

Ganglia

Jagdeep Nanchahal PhD, FRCS (Plast)
Professor of Hand, Plastic and Reconstructive Surgery
University of Oxford

What are Ganglia?

Ganglia are fluid filled sacs. They are commonly found on the back of the wrist but can occur on the palmar side. They can also be found at the end joint or at the base of the finger. They are associated with joints or tendon sheaths and the majority appear to arise spontaneously. They often fluctuate in size and sometimes grow rapidly, but are not cancerous. Ganglia can sometimes present with pain or tenderness.

Diagnosis

The diagnosis is made on the basis of the history of the swelling, where it is and what it looks and feels like. X-rays are sometimes necessary to exclude nearby joint involvement.

Treatment

If they are not causing any problems, one option is to just wait and see. The old fashioned remedy of hitting them with the family Bible only temporarily disperses the fluid and the ganglion usually returns. Ganglia that are troublesome and persistent are best treated by surgical excision, which is usually performed under general anaesthesia.

After surgery

A long-acting anaesthetic is used, which means that the numbness lasts for several hours and simple pain killers are all that are necessary afterwards.

The stitches are left in for approximately 2 weeks. The hand must be kept dry during the first week. You can bathe by placing a plastic bag over the hand. It is very important you keep your hand elevated as much as possible, at least during the first week. During the daytime you can wear a sling and at night the hand can be rested on a couple of pillows. This helps reduce the swelling and postoperative discomfort. A plaster splint is usually applied after surgery for a ganglion at the wrist to help avoid postoperative stiffness. It is essential that you keep your fingers moving during this period and come out of the sling every few hours to exercise your elbow and shoulder. When the dressings and splints are removed, you will be shown the exercises necessary to regain a full-range of movement. A formal visit to the hand therapist is sometimes necessary.

Possible complications

- The ganglion can sometimes grow back if a tiny piece of the wall is left behind. Repeat surgery is possible, through the same scar.
- Bleeding and infection are very rare.
- Complex regional pain syndrome, which presents as pain, swelling, stiffness and discolouration, is uncommon and usually treated by intensive hand therapy and appropriate pain control.