

Post-surgical complication rates of elective excision of pilonidal sinus disease and the need of post-operative appointments

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A. Begaj

*Manchester Medical School, University of Manchester
aridit.begaj@student.manchester.ac.uk*

Background Pilonidal sinus disease is a common disease of the natal cleft with an incidence of 25/100,000 people in the UK. Males are most commonly affected, compared to the females. It was reported to be caused from ingrowing hair, leading to formation of an abscess and sinuses underneath the skin. These sinuses discharge their contents in the skin surface by the aid of skin pits. Surgery is the treatment of choice for chronic pilonidal disease; however, literature has revealed high rates of postsurgical complications. As a consequence, follow-up appointments are needed to monitor these complications.

Aim To determine if a six-week post-surgery appointment is necessary and beneficial for the patient.

Methods All the data from the patients that underwent elective excision of pilonidal sinus by Mr Goscimski from 1 January 2012 to 30 November 2014 were screened to determine the attendance rate, complication rate and healing time.

Results Out of 46 patients, 37 underwent excision and primary closure with Karydakias flap, 6 patients underwent excision with Limberg flap and three wounds were left open. Most complications (9/11 patients) were noticed and treated by the colorectal nurse, and only 1 out of 11 was treated by the surgeon during routine follow-up.



Recommendations and conclusion A six-week follow-up with the surgeon is not necessary, due to the low complication rate at that period; however a two-week follow-up with the colorectal nurse has shown to be beneficial. The outcomes of Mr Goscinski's practice in elective excision of pilonidal disease have shown to be comparable to the literature, and therefore a safe practice.