

PATIENT INFORMATION LEAFLET

Baker's Cyst



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A Baker's cyst, otherwise known as a popliteal cyst, is a fluid-filled swelling that can form in the back of your knee. It was named after the British surgeon William Marrant Baker who first described this condition. Your knee joint produces a jelly-like lubricating fluid called synovial fluid to reduce friction between the moving parts. If there is excessive fluid produced, the additional pressure can cause the lining of your knee joint to stretch at the back and form a Baker's cyst (Figure 1). As more fluid accumulates, the cyst can balloon.

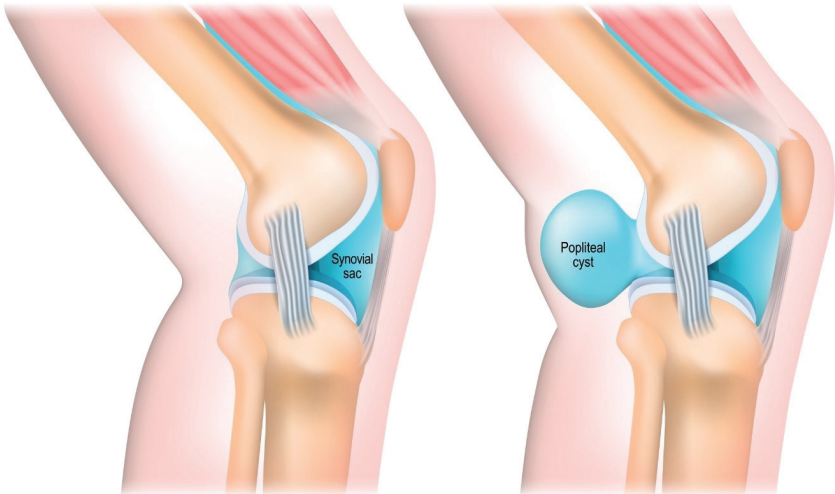


Figure 1

Side-view of a normal knee joint that contains synovial fluid (blue) enclosed by the lining of your knee joint (left). When excessive fluid is produced, the lining can be stretched at the back to form a Baker's cyst (right).

Causes

Any condition that causes your knee joint to produce more synovial fluid can lead to a Baker's cyst:

- ▣ **Inflammatory disease** – conditions such as osteoarthritis, rheumatoid arthritis and gout.
- ▣ **Injury** – meniscal or ligament tears.
- ▣ **Unknown** – sometimes, there is no obvious cause for a Baker's cyst.

Symptoms

You may not experience any symptoms at all and the finding of a Baker's cyst may have been incidental following investigations for other problems. Occasionally, the following symptoms may occur:

- Swelling over the back of your knee that feels like a water-filled balloon. The swelling is often more noticeable when your knee is straight and becomes less prominent when your knee is bent.
- A tight feeling in the back of your knee especially when standing or when you straighten your knee.
- More often than not, it is not painful or tender to touch but if the cyst becomes inflamed or extremely large, pain can become a feature.
- The cyst can burst, leading to the fluid and swelling spreading to affect your calf and ankle. This can be extremely painful in the back of your knee and calf. There may even be warmth and redness in the same area. A burst Baker's cyst can be confused for a blood clot in the deep veins of your leg (deep vein thrombosis) and vice versa. If you have symptoms suggestive of this, Mr Kosuge advises you to seek medical attention on an urgent basis.

Diagnosis

The diagnosis is made by a combination of clinical assessment, investigations such as x-rays (to see if there is arthritis in your knee) and scans (to look for the cyst and other conditions that may be causing the cyst). It is also important to exclude other reasons for swelling in the back of your knee.

Treatment

In the vast majority of cases, no treatment is needed or recommended.

▫ **Treating underlying cause**

If the cause is related to your arthritis or an injury, treating this may reduce the swelling.

▫ **Elevation**

Raising your leg may help improve the swelling.

▫ **Anti-inflammatory medication**

If oral preparations do not help, consider topical formulations to rub over the swelling. Anti-inflammatories may have adverse side-effects if you have certain medical conditions or take certain medications so please consult with your GP prior to commencing.

- **Draining of fluid**

The fluid in your knee joint may be drained but the fluid often reaccumulates if the underlying cause has not been addressed. Draining fluid directly from the cyst is possible but again, re-accumulation of the fluid is a risk.

- **Cortico-steroid injections**

This involves an injection of a powerful anti-inflammatory medication into your knee joint to reduce the inflammation. This may help the pain but may not necessarily reduce the swelling.

Outcome

In the majority of cases, Baker's cysts do not often cause symptoms that require treatment and if treatment is required, addressing the underlying cause can lead to regression of the cyst.



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