

Department of Surgery

Pilonidal Sinus

What is a pilonidal sinus?

A pilonidal sinus is small hole(s) or tunnel under the skin usually between the buttocks, overlying the tail bone often associated with an infection in its depth.

How does it occur?

The cause is not exactly clear. It is thought that ingrowing hair cause the problem. Or it may be that there are natural dents in this area which draw in debris and hair. The tract and cavity often become infected, causing a discharge. If an abscess forms, this may cause a swelling and can burst. It can be treated with antibiotics and may at times need surgical drainage.

A pilonidal sinus can cause chronic problems, sometimes over several years. Pilonidal sinus is relatively common and often affects young adults, especially men usually with excessive body hair.

Other factors that may increase the risk are spending lots of time sitting down, obesity, and irritation to skin.

How will the operation help me?

Your surgeon will discuss the operation that would best suit you. The aim of the operation is to remove the infected tissue and relieve your symptoms. It would also help to minimise recurrence of the problem. Several different operations can be done, depending upon the exact nature of your individual problem.

Your surgeon will have discussed the various options and their pros and cons before arranging surgery.

Occasionally, the sinus may be completely removed followed by closure of the skin (with or without use 'skin flaps') with stiches (these may be dissolving stiches or may need to be removed). At times it is necessary to leave an open wound.

Newer procedures include endoscopic treatment (not currently offered in NNUH) or pit picking (which results in very small wounds and is useful in specific cases only).

What are the risk/complications of surgery?

Surgical treatment for pilonidal sinus is generally very safe with few risks, but as with any surgical procedure complications can occur occasionally:

- Severe bleeding
- Wound infection
- Recurrence

These risks/complications will be explained to you when the surgeon asks you to sign the consent form for the operation. Risks of recurrence or poor healing are highest in smokers, diabetics (poorly controlled) and those with a high BMI. Your surgeon will want these risk factors controlled for best results.

Coming into hospital

You will be asked to attend the pre-admission assessment clinic 1-6 weeks prior to admission to ensure you are fit for surgery, allowing time for the necessary pre-operative tests, which may include blood test, cardiogram (ECG) and a chest x-ray

You will be admitted on the day of surgery unless there are any medical or technical reasons, which may require you to be admitted the day before the operation. The operation is usually carried out under general anaesthetic. The surgeon performing the operation and the anaesthetist will see you and go through the procedure once again. If you have any questions about your operation, please ask the doctors.

Often the surgery is done on a day case basis. If your operation is not done as a day case, we will usually want you to stay in hospital 2-3 days after the operation, but this can vary between individuals.

What should I expect after the operation?

When you are awake you will be able to eat and drink as you wish, and to get up as soon as you feel able. It is advisable to stay on the ward until the effects of the anaesthetic has completely worn off.

If your sinus has been layed open (without skin closure) you will have a dressing in place around the entrance to the sinus. Some discomfort is to be expected, pain killers will be prescribed for you. Usually dressing change is arranged with district nurse / practice nurse or ward nurses if you are an in-patient.

It is essential that the sinus heals from the base upwards towards the skin. The nurse will dress your wound each day (this will change as healing progresses) to make sure that the skin does not heal over before the tract is healed.

You will normally have a bath the day after surgery, and this will soak the dressing out (it may need a little gentle pull). It is quite possible that you may bleed a little in the bath (do not be alarmed - this can make the water look very red!). Ask your nurse for assistance if you are concerned. You will probably find that frequent baths are soothing to the area.

It will be necessary to continue daily dressing of your wound until it has completely healed.

- Try to avoid excessive walking or sitting still until your wound has healed.
- It would be unwise to go swimming as chlorine may affect healing and there is a risk of picking up or passing on an infection.
- You should also try to avoid any friction in the area, as might be caused by tight clothing.
- You can resume sexual relations as soon as this feels comfortable

Some patients may need to stay in hospital for a few days, especially if 'flaps' have been used to close the skin and drains left in. The ward nurses will look after these. Drains are usually removed prior to discharge and if wound is healthy (and stitched) then just a review with practice nurse is needed few days down the line.

It is very important that hair do not grow into the healing tract. In most cases it is helpful to shave around the area until healing occurs.

It is important to keep the area clean. If possible, you should wash the area after each bowel action. for 3-4 weeks after the operation. You may find that sitting on the edge of the bath and using a shower attachment (if available) is a convenient way of cleaning the area.

The time taken to get back to normal activities varies for different people. Do as much as you feel comfortable doing. You should not drive unless you feel ready and confident to do so.

Certain painkillers may make you drowsy, so you should avoid driving or operating machinery if this is the case. Please check with your Insurance Company as policies vary with individual companies.

If lifting causes you discomfort, you should avoid it.

If you have had surgery to remove the sinus (and the skin has been closed), you may have removable stitches or dissolving stitches (this will be explained before

discharge).

There may be a drain to remove any seepage from the operative site (usually removed before discharge from hospital), along with dressing to cover the stitches. These usually stay for 2-3 days. It is important in these cases to avoid stretching the area and therefore you may be advised to not sit for long periods of time or to stoop forwards.

Most people need a few days off work, but this will depend on what your job involves. It is important for you to pay attention to your body, and only do as much as you feel able to. If you require a sick certificate for work, please ask a member of staff before discharge.

Pilonidal sinuses vary a lot in the time that they take to heal (depending on the extent of disease, type of procedure). Some can take several months, and this can be very frustrating. Sometimes hairs can grow inside the tract, therefore it is advisable to shave a couple of inches around the wound to stop this happening. It is important to try to be patient, and to continue the dressings for as long as necessary.

In the period following your operation you should seek medical advice if you notice any of the following problems:

- Severe bleeding, increased pain, redness, swelling or discharge as these may indicate an infection.

Please retain this information leaflet throughout your admission, making notes of specific questions you may wish to ask the Doctor and/or Nurses before discharge.

Points of contact:

If you have any queries prior to the procedure outlined and the implications for your relatives/carers, please contact the Surgical Pre-Admission Assessment Clinic on 01603 287819.

If you have any queries following the surgery please contact the ward from which you were discharged via the main hospital switchboard on 01603 286286.

Further information and support:

NHS Choices www.nhs.uk

St Marks Hospital www.stmarkshospital.org.uk

The Association of Coloproctology of Great Britain & Ireland Web address:
www.acogbi.org.uk

For Help Giving Up Smoking: Smoke Free Norfolk 0800 0854 113



This sheet describes a medical condition or surgical procedure. It has been given to you because it relates to your condition; it may help you understand it better. It does not necessarily describe your problem exactly. If you have any questions please ask your doctor.