Pilonidal Sinus Surgery Information Sheet

Mr Nigel R Hall

This leaflet has been designed to provide you with information about the nature of your proposed pilonidal sinus surgery, what to expect in the recovery period and the potential complications. If you have further questions please telephone my office on 01223 508253.

Is there any special preparation?

No. The area will be shaved at the time of your operation. There is no need for you to do this yourself.

What kind of anaesthetic will I have?

Several different kinds of anaesthesia can be used, and the method will be tailored to your particular needs and wishes. With general anaesthesia you will be asleep for the entire procedure. Some patients undergoing day case or 23 hour stay surgery will not require a general anaesthetic: controlled sedation and injection of local anaesthetic allow a painless operation to be performed with a fast recovery. Most patients having sedation do not remember the surgery taking place.

How is the operation performed?

Pilonidal sinuses may be treated in several different ways, all of which remove the ‘pits’ where hairs get stuck and cause infection. Occasionally, the sinus is very small and can be completely removed followed by closure of the skin with stitches (which are later removed). More often, it is necessary to leave an open wound; the edges of the wound may be partly closed with an absorbable stitch. Special dressings are not normally required, but a gauze pad will help to protect clothing from any discharge.

Recovery after your operation

Within 1-2 hours of your operation, you will be encouraged to get up and walk around. You will be allowed home from hospital the same day (for planned daycase surgery) or the following day. You will be given some painkillers to be taken by mouth as required. A small amount of bleeding or discharge is expected. You should be able to resume normal daily activities rapidly. Provided you feel comfortable, you may lift, drive and go back to work. You should, however, avoid contact sports or other activities which might disrupt stitches in the first 2-4 weeks.

Care of the wound

If the wound has been sutured closed, then you should keep it dry for at least five days to minimise the risk of infection getting inside. Wounds left open, however, benefit from regular (at least once a day) cleaning with a shower spray or in the bath. In order to prevent recurrence of the disease, the area around the wound should be kept free of hairs by weekly shaving.

What can go wrong?

Surgical treatment of pilonidal sinus is generally very safe with few risks, but, as with any surgical procedure, complications can occur occasionally. Therefore, in the period following your operation you should contact your GP or my Secretary if you notice (a) severe bleeding or (b) increasing pain, redness, swelling or discharge – which may indicate infection.

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