



Soft tissue surgery (for ganglion or cyst)

Introduction

This leaflet will explain what will happen when you come to the hospital for an operation to remove a ganglion or cyst in the foot.

Why do I need this surgery?

You have been diagnosed with a nodule in your foot, probably the result of a small fluid filled sac known as a ganglion or cyst. This might interfere with a joint or tendon and if painful can be surgically removed.

The cause of the swelling is often not clear. Sometimes it is associated with trauma but often it simply appears for no obvious reason.

How is it diagnosed?

The diagnosis of a cyst / ganglion is frequently made in the clinical room. If needed this is confirmed with an MRI or ultrasound scan that images the soft tissue swelling. An X-ray does not normally provide useful information.

How is it treated?

Treatment depends on the level and frequency of pain. Wearing a wider shoe can make a difference but this is not always practical. Insoles are generally unhelpful. You might wish to try a steroid injection into the cyst but the evidence is that this is unlikely to work for long. Often the best option is to remove the swelling surgically.

What does surgery involve?

On the day of surgery you will be admitted to the ward and one of the nursing staff will check you in, take your blood pressure and any other tests that may be required. Your surgeon will remind you of the surgical process and possible complications and ask you to sign a consent form. You should eat a light meal before the surgery and do not have to go without food or water as this type of surgery is done under local anaesthetic (you will be awake but your foot will be numbed via a series of injections around the ankle). At some point during the morning/afternoon you will be escorted to theatre.

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Usually the ganglion is carefully excised from the surrounding tissue via a relatively small incision. Sometimes, there is an underlying bony prominence which may need to be removed and your surgeon will have discussed this with you. The operation usually takes about 30-45 minutes. The removed piece of tissue is sent to a laboratory for testing – this is standard practice.

After surgery you will be transferred to the ward. The nurses will advise you on postoperative medication and one of the team will see you to answer any questions and discharge you from hospital.

You should not drive after foot surgery and should be accompanied home by a responsible adult.

You will be advised of your follow up appointment date, either on the day or by letter in the post.

How will I feel afterwards?

Although long-acting local anaesthetic, administered during the procedure, should control most of the pain for about 8 to 10 hours, you can expect some pain or discomfort after the operation. Painkillers will be discussed with you prior to your operation and you should bring these with you on the day of surgery.

Recovering from surgery

The first 2 days

Restrict your activity to going to the toilet only. You will be able to stand and take weight on your heel only. Bend your knee and ankle periodically to stimulate circulation. Most people are able to stop taking any painkillers after 48 hours. Do not leave the house, drive or get the foot wet.

2-7 days

You should aim to be moving around for 20 minutes in the hour resting with your foot elevated for the remaining 40 minutes. You should be able to walk with your foot flat on the ground. Do not go out of the house, drive or get your foot wet.

At 7 days

Your foot will be checked in the outpatients clinic and your dressings will be changed. Your surgeon will advise you about activity levels. Stay in your house, do not drive and keep the foot dry. Keep your post-operative boot on.

At 14 days

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At the second post-operative appointment you will probably have the stitches removed. This is normally painless. You will be advised on gradually increasing your activity. As soon as you are able, start wearing your widest shoes. You may bathe and wash normally and apply moisturising cream to the scar line. If you think you are not fit to drive at this stage, don't! You can apply ice compresses to the foot several times each day to reduce any swelling.

What are the possible risks and complications?

The successful outcome of any operation cannot be guaranteed. The following information outlines the more common complications relating to foot surgery in general and more specifically to the type of operation that you are having.

General complications of foot surgery

- Pain. There will be post-operative pain. For most people the pain passes after 24-48 hours and is tolerable with regular painkillers (following dosage recommendations).
- Swelling. This is a normal outcome of any operation. The extent of post-operative swelling varies and cannot be predicted. In some people the swelling reduces within a matter of weeks and in others could take many months. Application of an ice pack greatly reduces the swelling.
- Infection. There is a small risk of infection with all surgery. This would be treated with relevant antibiotics. Look out for redness and discharge from the wound.
- Deep Vein Thrombosis. Also known as Venous Thromboembolism (VTE), this is a rare complication of foot surgery under local anaesthetic. The risk increases if you are having a general anaesthetic. There is also an increased risk if you take the contraceptive pill, HRT or smoke. Immobilising the leg in a cast also increases the risk of a DVT. If you have had a DVT in the past, please tell your surgeon. If you do have certain risk factors you will have an injection to thin your blood on the day of surgery. This might need to be repeated for up to 7 days following surgery.
- Complex Regional Pain Syndrome (CRPS). This is a rare but difficult complication.
 This is an abnormal response of the nervous system to surgery but can happen after simple trauma. This can lead to a variety of painful sensations in the foot, which require medical and pain relieving techniques.
- Scarring: As a result of your surgery you will have a scar on your foot. To begin with the scar will be raised, red and sensitive but with time it will usually settle.

Specific complications of ganglion/cyst surgery

- In a small percentage of patients, the operation is unsuccessful and the outcome can be painful.
- Increased swelling and pain are more likely to occur if you are too active in the postoperative period.
- Recurrence of the ganglion/cyst is a recognised problem.
- There may be some numbness around the surgical site.
- Your foot may develop scar tissue, which in some people can cause a bruise-like discomfort around the operation site and this may last for months.
- There may some damage to other tissues of the foot when removing the soft tissue swelling. Any damage is usually temporary

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Useful numbers

Baddow Hospital 01245 474070 Baddow Emergency Contact Nurse 07591 977965 Queen Anne Street Medical Centre 020 7034 3301

Any concerns you may have during the first 24 hours following your discharge from hospital please telephone the ward you were on. After 24 hours please seek advice from your GP.