

# ***MENISCAL CYSTS***

## **DESCRIPTION**

The meniscus is a cartilage structure in the knee that sits on top of the leg bone (tibia). Each knee has 2 menisci, an inner and outer meniscus. The meniscus (1) functions like an adaptor between the rounded thigh bone (femur) and flat tibia, (2) serves to help distribute the forces between the 2 bones over a greater area (rather than point to point), (3) helps supply nutrition to the cartilage that lines the bones (articular cartilage) and (4) helps stabilize the knee. Each individual meniscus can be torn, especially as one gets older. A meniscal cyst is the result of a degenerative meniscal tear. A degenerative meniscal tear causes joint irritation that results in fluid being produced. The excess fluid can push out the joint capsule causing a firm cyst through a one-way valve.

## **FREQUENT SIGNS AND SYMPTOMS**

- Occasionally a painless bump is noted.
- Pain especially with standing on the affected leg, and tenderness along the joint of the knee.
- Firm bump at the cyst, usually at the outer side of the knee. It is often more apparent when the knee is straight and may get smaller or disappear when the knee is bent.
- There may be swelling within the knee.
- Locking of the knee joint where you cannot straighten the knee completely
- Giving way or buckling of the knee

## **CAUSES**

Usually seen with meniscal tears that occur with aging, though, there may be an associated injury to the knee (pivoting or twisting injury) or kneeling or squatting.

## **EXPECTED OUTCOME**

Most meniscal injuries do not heal but may not cause any symptoms and some cysts do not hurt. These usually do not need treatment. However, the only definitive treatment for meniscal tears requires surgery. Surgery may provide complete healing in 6 weeks.

## **POSSIBLE COMPLICATIONS**

- Frequent recurrence of symptoms resulting in a chronic repetitive problem.
- Repeated knee injury particularly if return to sports too soon after injury or surgery
- Progression of the tear (tear getting larger) or cyst size if untreated..
- Arthritis of the knee in later years (with removal of tear or without surgery)
- Complications of surgery including infection, bleeding, injury to nerves (numbness, weakness, paralysis) continued pain, giving way, locking, non-healing of meniscus (if repaired), need for further surgery, knee stiffness (loss of motion), recurrence of cyst
- Erosion of bone and joint due to pressure by the cyst
- Injury to nerves due to pressure by the cyst.

## **GENERAL TREATMENT CONSIDERATIONS**

Initial treatment consists of medications and ice to relieve pain and reduce the swelling of the knee. Your physician may recommend removing the fluid from the cyst with a needle and injecting cortisone into the cyst. Surgery is often recommended as definitive treatment. Arthroscopy to remove the meniscus tear is the procedure of choice. The cyst may be removed surgically at that time by making an incision over it and excising it. Often just removing the meniscus tear will allow the cyst to decompress (shrink) and disappear without other treatment. Your surgeon may recommend removing the cyst fluid with a needle and syringe at the time of the meniscus tear is removed. After surgery, stretching and strengthening of the injured, stiff and weakened joint and surrounding muscles is necessary. This may be done with or without the assistance of a physical therapist or trainer.

## **MEDICATION**

- Non-steroidal anti-inflammatory medications, such as aspirin and ibuprofen (do not take if surgery planned in 7 days or less), or other minor pain relievers, such as acetaminophen, are often recommended. Take these as directed. Contact your physician immediately if any bleeding, stomach upset or allergic reaction occurs.
- Pain relievers may be prescribed as necessary by your physician. Use only as directed.
- Cortisone injections reduce inflammation and may reduce the cyst size. However, there is a limit to the number of times cortisone may be given due to the fact it weakens muscle and tendon tissue.

## **COLD THERAPY:**

Cold is used to relieve pain and reduce inflammation. Cold should be applied for 10-15 minutes every 2-3 hours for inflammation and pain, and immediately after any activity which aggravates your symptoms. Use ice packs or an ice massage.

## **NOTIFY OUR OFFICE IF**

- Symptoms get worse or do not improve in 2 weeks despite treatment
- New, unexplained symptoms develop. Drugs used in treatment may produce side-effects.

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