



Questions and Answers About Mucous Cysts

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What are mucous cysts?

Mucous cysts are fluid-filled sacs that develop under the skin at the small joints of the fingers, the proximal interphalangeal (PIP) and distal interphalangeal (DIP) joints. They can increase and decrease in size. They are not always painful, but sometimes they can be red and tender. They are similar to ganglion cysts that can develop in other parts of the hand and wrist. Mucous cysts are not dangerous or harmful.

What causes them?

Mucous cysts develop as a result of osteoarthritis at the PIP and DIP joints. Osteoarthritis at these joints is hereditary in nature. You might have had relatives with “knobby” finger joints. As part of the arthritic process, extra fluid develops at the joints to cushion them and decrease the pain. In some cases, the soft tissue around the joint becomes weakened and stretched out and fluid collects in those out-pouchings.

How can they be treated?

There are three primary ways to treat a mucous cyst. You can observe the cyst, and typically the cyst will resolve on its own, though this could take up to 12 to 18 months. You can get a steroid injection into the joint to dry up the cyst. It can take several weeks for the steroid to be fully effective. You can also have the cyst surgically removed.

Due to the underlying arthritis at the joint, it is possible for another cyst to develop after the original one is treated.

If I get a steroid injection, how does it work?

The steroid works by decreasing inflammation and swelling at the joint. As the cyst dries up, it might become quite hard. Sometimes it can take several weeks for the cyst to go away entirely.

What are the risks of a steroid injection?

Infection in the joint and flushing of the face are possible side effects from the injection, but they are rare. Diabetic patients can experience a spike in their sugars for a few days following the injection.



What happens if a new cyst develops?

If this happens, you can get another steroid injection. It might be tempting to pop the cyst on your own with a needle. However, this is very dangerous because you risk implanting bacteria into the joint and developing a serious infection.

When is surgery recommended?

The pain following surgical removal of a cyst is often worse than the pain caused by the cyst itself and can last for several months following surgery. Surgery is best for cysts that are causing constant pain due to ridging of the fingernail or cysts that have been drained or popped multiple times, putting the joint at risk for an infection. Even if the cyst is surgically removed, another cyst can develop as a result of the underlying osteoarthritis at the associated joint.