

# Cyst Removal

## What Is a Skin Cyst?

A skin cyst is a **closed sac under the skin** that can fill with **keratin (skin protein)** or fluid. The most common types we remove are:

- **Epidermoid (epidermal inclusion) cysts** – common on face, neck, trunk, and genitals
- **Pilar (trichilemmal) cysts** – common on the scalp
- **Steatocystoma** (less common)

Cysts are usually **benign (non-cancerous)**. They can stay the same size, slowly enlarge, or become inflamed.



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## Why Do People Choose Cyst Removal?

Cyst removal may be recommended or requested when a cyst:

- Repeatedly becomes **inflamed** or **infected**
- Is painful or tender
- Is enlarging or bothersome
- Ruptures and causes recurrent swelling
- Interferes with shaving, hair care, clothing, or daily activities
- Is cosmetically concerning
- Needs diagnosis (if the growth is uncertain)

# What Does Cyst Removal Involve?

Cyst removal is typically an **in-office procedure** done with **local numbing medicine**.

In general:

1. We clean the skin and numb the area
2. A small incision is made
3. The cyst sac is carefully removed (this helps prevent recurrence)
4. The skin is closed with stitches when needed
5. A bandage is applied

**Important:** “Draining” a cyst can relieve pressure, but it may come back unless the cyst sac is removed.

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## Typical Images (Use These in Elementor)

**3-card image row (recommended):**

1. **Epidermoid cyst bump**  
ALT: “Epidermoid cyst presenting as a smooth, round bump under the skin.”
  2. **Pilar cyst on scalp**  
ALT: “Pilar cyst on the scalp—firm, smooth lump beneath the skin.”
  3. **In-office cyst excision setup**  
ALT: “Dermatologist performing cyst removal with a small incision and sutures.”
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## Pre-Op Instructions (Before Cyst Removal)

### 1–2 weeks before

- Tell us if you take:
  - **Blood thinners** (warfarin, Eliquis, Xarelto, Plavix, etc.)
  - **Aspirin or NSAIDs** (ibuprofen, naproxen)  
**⚠ Do not stop prescription blood thinners** unless your prescribing clinician instructs you.
- Let us know if you have:
  - A bleeding disorder
  - A pacemaker/implanted device (rarely relevant but important for some procedures)
  - Allergies to adhesives, antiseptics, or numbing medications
  - History of keloids or poor wound healing

## 1 week before

- Stop drinking **alcohol** (due to blood thinning effect of alcohol)
- Stop smoking
- stop fish oil supplement
- avoid optional aspirin and NSAIDS: **Ibuprofen** (Advil®, Motrin®), **Naproxen** (Aleve®), **Aspirin** (Bayer®), etc...

## If your cyst is inflamed or infected

- Some cysts are best removed **after inflammation calms down**.  
If it's red, painful, hot, or draining, we may treat the inflammation first and schedule removal later.

## Day of procedure

- Eat normally (no fasting needed)
  - Shower and arrive with clean skin
  - Wear loose clothing that won't rub the bandage
  - Avoid applying lotions/oils directly over the area
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# Post-Op Instructions (After Cyst Removal)

## What's normal

- Mild soreness or tightness
- Minor bleeding on the bandage
- Bruising around the area
- Itching as the wound heals

## Wound care (general)

Follow your specific written instructions, but typically:

- Keep the bandage on and dry for the first **24 hours**
- After 24 hours:
  1. Clean gently with soap and water
  2. Pat dry
  3. Apply a thin layer of ointment if instructed
  4. Cover with a clean bandage
- Avoid soaking (pools/hot tubs/baths) until cleared
- Limit stretching or heavy exercise that pulls on stitches (especially on back, shoulders, groin)

## Stitches

- Some stitches dissolve; others need removal in clinic
- We will tell you when to return (timing depends on location)

## Call the office if you have

- Increasing redness, warmth, swelling, or worsening pain
  - Pus-like drainage or foul odor
  - Fever or chills
  - Bleeding that doesn't stop after **10–15 minutes of firm pressure**
  - The incision opens up
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## Scar Care (After the Skin Has Fully Closed)

Once healed:

- Protect from sun (sun can darken scars)
  - Consider silicone gel/sheets if recommended
  - Avoid picking at scabs during healing (reduces scarring)
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## Cyst Removal FAQ

### Will the cyst come back after removal?

If the entire cyst sac is removed, recurrence is less likely. If only drained, cysts often return.

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### Does cyst removal hurt?

You may feel a quick pinch/burn with the numbing medicine. After that, most people feel pressure but not sharp pain.

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### Will I have a scar?

Yes. Any incision can leave a scar. We place incisions carefully and provide wound-care instructions to help the scar heal as nicely as possible.

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## **Do you send the cyst to the lab?**

Often, yes—especially if the diagnosis is uncertain or your clinician recommends confirmation.

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## **Can you remove an inflamed cyst the same day?**

Sometimes, but removal is often easier and safer once inflammation settles. In some cases we treat first and schedule removal later.

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## **What if my cyst is infected?**

If it's infected, you may need treatment first (and sometimes drainage). Definitive removal is usually scheduled after the infection improves.

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## **How long does the procedure take?**

Many cyst removals take **20–45 minutes**, depending on size and location.

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## **When can I shower or exercise again?**

You can usually shower after 24 hours (unless instructed otherwise), but heavy exercise may need to wait—especially if stitches could pull. We'll give you guidance based on the location.