

PILONIDAL SINUS



RCSI HOSPITALS
OSPIDÉIL RCSI



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This leaflet is produced by the Department of Colorectal Surgery at Beaumont Hospital supported by an unrestricted grant to *better Beaumont* from the Beaumont Hospital Cancer Research and Development Trust.

This information leaflet has been designed to give you general guidelines and advice regarding your surgery. Not all of this information may be relevant to your circumstances. Please discuss any queries with your doctor or nurse.

YOUR TREATMENT EXPLAINED



What is a Pilonidal Sinus?

A pilonidal sinus is a tract or tunnel under the skin which usually occurs at the top of the buttocks. The hair curls and penetrates the skin causing irritation leading to the development of a sinus. If the sinus becomes infected an abscess will develop causing pain and swelling. An abscess can be drained under local or general anaesthetic. You may require regular change of dressing to the area to allow the site to heal.

The length of treatment may vary from person to person. You may require several operations or treatments over a period of several weeks or months.

Chronic infection where the infection keeps re-occurring will require an operation. There are two ways of performing this operation.

- **Wide excision** – this involves the cutting out of the sinus, the wound will be left open and will require regular dressings, usually every day. These dressings will usually be carried out by your community nurse. This will be organised for you on discharge from hospital. It may take a number of weeks or months to heal your wound.
- **Excision and primary closure**- This involves removing the section of skin containing the sinus and stitching the skin together.

This is usually carried out as a day case procedure. You will come to the Day ward on the morning of your procedure. You will usually be able to go home the same day once you have recovered from your anaesthetic. You will usually be followed up in our out patient clinic on a regular basis to monitor your progress and wound healing.

How do you prepare for this procedure?

You will have a discussion with your doctor regarding your procedure. The procedure will be fully explained to you. You may attend the day ward for pre-assessment prior to coming into hospital for your procedure. A number of tests may be performed to ensure you are medically fit for an anaesthetic eg. Blood tests, chest x-ray, ECG (tracing of your heart). You will be admitted to the hospital on the day of your procedure, where you will meet a doctor and a nurse who will prepare you for theatre. From there you will be brought to theatre, where you will meet the theatre staff and your anaesthetist. Please leave all valuables at home and arrange to have anything you need brought to you later in the day. Once you have recovered from the anaesthetic and have tolerated diet you should be able to leave the hospital on the same day.

What happens after theatre?

Immediately after your procedure you will be brought into a recovery room attached to the theatre. You will be monitored closely by the nursing staff until you are ready to be brought to the ward. On return to the ward you may feel quite sleepy following the anaesthetic. The nurses on the ward will help you feel comfortable and regularly check on you.

You will have a small plastic tube (cannula) in one of the veins of your arm to give you fluids. This will be removed once you are drinking enough oral fluids. You may experience some nausea (sickness) or potentially vomit. This can be caused by the anaesthetic agents or drugs used in the operation. You will be given some anti-sickness medicine if needed.

You may eat and drink as soon as you like after your procedure. Once you are tolerating oral fluids and diet and you have passed urine you may be fit for discharge home. You will need to be accompanied home and be in the care of a responsible adult for 24 hours following your anaesthetic.

A referral will be made to your community nurse to organise regular change of dressing, you will usually require a change of dressing every day.

Complications

Any operation may be associated with complications.

- Excessive pain which cannot be controlled by over the counter painkillers.
- Possible infection - symptoms of which are high temperature, feeling unwell, an increase in pain or discharge, redness or swelling of the area.

If you experience any of these symptoms contact your G.P. or the Day Ward.

What happens after you go home?

- Pain control – it is normal to be sore and uncomfortable for a few days following this procedure, you should take regular painkillers as needed for a couple of days.
- Follow-up – you will usually be seen back in the out patient department after 6 weeks, you may be brought back sooner if needed. This appointment will be arranged for you.

Looking after your wound

You will be given advice regarding your wound before discharge. The dressing you require will depend on the surgery you have had.

- Wide excision of the sinus where the wound has been left open will require daily dressings, which will be carried out by your community nurse. This encourages the wound to heal from the inside out. Healing may take a number of weeks or months. More specialist treatments or further surgeries may be required to heal your wound fully.
- Excision and primary closure of the sinus will result in the skin being stitched together. A simple dressing will usually be in place over the wound. You will need to keep the area dry while the stitches are in place. You will usually be seen in the out patient department after 1-2 weeks for review. The stitches will usually be removed after 1-2 weeks.

The arrangements for these dressing to be carried out by your community nurse will be made for you by the hospital.

What if I have a problem at home?

Contact your GP

or

Contact the Dayward ph. 8092826/ 8092984 (Mon/Fri 8am-6pm)

After hours, ring 8093000

Ask for a member of your team or the General Surgical SHO on call.

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