

Soft Tissue Surgery

Ganglion

These are a relatively common cause of foot discomfort. Most commonly occurring on the top of the tarsal joints (the middle of the foot). They arise from a weakness (ballooning out) of the joint capsule or tendon sheath. Excision is the only successful management. Identification and repair of the weakness causing the ganglion is performed prior to excision. Where possible, the ganglion is excised whole.

Bursa

These are relatively common but come from superficial tissue and occur over joints or a bony prominence, where pressure and friction causes chronic irritation. The treatment for a bursa is the same as for a ganglion but in addition, any deformity or prominence, which is causing the bursa, may need to be reduced.

Inclusion Cyst

A foreign body (such as a splinter), getting under the skin causes these. They can become very hard and sore and often have to be excised.

Problems / Risks associated with Soft Tissue Surgery

- Thickened scar and/or tender scar – may reduce over 12 months. Your risk of this is 1 in 2
- Infection (sudden increase in pain and swelling at 2 – 3 days after surgery or sometimes at a later stage). Your risk of this is small (1 in 100)
- Recurrence of the ganglion or bursa in 10% of cases
- Deep Vein Thrombosis (DVT) - A blood clot in the calf or thigh in the muscles of the leg is possible with any surgery. Your risk is very low (less than 1 in 250)
- Complex Regional Pain Syndrome (CRPS) – Pain, which will not resolve. Occasionally the 'pain tap' is turned on with surgery and does not switch off again. This is very rare with a risk of less than 1 in 1000
- Post-operative swelling – can last for up to 12 months