

Surgery for Pilonidal Sinus

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This fact sheet is for general information about this procedure only. It is not intended to be used as medical advice or to replace advice that your relevant healthcare professional would give you. If you have a particular medical problem, please consult a healthcare professional.

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What is a pilonidal sinus?

A pilonidal sinus is a problem in your natal cleft (the area between your buttocks) that can cause infection.

Hairs can grow in your natal cleft, or loose hairs can fall and collect in your natal cleft.

Hairs carry bacteria, which can cause inflammation and infection.

An abscess (a collection of pus) can form or the pus can drain through a tunnel (sinus) out to your skin.

A pilonidal sinus



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What are the benefits of surgery?

Surgery is the most dependable way to remove the pilonidal sinus and pockets of infection.

Are there any alternatives to surgery?

Washing your natal cleft every day to prevent hairs building up and removing hair from the area by waxing or using a hair removal cream may help to prevent an infection.

An occasional discharge can be treated with antibiotics.

It is sometimes possible to have a procedure under a local anaesthetic to drain an abscess, or to brush the sinuses and fill them with glue or phenol, and also to remove the pits.

What will happen if I decide not to have the operation?

If an abscess has formed, it will get larger and more painful with time. If the abscess does not drain properly, it may come back or the pus may spread, infecting surrounding tissues. If the infection gets into your bloodstream it may cause septicaemia (blood poisoning).

What does the operation involve?

The operation is performed under a general anaesthetic and usually takes about 30 minutes.

Your surgeon will remove the sinus and infected tissue, sometimes over a large area.

How can I prepare myself for the operation?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health.

Try to maintain a healthy weight. You have a higher risk of developing complications if you are overweight.

Regular exercise should help to prepare you for the operation, help you to recover and improve your long-term health. Before you start exercising, ask the healthcare team or your GP for advice.

Speak to the healthcare team about any vaccinations you might need to reduce your risk of serious illness while you recover. When you come into hospital, practise hand washing and wear a face covering when asked.

What complications can happen?

The healthcare team will try to reduce the risk of complications.

Any numbers which relate to risk are from studies of people who have had this operation. Your doctor may be able to tell you if the risk of a complication is higher or lower for you.

Some complications can be serious and may even cause death.

General complications of any operation

- Bleeding during or after the operation. If your wound is closed with stitches, bleeding can cause a blood clot (haematoma).
- Allergic reaction to the equipment, materials or medication.
- Blood clot in your leg (deep-vein thrombosis – DVT).
- Blood clot in your lung (pulmonary embolus), if a blood clot moves through your bloodstream to your lungs.
- Chest infection. Your risk will be lower if you have stopped smoking and you are free of Covid-19 (coronavirus) symptoms for at least 7 weeks before the operation.

Specific complications of this operation

- Partial breakdown of your wound. The risk is higher if there is an infection at the time of surgery that leads to your wound being infected.
- Slow healing. Healing takes about 8 weeks but can take much longer.
- Numbness around your wound.
- The problem coming back.

Consequences of this procedure

- Pain.
- Unsightly scarring of your skin.

How soon will I recover?

You should be able to go home the same day.

You should be able to return to work after 2 to 3 weeks.

Regular exercise should help you to return to normal activities as soon as possible. Before you start exercising, ask the healthcare team or your GP for advice.

The pilonidal sinus can come back.

It is important to keep the area free from hairs and as clean as possible to reduce this risk.

Summary

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

Keep this information document. Use it to help you if you need to talk to the healthcare team.

Some information, such as risk and complication statistics, is taken from global studies and/or databases. Please ask your surgeon or doctor for more information about the risks that are specific to you, and they may be able to tell you about any other suitable treatments options.

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Reviewer

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Illustrator

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