



Pilonidal Sinus Surgery (1 of 3)

What is a pilonidal sinus?

Pilonidal means 'like a nest of hairs'.

A **sinus** is a small abnormal passage known as a tract (a narrow tunnel).

A pilonidal sinus is a tract which commonly contains hairs. It occurs in the cleft between the buttocks, a short distance above the back passage. The pilonidal tract goes in a vertical direction between the buttocks.

What causes a pilonidal sinus?

It is thought that hairs growing inwards into the skin start the condition, often becoming infected, causing a discharge. If an abscess forms this may cause a swelling and may burst. A pilonidal sinus can cause persistent problems, sometimes over several years. It is relatively common and often affects young adults, especially men.

Why do I need an operation?

If you have no symptoms then you will normally be advised to clear the area of hairs (by shaving) and to keep the area clean with good personal hygiene.

If you have persistent problems, an operation will be advised.

Is there any alternative?

You can leave things as they are. This means that the sinus will continue to discharge. You may get an abscess, which can sometimes become very painful and may need to be drained by an emergency operation.

What happens during the operation?

The pilonidal sinus is cut out to prevent infection and an abscess forming. Sometimes dye is injected into the tract to determine the size of the cavity. Depending on the size of the cavity, it may be closed with stitches or left open and allowed to heal naturally. A wound that is closed with stitches will usually heal faster than one left open.

Your surgeon will discuss with you what would be most suitable.

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What can go wrong?

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

The risk	What happens	What can be done about it?
Bleeding	Blood may come through the wound or as a bruise afterwards	Bleeding usually stops within a few minutes. Very rarely you may need to go back to theatre to have the bleeding stopped.
Wound infection occurs in around 10% of patients.		You may be given antibiotics to take after the operation to help prevent this. Sometimes the stitches are removed and the wound left open to heal naturally.
Wound dehiscence (the wound opens up)	The edges of the wound that were sewn together open up. The risk of this is greatly increased in those who smoke and where there is infection present at the time of the operation.	The wound will need to be packed in the community. This does not mean that the operation has failed, but that healing will take longer.
Skin numbness	The patch of skin over the operation site is numb	This is quite common, but normally a minor issue
Recurrent disease	The pilonidal pits and possibly further abscesses return	Surgery is successfully in curing the disease in the majority of cases. If the disease recurs, further surgery is usually possible to treat this.

Consent

By law we must obtain written consent to the operation before it takes place. Staff will explain all the risks, benefits and alternatives before they ask you to sign a consent form. If you are unsure about any aspect of the treatment proposed, please do not hesitate to ask.

Before you come into hospital

To make sure that you are fit to have surgery, you will be asked to attend the pre-admission assessment clinic 1 - 6 weeks before the date of your surgery. Tests including a blood test, chest x-ray and tracing of the rhythm of your heart (ECG) may be done at this time.

The operation is often performed as a day case. You will be able to go home on the day of operation.

Less often, for medical reasons or because of home circumstances, the operation will be done as an in-patient. In this case you can usually go home on the day after the operation.

Occasionally, patients who expect to go home on the day of surgery will need to stay in overnight.

What can I expect after the operation?

As soon as you are awake you will be able to eat and drink as you wish and to get up as soon as you feel able.

When can I go back to work?

The time taken to return to normal activities varies for different people. Do as much as you feel comfortable doing. You should not drive unless you feel ready and comfortable to do so. Check with your Insurance Company as policies vary. If you need to take painkillers, these may make you drowsy so you should avoid driving or operating machinery. Most people need a few days off work, but this will depend on what your job involves. If you need a sick certificate for work, please ask a member of staff for one before you go home.

After your surgery

It is very important that you keep the area clean. While you are in hospital you should bathe or shower after each bowel action. After a bowel action you should wipe toilet paper away from your wound. Women should remember to wipe from front to back, away from the vaginal area.

Is there anything I should do when I go home?

- Your wound dressing will need to be changed every day until the wound has completely healed. We will make arrangements for the district nurse to visit you at home, or you will be asked to visit your practice nurse at your local surgery.
- Once you are home, taking a bath every time you open your bowels may not be practical, but you should continue to wash after each bowel action if at all possible for 3 - 4 weeks after the operation. You may find that sitting on the edge of the bath and using a shower attachment (if you have one) is a convenient way of cleaning the area.
- It is very important that hairs do not grow into the healing tract. Sometimes it may be necessary to shave any hairs that do grow. The doctor will discuss this with you when you come for your follow-up appointment.
- Until your wound has completely healed try to avoid walking, or sitting still for long periods of time.
- You should avoid going swimming until your wound has completely healed, as chlorine may affect healing and there is a risk of picking up or passing on an infection.
- Wear loose-fitting trousers and pants as tight clothing can rub the wound.
- You can resume sexual relations as soon as this feels comfortable.

In the period after your operation you should contact your GP, the colorectal nurse specialist or the ward if you notice any of the following problems:

- increasing pain, redness, swelling or discharge.
- severe bleeding.