|  |  |
| --- | --- |
| Intervention | **008. Ganglion Excision** |
| For the treatment of: | Ganglia |
| Commissioning position | This intervention is commissioned if the ganglion:   * Causes symptoms that disrupt daily activities OR * Causes recurrent discharge or infection, when sited below the nail base   AND   * Persists or recurs after aspiration/puncture. |
| Summary of Rationale | A ganglion is a harmless fluid-filled lump under the skin that is usually near a joint. They commonly occur on the wrist, hand, ankle or feet. Rarely, the size and position of a ganglion can create symptoms by putting pressure on a nearby nerve. A form known as a seed ganglion can occur attached to the flexor tendon at the base of a finger on the same side as the palm. A ganglion below the base of a nail can deform the nail bed and occasionally cause intermittent discharge of mucous fluid or become infected. All ganglia can disappear without treatment.    If a ganglion does not cause pain, tingling or numbness that disrupt normal activities (or recurrent discharge or infection in the case of those below the base of a nail), then it can be left alone and may resolve with no treatment, which can take several years.    Aspiration (or puncture in the case of small seed ganglia) using a hypodermic needle should be performed first for ganglia causing more than mild symptoms.    Excision can be considered if aspiration/puncture fails to relieve symptoms or there is recurrent discharge or infection in the case of those below the base of a nail. |
| References | [Ganglion cysts | The British Society for Surgery of the Hand (bssh.ac.uk)](https://www.bssh.ac.uk/patients/conditions/20/ganglion_cysts)  [Ganglion cyst - NHS (www.nhs.uk)](https://www.nhs.uk/conditions/ganglion/)  [Ganglion excision - EBI (aomrc.org.uk)](https://ebi.aomrc.org.uk/interventions/ganglion-excision/) |
| Effective from: | October 2024 |
| Policy Review Date | October 2027 |