:

- Cosmetic appearance
- Pain
- Weak grip.

A ganglion consists of a jelly filled bag that balloons out from the wrist joint. The lump normally occurs on the back of the hand and the size varies. Variations in size with activity is common. They enlarge with activity and subside with rest. Sometimes the lump appears at the front of the wrist where a pulse is commonly felt. Malignancy (cancer) has never been reported from ganglions.



Common site for ganglion on the back of the hand front



Less common site at the of the hand near he radial artery.

Non-operative treatment

Injections of the lump or dispersal with a small needle have all been tried. All non-surgical treatment has a limited success rate, but may alleviate symptoms for varying periods of time. The simple message is 'if it is not troubling you, leave well alone'.

Operative Treatment

As the majority of ganglia resolve themselves over a 2-4 year period surgery is rarely necessary. Additional, many ganglia in older patients are related to arthritis and therefore the removal of the lump often does not resolve pain issues which are due to the underlying arthritis.

There are strict guidelines as when to offer surgery and it is only essential when there is neurological compromise related to the lump. An operation involves a visible scar left in place of the lump which is occasionally as tender as the lump was previously. The operation can be performed under regional block (only the arm is anaesthetised) or rarely is general anaesthetic required. The procedure is carried out in the operating theatre and is normally performed under tourniquet (blood squeezed out of the arm and a cuff applied above the elbow). The operation takes approximately 45 minutes and consists of removal of the ganglion with tracing the root of the lump back onto the lining of the joint beneath.

After the operation

After the operation you will have either a bulky dressing or a plaster cast. The plaster cast prevents unwanted movement whilst the wound settles.

Most patients can be discharged on the same day of their operation: However you are not safe to drive after anaesthetic or with a wrist plaster.



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The plaster slab is normally removed at two weeks after the operation and stitches are also due for removal at this time if not dissolvable. The hand and wrist will normally regain full strength after approximately six weeks. You should discuss returning to work with your Clinician.

Recurrence

No operation carries a guarantee of cure. If the operation is successful, there is less than 10% chance of recurrence.

Confidentiality

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