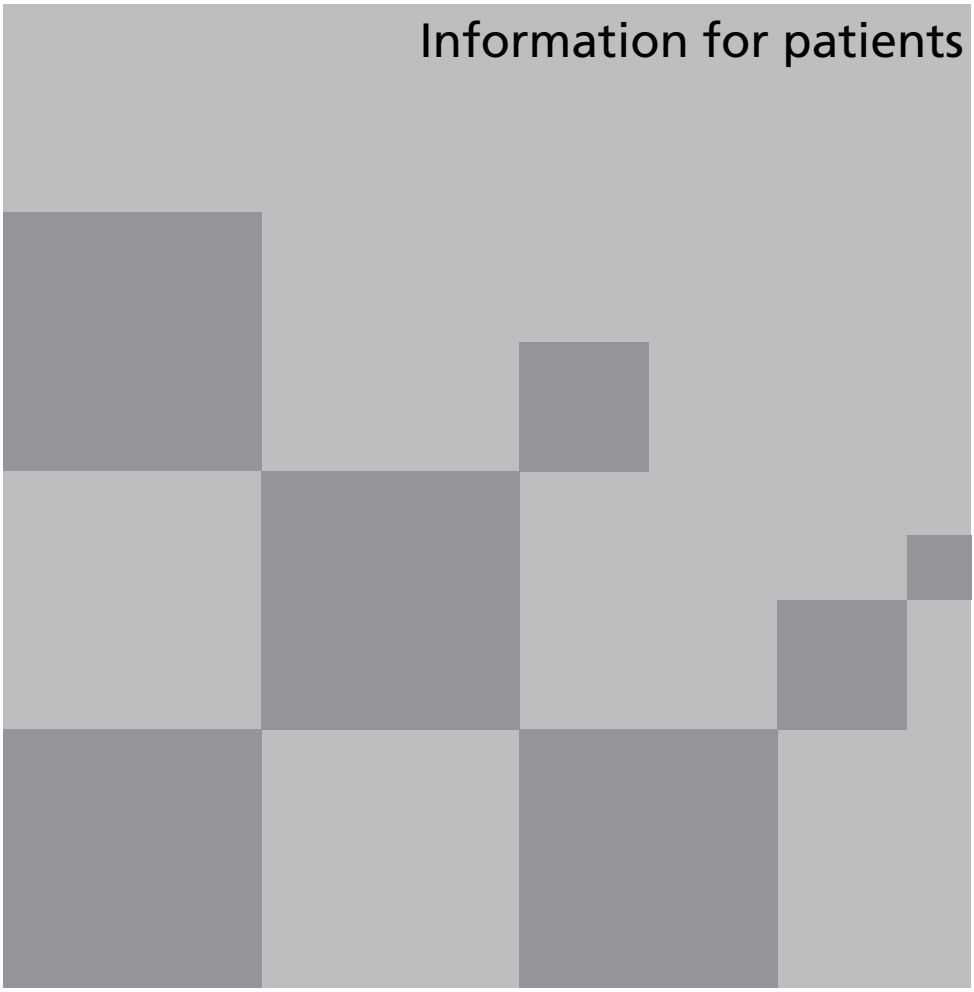
Oxford University Hospitals NHS
NHS Trust

Pigmented Villonodular Synovitis (PVNS)

(also known as Tenosynovial Giant Cell Tumour (TGCT))

Information for patients



What is pigmented villonodular synovitis (PVNS)?

Pigmented villonodular synovitis (PVNS) is a rare, benign (non-cancerous) disease which can develop in and around the joints of the body. It can arise in any joint, but is most common in the knee and hip.

PVNS occurs when the lining of the joints becomes swollen and grows. This can become very painful. PVNS can be locally aggressive, which means it can affect the surrounding tissues nearby and can sometimes cause damage to nearby bone if left untreated.

As this disease is rare and difficult to diagnose it can take some time for PVNS to be confirmed.

Pigmented villonodular synovitis can affect any age group, but is most common between the ages of 30 to 40. There is no known definite cause for this disease.

Diagnosis

We will confirm your diagnosis once we have carried out X-rays, ultrasound and MRI scans (imaging), and we have the histology (results) from the biopsy taken from the disease site.

Treatment options

The usual treatment for PVNS is surgery to remove the disease. Radiotherapy can be used in certain situations and we will discuss this with you if we feel it is a suitable option. We will decide on the best treatment for you depending on a number of factors. These include:

- the position, size and extent of your disease
- your general health and wellbeing.

Follow-up

Once the affected tissue has been removed you will remain under the care of the sarcoma team for your follow-up. This may be for some time to come, as PVNS does have a tendency to recur.

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALSJR@ouh.nhs.uk**

Author: Helen Stradling, Advanced Nurse Practitioner
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Oxford University Hospitals NHS Trust
Oxford OX3 9DU
www.ouh.nhs.uk/information

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