GANGLIA

PRIOR APPROVAL REQUIRED

Ganglia are benign cysts that are found in various areas of the body, usually near a joint capsule, tendon, or tendon sheath. Ganglia cysts contain a thick, clear mucous-like fluid and are most associated with the wrist, hands, fingers, and feet. There is a reasonable chance that ganglia will disappear spontaneously without any treatment, but should they persist they are unlikely to cause adverse long-term effects.

Wrist ganglia have a high spontaneous resolution rate (it is suggested 50% over 5 years).

Treatment options include observation, aspiration/injection and surgical (open or arthroscopic) excision. Surgical excision causes restricted wrist and hand function for 4-6 weeks, may leave an unsightly scar and be complicated by recurrent ganglion formation. Further risks of surgery include pain, bleeding, and infection. Although aspiration and surgery will remove ganglions in the short term, recurrence rates are high at approximately 70% and therefore a do-nothing approach may be the most beneficial to the patient in the long term. Pain associated with ganglia may be due to an underlying cause which is often connected with arthritis.

Commissioners will **ONLY** consider requests for treatment of Ganglion where there is evidence of:

- Significant functional impairment*
- OR
 - Doubt about the diagnosis. (If there is any uncertainty whether the ganglion may be malignant in nature, refer your patient via the 2-week wait referral route.)

To enable the assessment of individual requests, the following information with examples of significant functional impairment should be provided with the request:

- Precise location of ganglion e.g., flexor tendon
- Size in cm/inches (length and width)
- How functioning of the area is impaired? i.e., what is the patient unable to?
- Impact on work/studies/care i.e., is the patient unable to fulfil any essential activities such as cooking and washing etc.
- Degree of pain and treatment of.
- How long it has existed, what treatments have been tried to date

*Significant functional impairment is defined by BSW ICB as:

Symptoms preventing the patient fulfilling routine work or educational responsibilities Symptoms preventing the patient conducting routine domestic or carer activities

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Primary care must obtain funding before referring patients to secondary care providers and secondary care providers must satisfy themselves that the patient has funding secured prior to seeing the patient. This is to ensure inappropriate out-patient appointments are avoided and patient expectations are properly managed.

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