

## Patient information

### **Surgery for Pilonidal Sinus**

Digestive Diseases Unit – Aintree Hospital

#### **What is a pilonidal sinus?**

A pilonidal sinus is a problem in the natal cleft (area just above the buttocks), which can cause infection. It is less common in women. Your surgeon has recommended an operation for the pilonidal sinus.

This leaflet information sheet will help you make your decision to go ahead with the operation or not. This leaflet will give you information on the benefits and risks to help you make an informed decision.

If you have any questions that this leaflet does not answer, you should ask your surgeon or the specialist nurse. The telephone numbers will be attached to this leaflet.

#### **How does a pilonidal sinus happen?**

Loose hairs fall off the neck or back and collect in the natal cleft. The hairs can cause small holes to form in the skin or can get into existing holes.

As the hairs carry bacteria, the holes can become infected. This causes an abscess to form or a discharge is released through the tunnel (sinus) out onto the skin.

In some instances the sinus can be quite wide spread, with branches and pockets of infection.

#### **Benefits of surgery?**

Surgery is the most dependable way to remove the pilonidal sinus. Once the area has fully healed, the infection and discharge do not usually come back.

#### **Are there alternatives to surgery?**

If an abscess has not formed and you have not had any discharge from the sinus for a while, there is not an immediate need to have the operation.

You can treat an occasional discharge with antibiotics. However, the infection is likely to come back.

## **What will happen if I choose not to have the operation?**

You may not have any further problems. However, the area can keep on getting infected, causing an abscess or a persistent discharge that can continue for years.

## **What does the operation involve?**

The operation is performed under general anaesthetic and usually takes about half an hour.

Your surgeon will remove the sinus and infected tissue sometimes over a large area. At the end of the operation, your surgeon will decide either to close the wound with stitches or leave the wound open.

If the wound is closed with stitches the community district nurses will remove them in around 10 to 14 days post-surgery.

If the wound is left open, the wound will require to be packed by the community district nurses on a daily basis. This can take several weeks before the wound is fully healed.

The advantage of this method is that all inflamed tissue is removed and the chance of the condition coming back (recurrence) is low.

## **What should I do about my medication?**

You should continue with your regular medication as normal unless you are told otherwise.

You must let your surgeon know if you are taking **warfarin** or **clopidogrel**. Then you would follow the advice from the surgeon in relation to stopping this medication.

## **How can I assist in making the operation a success?**

If you smoke, try to stop smoking. Stopping smoking several weeks or more before an operation may reduce your chances of developing complications and will improve your long term health.

You have a higher chance of developing complications if you are overweight.

Regular exercise can reduce the risk of heart disease and other medical conditions, improve how your lungs work, boost your immune system, help you to control your weight and improve your mood.

Exercise can also help you prepare for your operation and help with your recovery and improve your long term health.

## **What complications can happen?**

The team will try and make your operation as safe as possible. However, complications can happen.

Your surgeon may be able to tell you if the risk of a complication is higher or lower for you.

## **General complications of any operation**

**Pain** which happens with every operation, we will try and reduce your pain as much as possible by giving you medication to control your pain. It is important that you take the medication as instructed by the doctor.

**Bleeding** during or after your surgery. The risk increases if the wound is left open. If the wound was closed with stitches, bleeding can cause a blood clot (haematoma) which appears as a lump under the wound (risk three in fifty).

**Scarring of the skin.** It is common for the shape of the natal cleft to be deliberately changed, to help prevent the problem coming back.

**Blood clots** in the legs (deep vein thrombosis) which can occasionally move through the blood stream to the lungs (pulmonary embolus), making it difficult for you to breathe. This is rare.

**Partial breakdown of the wound** this is quite common if it is closed with stitches. The risk increases if there is an infection at the time of surgery that leads to the wound being infected (risk one in two).

**Slow healing** which can sometimes happen if the wound is packed. Healing can take seven to eight weeks but can take much longer (risk three in one hundred).

**Numbness** around the wound, which is quite common but is not a major problem.

## **Returning to normal activities**

Once at home you should rest for the first few days, walking as little as possible, to help the wound heal. Try to avoid sitting on the wound.

You should be able to return to work after two weeks. If your wound was packed, you will need time off work to have the packing changed on a daily basis.

Do not drive until you are comfortable and confident about controlling your vehicle and always check with your doctor and insurance company.

## **The future**

Occasionally the pilonidal sinus comes back (risk 1 in 9). It is important to keep the area free from hairs and as clean as possible to reduce the risk.

## **Summary**

Pilonidal sinus is a common problem in young people and is best treated by surgery. It can cause an abscess or persistent discharge.

Surgery is usually safe and effective, however complications can happen. You need to know about them to help you make an informed decision about surgery. Knowing about them will also help to detect and treat any problems early.

## Feedback

Your feedback is important to us and helps us influence care in the future.

Following your discharge from hospital or attendance at your outpatient appointment you will receive a text asking if you would recommend our service to others. Please take the time to text back, you will not be charged for the text and can opt out at any point. Your co-operation is greatly appreciated.

## Further information

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