

DIGITAL MYXOID CYSTS

WHAT ARE THE AIMS OF THIS LEAFLET?

This leaflet has been written to help you understand more about digital myxoid cysts - what they are, what causes them, what can be done about them and where you can find out more information about them.

WHAT IS A DIGITAL MYXOID CYST?

A digital myxoid cyst, also called a digital mucous cyst, a digital synovial cyst, or a digital myxoid *pseudocyst*, is a benign (non-cancerous) bump that typically shows up on the fingers, and sometimes on the toes. It usually appears near the last joint, close to the nail.

WHAT CAUSES DIGITAL MYXOID CYSTS?

These cysts often develop due to fluid leakage from the nearby joint and are commonly associated with osteoarthritis. They are more frequent in women, and typically occur in individuals aged 60 and over. In younger individuals, trauma or repetitive use of the affected finger or toe may contribute to their formation.

ARE DIGITAL MYXOID CYSTS HEREDITARY?

Digital myxoid cysts are not passed from one generation to the other.

WHAT DOES A DIGITAL MYXOID CYST LOOK AND FEEL LIKE?

Digital myxoid cysts are usually less than 1cm in size and can be skin-coloured, red or slightly translucent (letting light shine through). They can appear as dome-shaped bumps and are sometimes located at the base of the nail, which often causes a groove in the nail. They are more likely to

develop on the index or middle fingers of the dominant (preferred) hand. Occasionally, they may sit underneath the nail, causing a red or blue discolouration to the base of the nail. These cysts can sometimes leak clear, slightly sticky, or blood-tinted contents. Usually, there is just one cyst, but some people may develop more than one, on the same or different fingers.

Digital myxoid cysts grow slowly over months and are generally painless, though tenderness can occur if they are bumped. In some cases, underlying arthritis symptoms like joint pain and stiffness may be present. Rarely, the cysts can become inflamed or infected, requiring attention. If a myxoid cyst suddenly becomes larger, painful, red and hot, you should see your doctor.

HOW ARE DIGITAL MYXOID CYSTS DIAGNOSED?

Diagnosis is usually straightforward based on medical history and examination. If the cyst arises under the nail, additional tests such as imaging or a sampling (biopsy) may be needed.

HOW CAN A DIGITAL MYXOID CYST BE TREATED?

If a digital myxoid cyst does not cause any symptoms, no treatment is required.

There are a number of different treatment options, however those available to individuals may vary depending on their local hospital's services.

With all treatments, it is possible that the digital myxoid cyst might reoccur. Treatments can also come with potential

side effects, including scarring, joint stiffness, pain and infection. Rarely, digital myxoid cysts can shrink on their own.

Surgical removal offers the highest success rate (successful in at least 9 in 10), with low chances of recurrence. The procedure is usually done under local anaesthetic and removes the cyst, and sometimes associated osteophytes (bony growths or lumps often caused by arthritis). Patients may be referred to plastic or hand surgery colleagues for the procedure.

Non-surgical treatments like cryotherapy (freezing), sclerotherapy (injecting with a shrinking agent), steroid injections and drainage are also options but have higher recurrence rates.

WHERE CAN I GET MORE INFORMATION ABOUT DIGITAL MYXOID CYSTS?

Weblinks to other relevant sources:

www.emedicine.com/derm/topic100.htm

www.dermnetnz.org/topics/digital-myxoid-pseudocyst

www.healthline.com/health/myxoid-cyst

Jargon Buster:

www.skinhealthinfo.org.uk/support-resources/jargon-buster/

Please note that the BAD provides web links to additional resources to help people access a range of information about their treatment or skin condition. The views expressed in these external resources may not be shared by the BAD or its members. The BAD has no control of and does not endorse the content of external links.

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.

This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel

BRITISH ASSOCIATION OF DERMATOLOGISTS

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