Language and Accessible Support Services – If you need an interpreter or information about your care in a different language or format, please get in touch:

| t: 020 7188 8815 | e: languagesupport@gstt.nhs.uk |

NHS 111
Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

| t: 111 |

NHS Choices – Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

| w: www.nhs.uk |

Get involved and have your say: become a member of the Trust
Members of Guy’s and St Thomas’ NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:

| t: 0800 731 0319 | e: members@gstt.nhs.uk | w: www.guysandstthomas.nhs.uk/membership |

Having an operation to treat your pilonidal sinus and your recovery

This leaflet explains what a pilonidal sinus is and why surgery may have been recommended for you. It explains the benefits, risks and alternatives of surgery. It includes information about your recovery and going home.

Please speak to your doctor or nurse if you have any questions.
What is a pilonidal sinus?
A pilonidal sinus is an inflamed track, or tracks, leading to a cavity underneath the skin between your buttocks. It often forms due to hairs curling over and growing into your skin, causing infection. It can also form due to chronic (long-term) inflammation (swelling) and infection of the skin between your buttocks.

What are the symptoms of a pilonidal sinus?
A pilonidal sinus can cause pain and swelling which can last for some time. Alternatively it can become infected and turn into an abscess. This is a swollen area containing pus, which is a yellowish/green liquid produced by infected tissue. Abscesses are often extremely painful.

What are the treatment options?
A pilonidal abscess can burst by itself or may be relieved by a course of antibiotics. However, surgery is often the only way to treat the cause of your abscess and remove all the infected tissue.

Your doctor has recommended surgery to treat your sinus, but should have discussed the other treatment options with you in more detail. Please feel free to ask questions if you are uncertain.

Further information
CORE is a charity offering information on digestive disorders and bowel problems, such as Crohn’s disease and irritable bowel syndrome (IBS).
t: 020 7486 0341 e: info@corecharity.org.uk
w: www.corecharity.org.uk

Contact details
If you have not heard about your follow-up appointment within two weeks of your operation, please telephone the GI Surgical Access Centre on 020 7188 8875 (option 3) and ask for an appointment in Fiona Hibberts’s Tuesday morning clinic.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.
t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.
t: 020 7188 8801 (PALS) e: pals@gstt.nhs.uk
t: 020 7188 3514 (complaints) e: complaints2@gstt.nhs.uk
An operation involves the removal (also called excision) of all the infected tissue. The amount that needs to be removed depends on how many and how large the tracks are. There are also several types of operations, outlined below. The operation most suitable for you will depend on your individual circumstances. Your doctor will discuss these with you in more detail.

**Removal of your pilonidal sinus with stitches to close the wound**
This operation involves removing all the pilonidal sinus tissue and then sewing the two sides of the skin together. You may have stitches that dissolve or ones that will need to be removed about two weeks after your operation. Your surgeon will let you know which type of stitches have been used for you.

**Removal of your pilonidal sinus without stitches**
This operation involves removing all the infected tissue and leaving the wound to heal by itself. You will need dressings from your practice nurse daily until it heals. This can take up to six to eight weeks.

**Limberg flap reconstruction for your pilonidal sinus**
This operation involves removing all the infected tissue and moving healthy skin from your buttock to cover the previously infected area. Your wound will have stitches and you will need to return to the hospital to have them removed about two weeks after your operation.
Before the operation
If you have been admitted directly onto a ward, we will go through some checks with you about your general health, ask you questions about your medical history and discuss the surgery with you in more detail. Please ask us questions if you are uncertain.

Will my pilonidal sinus return?
They can return; this is why it is important that you attend your follow-up appointment. We will arrange this about two to four weeks after your surgery. At this appointment, the specialist will check your wound and will give you further advice on preventing any recurrence.

Asking for your consent
We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

Who should I contact if I have a problem or any questions or concerns?
If you experience persistent bleeding from your wound, you can contact the ward or department where you were treated by calling the switchboard on 020 7188 7188 and asking for the relevant ward. Out of hours, you should contact your GP or local accident and emergency (A&E) department.

Are there any risks?
Your consultant will discuss the main risks with you in detail before asking you to sign the consent form. Risks include:

- infection of the wound site. This can be treated with antibiotics; and
- bleeding or a haematoma (blood clot). This does not generally cause major problems, although occasionally a further operation is needed to drain the blood clot.

We look forward to seeing you in the follow up clinic.
Keeping your wound site clean

It is important to keep the area of the operation clean. We recommend that you gently bathe your wound in a warm bath every day, if you can link this in with removal of the dressings and replacing new ones. This may also help with your pain.

Do not use soap or put salt or any perfumed products in the water until your wound has healed, as these can irritate the wound site. Do not be alarmed if you notice blood in the bath, as this is quite normal and will reduce in time.

When can I return to work?

Most people take about a week to 10 days off work. However, this depends on how you feel, how active your job is, and which operation you have had. You should avoid any strenuous activity such as lifting, exercise or running during the first week or so. Do as much as you feel able to.

You should not go swimming until your wound has healed. However, you can have sex as soon as you feel comfortable. Do not ride a bicycle for six to eight weeks after your surgery.

