

Policy Category: CBA Who usually applies for funding? N/A
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Surgical removal of ganglion to all body parts

Commissioning decision	The ICB will provide funding for surgical removal of ganglions for patients who meet the criteria defined within this policy.
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Policy Statement:

Gloucestershire ICB will fund surgical removal of ganglia where the following criteria are met:

Wrist ganglia

- No treatment unless causing pain or tingling/numbness or concern (worried it is a cancer)
- Aspiration if causing pain, tingling/numbness or concern
- Surgical excision only considered if aspiration fails to resolve the pain or tingling/numbness **and** there is significant functional impairment.

Seed Ganglia

- No treatment unless they are causing pain
- Puncture/aspirate the ganglion using a hypodermic needle if causing pain
- Surgical excision only considered if ganglion persists or recurs after puncture/aspiration

Mucous cysts

- Surgery only considered where there is recurrent spontaneous discharge of fluid **or** significant nail deformity

Ganglia on body parts such as the foot or ankle will be considered against the same criteria as wrist ganglia.

Rationale:

Gloucestershire ICB has adopted the guidance on the treatment of ganglia set out in the national Evidence Based Interventions guidance (published November 2018).

Most ganglia get better on their own. Surgery causes restricted function for 4-6 weeks, may leave an unsightly scar and be complicated by recurrent ganglion formation. Aspiration of ganglia may relieve pain and restore function, and “cure” a minority (30%). Most ganglia reform after aspiration but they may then be painless. Aspiration also reassures the patient that the swelling is not a cancer but a benign cyst full of jelly. Complication and recurrence are rare after aspiration and surgery for seed ganglia.

Plain English Summary:

A ganglion cyst is a fluid-filled swelling that develops near a joint or a tendon. The cyst can range from the size of a pea to the size of a golf ball. Ganglion cysts look and feel like a smooth, soft lump under the skin. They are made up of a thick, jelly-like fluid, called synovial fluid, which surrounds joints and tendons to lubricate and cushion them during movement. Ganglions can occur alongside any joint in the body, but are most common on the wrist (particularly the back of the wrist), hand and fingers.

Ganglions are generally harmless, but they can sometimes be painful, especially if they are next to a nerve. If they do not cause any pain or discomfort, they can be left alone and may

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disappear without treatment, although this can take a number of years.
 If your doctor believes that you meet the criteria set out in this policy the ICB will fund your treatment.

Evidence base:

NHS England, *Evidence Based Interventions: Guidance for CCGs*, November 2018
<https://www.england.nhs.uk/wp-content/uploads/2018/11/ebi-statutory-guidance-v2.pdf>

For further information please contact: GLICB.IFR@nhs.net

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Policy review date:	June 2024

Policy sign off:

Reviewing Body	Date of review
Effective Clinical Commissioning Policy Group	17.9.20
Integrated Governance and Quality Committee	Changes ratified by MA-E & MW Oct 20

Version Control:

Version No	Type of Change	Date	Description of Change
1		12.10.15	
2	Review date	15.03.18	Policy review date now March 2020
3	Wording change	13.08.18	Wording changed to read 'Surgical removal of ganglion to all body parts' from 'wrist & hand'
4	Policy category change & review date	11.6.20	Policy category changed from CBA/PA to CBA as from 1.7.20. Review date changed to June 2021
5	Significant policy rewording	03.09.20	Policy criteria reworded to reflect the national Evidence Based Interventions statutory guidance on ganglia surgery. Rationale wording altered to reflect the wording in the national EBI guidance. Evidence based changed to reference the EBI guidance.
6	Review date	10.06.21	Review date changed to June 2024