Pilonidal Sinus

What is a pilonidal sinus?
A pilonidal sinus is a dimple in the skin within the crease of the buttocks (see Figure 1).

- This may be noted at birth as a depression or hairy dimple and be present for many years without any symptoms.
- A pilonidal sinus may also occur due to a blockage in the hair follicles, often associated with ingrowth of hair.
- In both situations, hair acts as a foreign body, which may produce an infection. The infection may spread into the tissues of the buttocks and produce an abscess (collection of pus under the skin) at a site several centimeters away from the sinus.

What are the signs and symptoms of pilonidal sinus?
- Persistent pain in the tailbone area accompanied by an abscess within the crease of the buttock. If the abscess ruptures, drainage or pus may also be present.
- Pilonidal abscess is diagnosed by physical exam.
- Chronic infection may develop if the infection has spread beyond the site of the sinus and is poorly drained.
- Symptoms of chronic infection include bloodstains or cloudy drainage on the child’s underclothes.

What can be done for a pilonidal sinus?
- The abscess will need to be opened and drained to allow it to heal.
- After the abscess has healed, surgery may need to be done that involves taking out the underlying fistula tract and the chronically infected tissues (see Figure 2).
- If the involvement is extensive, the wound is left open to heal.
- The wound will have to be packed at least once a day.
- If the tissues involved are less extensive, the wound may be closed. When successful, this allows for more rapid healing and less discomfort but unfortunately this is associated with a higher incidence of recurrent infection.

What happens after surgery?
- If the wound is left open to heal, daily to twice daily packings of the wound will be needed after the patient has showered or soaked in the tub (or sitz bath).
- Antibiotics may be prescribed to treat any infection.
- No strenuous activity, exercise or lifting for 4-6 weeks.
- No sitting for extended periods of time.
Most child have pain. Give pain medicine as prescribed and instructed by your doctor and nurse.

You should schedule an appointment with your surgeon in his office for 1-2 weeks after going home.

**Call your doctor if:**
You/Your child develops:
- A fever above 101.5°F,
- any redness around the incision,
- any drainage,
- worsening pain.

**Numbers to Call**

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<tr>
<th>Time</th>
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<tbody>
<tr>
<td>Monday – Friday 8:30am – 5:00pm</td>
<td>Nurses’ line  (617) 355-7704</td>
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<td>Nurse Practitioners’ line (617) 355-7716</td>
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<td>Evening, Nights, Weekends, and Holidays</td>
<td>Page Operator (617) 355-6369</td>
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<td>Ask for the surgeon on-call.</td>
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A [Spanish](#) version of this is available from your provider

Send comments or questions to: [Familyed](mailto:Familyed@childrens.harvard.edu)