You will have the operation under general anaesthetic. Please see our leaflet **Having an anaesthetic** for information about what this involves and the risks. The anaesthetist will discuss this with you.

The main limitation with surgery to treat your pilonidal sinus is that the sinus and your symptoms may return. Therefore, you may need another operation if this happens.

Leaving hospital

You may be able to leave hospital on the same day as your operation. It is important that you rest for the remainder of the day to recover from the anaesthetic. You will need someone to help you home and stay with you for at least 24 hours after your surgery.

Will I have a dressing?

**Removal of your pilonidal sinus with stitches to close the wound**

You will have a dressing over your wound and sometimes a dressing inside your wound. Please make sure you know if your stitches are dissolvable or if they need to be removed.

If they need to come out, you will need to make an appointment with the practice nurse at your GP surgery to do this. This normally needs to be done about 14 days after your surgery. Please ask your surgical team about this. There is space to write down information at the back of this leaflet. We will arrange a follow-up appointment for two to four weeks after your surgery.
Special instructions for me are:

Removal of your pilonidal sinus without stitches
You will have a dressing over the wound, and this needs to be replaced each day. Your doctor and nurse should have explained this to you in detail. You will need to arrange for your GP’s practice nurse to re-dress your wound each day until the wound has healed. We will give you a three day supply of the dressings (Aquacel) until you can get your own prescription from your GP. We will arrange a follow-up appointment for two to four weeks after your surgery.

Limberg flap reconstruction for your pilonidal sinus
You will need to stay in hospital for a couple of nights after your surgery, as you will have a drain in place to remove any excess fluid from your wound. You will be able to leave once this has been removed.

You will need to take at least two weeks off work, until your follow-up appointment. During these first two weeks, it is very important that you only lie down on your front and sides. This is to make sure that the area on your bottom and/or back can heal. Do not sit on your bottom for more than 10 minutes at a time.

We will give you a follow-up appointment before you leave hospital to come back to the clinic in two weeks to have your stitches removed and to check the area.

Will I have any pain?
As with all surgery, you should expect some discomfort. It can be quite painful for the first couple of days and it may seem like it gets worse before it starts to feel more comfortable again, but the pain will ease. When you leave the ward we may give you:

Painkillers If we give you painkillers, always follow the instructions on the packet and never take more than the recommended dose.

Antibiotics We may give you a course of antibiotics to take after your surgery. Make sure you take them as prescribed and complete the course.
Removal of your pilonidal sinus without stitches

You will have a dressing over the wound, and this needs to be replaced each day. Your doctor and nurse should have explained this to you in detail. You will need to arrange for your GP’s practice nurse to re-dress your wound each day until the wound has healed. We will give you a three day supply of the dressings (Aquacel) until you can get your own prescription from your GP. We will arrange a follow-up appointment for two to four weeks after your surgery.

Limberg flap reconstruction for your pilonidal sinus

You will need to stay in hospital for a couple of nights after your surgery, as you will have a drain in place to remove any excess fluid from your wound. You will be able to leave once this has been removed.

You will need to take at least two weeks off work, until your follow-up appointment. During these first two weeks, it is very important that you only lie down on your front and sides. This is to make sure that the area on your bottom and/or back can heal. Do not sit on your bottom for more than 10 minutes at a time.

We will give you a follow-up appointment before you leave hospital to come back to the clinic in two weeks to have your stitches removed and to check the area.

Special instructions for me are:

Will I have any pain?

As with all surgery, you should expect some discomfort. It can be quite painful for the first couple of days and it may seem like it gets worse before it starts to feel more comfortable again, but the pain will ease. When you leave the ward we may give you:

Painkillers If we give you painkillers, always follow the instructions on the packet and never take more than the recommended dose.

Antibiotics We may give you a course of antibiotics to take after your surgery. Make sure you take them as prescribed and complete the course.
Keeping your wound site clean
It is important to keep the area of the operation clean. We recommend that you gently bathe your wound in a warm bath every day, if you can link this in with removal of the dressings and replacing new ones. This may also help with your pain.

Do not use soap or put salt or any perfumed products in the water until your wound has healed, as these can irritate the wound site. Do not be alarmed if you notice blood in the bath, as this is quite normal and will reduce in time.

When can I return to work?
Most people take about a week to 10 days off work. However, this depends on how you feel, how active your job is, and which operation you have had. You should avoid any strenuous activity such as lifting, exercise or running during the first week or so. Do as much as you feel able to.

You should not go swimming until your wound has healed. However, you can have sex as soon as you feel comfortable. Do not ride a bicycle for six to eight weeks after your surgery.

You will have the operation under general anaesthetic. Please see our leaflet Having an anaesthetic for information about what this involves and the risks. The anaesthetist will discuss this with you.

The main limitation with surgery to treat your pilonidal sinus is that the sinus and your symptoms may return. Therefore, you may need another operation if this happens.

Leaving hospital
You may be able to leave hospital on the same day as your operation. It is important that you rest for the remainder of the day to recover from the anaesthetic. You will need someone to help you home and stay with you for at least 24 hours after your surgery.

