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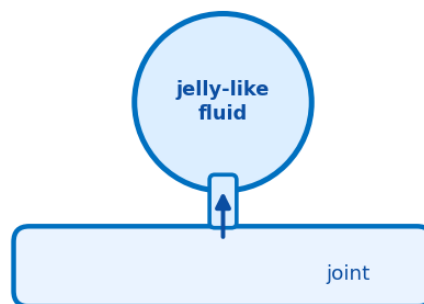
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GANGLION EXCISION

This leaflet provides general information to help you understand surgery to remove a ganglion cyst.

This day-case procedure removes the cyst and its stalk to reduce recurrence.

At the heart of my practice is **Shared Decision-Making**. Whether we pursue conservative management (Plan A) or surgical intervention (Plan B), the goal is to create a tailored treatment plan that aligns with your lifestyle, values, and functional goals.



This leaflet provides general information and does not replace individual medical advice.

Private Consulting Rooms

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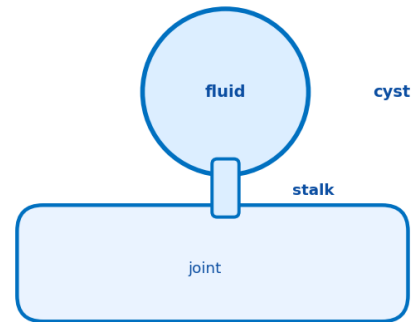
The Anatomy of a Ganglion

A ganglion is a fluid-filled lump that arises from a joint or tendon, relying on several structures working together:

How a Ganglion Forms

Think of it as a small balloon of fluid:

- Fluid leaks from a joint or tendon sheath
- It collects in a small sac under the skin
- A stalk connects the sac to the joint



The Fluid

The sac contains a thick, jelly-like fluid, similar to the natural lubricant found inside your joints — it is not cancerous.

Where They Appear

Ganglions form near joints and tendons:

- Back of the wrist (the most common)
- Palm side of the wrist
- Base of a finger, on the tendon sheath
- Often changing in size over time

Good to Know

- They are non-cancerous and harmless
- About half disappear on their own
- They often change in size or come and go
- Pain occurs only if a nerve is pressed

The Result

Most cause only a visible lump, but larger cysts can make it uncomfortable to bend the wrist or grip, and some press on a nearby nerve.

About the Operation

Ganglion surgery removes the cyst and its stalk to relieve symptoms and reduce the chance of it returning. It is a minor day-case operation, recommended when the lump is painful, presses on a nerve, limits movement, or keeps coming back.

Why It's Done

The operation aims to:

- Relieve pain and pressure from the cyst
- Restore comfortable wrist or finger movement
- Remove the stalk to lower the chance of return

The Procedure, Step by Step

The day-case operation, step by step:

- Anaesthetic: local or general anaesthetic
- Incision: a small cut is made over the cyst
- Removal: the cyst and its stalk are taken from the joint
- Closure: stitches and a splash-proof dressing

Before, During & After Surgery

Before Surgery

- Fasting: no food for 6 hours, no drinks for 2 hours before
- Smoking: avoid for at least 12 hours before, to aid healing
- Medications: continue as advised by the pre-op team

Anaesthesia

- A general anaesthetic is often combined with a local block
- Selected patients may have surgery awake with a block

On the Day

- Admission: check in at main reception, then to your room
- Consultation: meet your surgeon and anaesthetist
- Preparation: timing and instructions are reviewed

Recovery & Results

Recovery is a partnership. The timeline below is a guide — I will adapt it to your healing and your goals — **this shared decision-making process ensures you are fully informed and involved in your care.**

Recovery Milestones

- Bandage: bulky dressing removed after 24–48 hours
- Hand use: gentle finger and hand use straight away
- Stitches: removed at about 14 days
- Good recovery: light use by 2 weeks, fuller by 6–8 weeks

Results

Most patients get good relief of symptoms. About 1 in 10 ganglions return, usually needing only observation, and removing the stalk lowers this risk.

After Surgery

The first weeks

Wound Care: keep the wound clean and dry; the bulky bandage comes off at 24–48 hours

Pain Relief: start painkillers before the block wears off and take regularly for 24–48 hours

Stitches: usually removed at about 14 days

Scar Care: gentle scar massage with cream 2–3 times daily for 2–3 months

Risks & Complications

Uncommon, but possible

Infection: rare; usually settles with dressings and antibiotics

Scar Sensitivity: tenderness can last 2–3 months; massage with cream helps

Recurrence: about 1 in 10 return, usually managed by observation

CRPS: mild in about 1 in 10; a severe form is rare (about 2%)

Wrist Stiffness: the joint lining can scar and stiffen a little

Return to Activity:

This can be extremely variable and discuss with the surgeon. These are just guidelines.

Desk work **2–3 weeks**; driving when you can safely do an emergency stop, often **1–2 weeks**; light manual work 6–8 weeks; heavy manual work 12–16 weeks; avoid heavy lifting for 6–8 weeks.

Recovery Timeline & Hand Care

Recovery Timeline



Hand Care



Red Flags — When to Seek Urgent Help

Spreading redness, discharge or increasing pain in the wound, or fever — seek urgent assessment, as this may indicate infection.

If you experience any of the above, contact the practice, your GP, NHS 111, or attend your nearest Emergency Department.

Key Points to Remember

- A minor day-case operation
- Removing the stalk lowers recurrence
- About 1 in 10 can return
- Gentle scar massage helps the scar settle

Questions You May Wish to Ask

- When can I use my hand normally again?
- When can I drive and return to work?
- How much improvement can I expect?
- What are the signs of a problem?

Book or Enquire Directly at Each Site

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-  **Practice Plus Gillingham**  0333 200 4055