



## Thyroglossal Duct Cyst Information Sheet

### ***What is a Thyroglossal Duct Cyst?***

- In the fetus, the thyroid gland forms at the bottom of the tongue.
- Early in fetal life it then “migrates” or moves from the bottom of the tongue downward to the base of the neck.
- Sometimes as the thyroid migrates, it drags some of the lining of the pharynx. A cyst may form at the base of the thyroid along the route of migration (see Figure 1).
- A thyroglossal duct cyst is then produced.
- The main risk of a thyroglossal duct cyst is infection. Bacteria from the mouth may cause the cyst to become infected.
- A thyroglossal cyst usually appears between ages 2 – 10.
- It is found equally in both girls and boys.

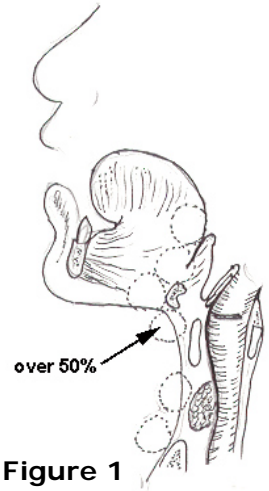


Figure 1

### ***What are some common Signs and Symptoms?***

- The cyst is seen as a mass in the middle of the neck.
- The cyst is round and firm with no opening.
- The cyst usually does not cause any pain.
- The cyst moves up when the tongue is stuck out of the mouth or with swallowing.
- Occasionally the cyst can be seen to one side or other of the breathing tube.
- Bacteria from the mouth may infect the thyroglossal duct cyst causing sudden swelling of the cyst and redness or tenderness in the area of the cyst.

### ***What is the treatment?***

- Surgical removal of the cyst is recommended unless infection is present.

### ***What happens on the day of surgery?***

- General anesthesia is used. Most children go home the same day unless there are any breathing problems or a small drain is placed in the wound. In those cases, your child may need to stay overnight.
- You will meet the anesthesia doctor and the surgeon again on the day of surgery.
- After surgery, your child will stay in the Day Surgery Unit until he/she is ready to go home. Parents are welcome to stay with their child during this time.

### ***What happens after surgery?***

- You will be given a written instruction sheet before you go home telling you how to care for your child.
- Most children have some discomfort after the operation. The doctor may prescribe pain medicine. Give pain medicine as prescribed and instructed by your doctor and nurse.

- It is usually not necessary to remove stitches. They are under the skin and dissolve on their own.
- A clear waterproof dressing or bandage may be applied to the incision.
- Your child may shower or have a sponge bath at home one to two days after surgery.
- Your child's doctor will ask you to make a follow-up appointment about 2 weeks after the surgery to check how the area is healing.

### ***When to call your child's Doctor***

- Your child's surgery will be schedule in the near future. You will receive a pamphlet with information about the day of surgery when the date is set.
- Before the surgery, if the area becomes red, tender, swollen, or drains, please call the surgeon.

### ***Phone Numbers to Call***

Monday – Friday 8:30am – 5:00pm	Nurses' line (617) 355-7704 Nurse Practitioners' line (617) 355-7716
Evening, Nights, Weekends, and Holidays	Page Operator (617) 355-6369 Ask for the surgeon on-call.

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A **Spanish** version of this is available from your provider

Send comments or questions to: **[Familyed@childrens.harvard.edu](mailto:Familyed@childrens.harvard.edu)**

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