Will I have a dressing?
Removal of your pilonidal sinus with stitches to close the wound
You will have a dressing over your wound and sometimes a dressing inside your wound. Please make sure you know if your stitches are dissolvable or if they need to be removed.

If they need to come out, you will need to make an appointment with the practice nurse at your GP surgery to do this. This normally needs to be done about 14 days after your surgery. Please ask your surgical team about this. There is space to write down information at the back of this leaflet. We will arrange a follow-up appointment for two to four weeks after your surgery.
Before the operation
If you have been admitted directly onto a ward, we will go through some checks with you about your general health, ask you questions about your medical history and discuss the surgery with you in more detail. Please ask us questions if you are uncertain.

Will my pilonidal sinus return?
They can return; this is why it is important that you attend your follow-up appointment. We will arrange this about two to four weeks after your surgery. At this appointment, the specialist will check your wound and will give you further advice on preventing any recurrence.

Asking for your consent
We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

Who should I contact if I have a problem or any questions or concerns?
If you would like more information about our consent process, please speak to a member of staff caring for you.

If you experience persistent bleeding from your wound, you can contact the ward or department where you were treated by calling the switchboard on 020 7188 7188 and asking for the relevant ward. Out of hours, you should contact your GP or local accident and emergency (A&E) department.

Are there any risks?
Your consultant will discuss the main risks with you in detail before asking you to sign the consent form. Risks include:

- **infection** of the wound site. This can be treated with antibiotics; and
- **bleeding or a haematoma** (blood clot). This does not generally cause major problems, although occasionally a further operation is needed to drain the blood clot.

If you feel generally unwell or experience a fever (temperature), you should see your GP or local A&E department. Your follow-up appointment can also be brought forward if necessary.

We look forward to seeing you in the follow up clinic.
An operation involves the removal (also called excision), of all the infected tissue. The amount that needs to be removed depends on how many and how large the tracks are. There are also several types of operations, outlined below. The operation most suitable for you will depend on your individual circumstances. Your doctor will discuss these with you in more detail.

**Removal of your pilonidal sinus with stitches to close the wound**
This operation involves removing all the pilonidal sinus tissue and then sewing the two sides of the skin together. You may have stitches that dissolve or ones that will need to be removed about two weeks after your operation. Your surgeon will let you know which type of stitches have been used for you.

**Removal of your pilonidal sinus without stitches**
This operation involves removing all the infected tissue and leaving the wound to heal by itself. You will need dressings from your practice nurse daily until it heals. This can take up to six to eight weeks.

**Limberg flap reconstruction for your pilonidal sinus**
This operation involves removing all the infected tissue and moving healthy skin from your buttock to cover the previously infected area. Your wound will have stitches and you will need to return to the hospital to have them removed about two weeks after your operation.
What is a pilonidal sinus?
A pilonidal sinus is an inflamed track, or tracks, leading to a cavity underneath the skin between your buttocks. It often forms due to hairs curling over and growing into your skin, causing infection. It can also form due to chronic (long-term) inflammation (swelling) and infection of the skin between your buttocks.

What are the symptoms of a pilonidal sinus?
A pilonidal sinus can cause pain and swelling which can last for some time. Alternatively it can become infected and turn into an abscess. This is a swollen area containing pus, which is a yellowish/green liquid produced by infected tissue. Abscesses are often extremely painful.

What are the treatment options?
A pilonidal abscess can burst by itself or may be relieved by a course of antibiotics. However, surgery is often the only way to treat the cause of your abscess and remove all the infected tissue.

Your doctor has recommended surgery to treat your sinus, but should have discussed the other treatment options with you in more detail. Please feel free to ask questions if you are uncertain.

Further information
CORE is a charity offering information on digestive disorders and bowel problems, such as Crohn’s disease and irritable bowel syndrome (IBS).
t: 020 7486 0341 e: info@corecharity.org.uk
w: www.corecharity.org.uk

Contact details
If you have not heard about your follow-up appointment within two weeks of your operation, please telephone the GI Surgical Access Centre on 020 7188 8875 (option 3) and ask for an appointment in Fiona Hibberts’s Tuesday morning clinic.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline
If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.
t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns
For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.
t: 020 7188 8801 (PALS) e: pals@gstt.nhs.uk
t: 020 7188 3514 (complaints) e: complaints2@gstt.nhs.uk
Language and Accessible Support Services – If you need an interpreter or information about your care in a different language or format, please get in touch:

**t:** 020 7188 8815  **e:** languagesupport@gstt.nhs.uk

**NHS 111**  
Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.  
**t:** 111

**NHS Choices** – Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.  
**w:** www.nhs.uk

Get involved and have your say: become a member of the Trust  
Members of Guy’s and St Thomas’ NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:  
**t:** 0800 731 0319  **e:** members@gstt.nhs.uk  
**w:** www.guysandstthomas.nhs.uk/membership

Having an operation to treat your pilonidal sinus and your recovery

This leaflet explains what a pilonidal sinus is and why surgery may have been recommended for you. It explains the benefits, risks and alternatives of surgery. It includes information about your recovery and going home.

Please speak to your doctor or nurse if you have any questions.