



Royal Orthopaedic Hospital NHS Foundation Trust Patient Information

Ganglions

Welcome to the Royal Orthopaedic Hospital (ROH).
For further information please visit www.roh.nhs.uk

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.

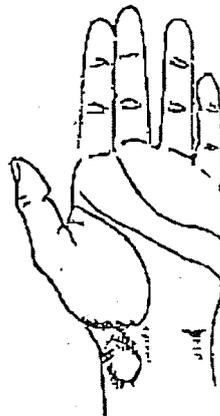
The reason for seeking medical advice are usually:

- 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

If surgery does become the treatment of choice, it must be approached with the same seriousness as any other hand operation.

An operation involves a visible scar on the back of the hand. The operation can be performed under regional block (only the arm is anaesthetised). 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 at 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 wrist joint.

After the operation

After the operation you will have either a bulky dressing or a forearm plaster. The plaster slab prevents unwanted wrist 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.

The plaster slab is normally removed at two weeks after the operation and stitches are also due for removal at this time. 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

The Trust is committed to keeping your information safe and secure, and to protecting your confidentiality. For more information about how we do this please read the Trust's leaflet "**Ensuring Information Confidentiality**" and the "**The Care Record Guarantee**". These are available in waiting areas, on the Trust website or by contacting the Patient Advice and Liaison (PALS) on 0121 685 4128.