

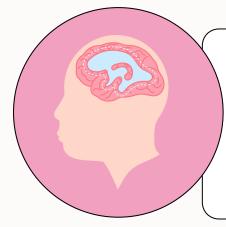
Arachnoid Cyst

Patient Packet



CEREBROSPINAL FLUID (CSF)



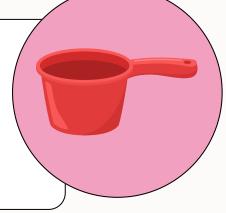


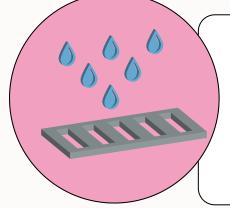
01. WHAT IS IT

A clear liquid that surround the brain and spinal cord. It cushions the brain, protects it from injury, and helps move nutrients and waste in and out.

02. HOW MUCH DO WE HAVE

You produce about 15-20 mL (1 Tablespoon) every hour. Over a whole day, that's about 500 mL (or 2 cups). However, at any one time, there's only about 150 mL (or 1/2 cup) around the brain and spinal cord.



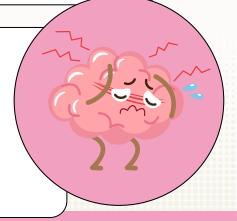


03. WHERE DOES THE EXTRA GO?

Since your body only needs a set amount, the "extra" drains away through the brain's natural gutters (*arachnoid granulations*), which carry the fluid back into the bloodstream to keep everything in balance.

04. WHY IS THIS IMPORANT

If too much CSF builds up or doesn't drain well, it can put pressure on the brain. This might show up as headaches, vomiting, sleepiness, irritability, a bulging soft spot, or a quickly growing head size. This would need treatment.



Diagnosis: Arachnoid Cyst



What is it?

It is a fluid-filled sac that develops in the space around the brain or spinal cord, called the arachnoid space. The fluid inside the cyst is the same as cerebrospinal fluid (CSF), which normally cushions the brain and spinal cord.

Who does it affect?

They are often found in children, though they can be found at any age. Many are discovered by chance, when a child gets a MRI or CT scan for another reason.





How did my child get it?

They are usually present at birth and are not caused by anything you or your child did. In rare cases, they can develop later in life after an injury, infection, or surgery



Most arachnoid cysts cause no symptoms and never become a problem. A minority can start pushing on the brain, which can lead to headaches, seizures, developmental delays, or increased pressure in the brain, depending on the size and location.





What is the Treatment?

If it's not causing any issues, we leave it alone. If there are symptoms, we perform surgery, either by making a small opening in the cyst wall (cyst fenestration) or by inserting a tube to drain the fluid (shunt).

Follow-Up (if no surgery needed)



ACTIVITY RESTRICTIONS

- Most children do not need any special activity limits
- Depending on the size or location, your doctor may recommend avoiding contact sports

HOME CARE

Encourage safe play and monitor for symptoms like headaches, vision changes, seizures, or developmental delay.

FOLLOW-UP

Your doctor may recommend followup visits and, in some cases, repeat imaging to make sure the cyst is not getting bigger and causing pressure on the brain.



LONG-TERM CARE

- Regular scans may be recommended until about age 5, since growth is most likely in early childhood.
 - After age 5, if the cyst is stable and there are no symptoms, no more images are needed
- Most children with stable arachnoid cysts live normal, healthy lives
- Ongoing care usually means routine check-ins with your neurosurgeon or pediatrician, especially if new concerns arise