

PATIENT INFORMATION  
**SEBACEOUS CYSTS**

These are lumps under the skin which are attached by a small punctum (like a pimple) to the skin. They are formed because of a blockage in the hair follicle. The material in the cyst looks like and smells like cheese and sometimes discharges through the pinhead size opening in the skin.

The lumps can be almost anywhere under the skin and are commonest on the trunk, face, scalp, scrotum and occasionally the hand. They may be single or multiple.

They usually enlarge gradually and may become inflamed or infected causing pain, redness and a rapid increase in size. There may be an associated abscess.

At this stage, antibiotics are usually prescribed. They may only be partially effective and surgery is usually required. Surgery is simplest before infection has set in and this is a reason for operating on the simple, smaller cysts which do not appear to be causing any harm.

Surgery is usually performed under Local Anaesthetic in the office or Day Surgery. The cysts may occasionally be near a nerve and care is taken not to damage such nerves.

An elliptical incision is made in the skin to move the punctum, then the entire cyst wall and then the pultacious material. The wound is closed with non-absorbable sutures which are left in place for 6-14 days depending on circumstances.

Occasionally a fragment from the cyst wall remains embedded in the cavity and the cyst can grow back again. Sometimes a large cavity remains and this may fill with blood and infected material and this can occasionally require drainage.

**INFECTED CYSTS**

This occurs when the cyst wall fragments leak pultacious material. Surgery is more difficult because there are usually multiple fragments, increased bleeding and a larger cavity. When the cyst and abscess are drained, a gauze is packed into the cavity to prevent bleeding. This allows drainage when the gauze is removed on the second or third day post-operatively. There is also a small incidence of recurrence of this type of cyst.