



Penticton General Surgery Associates

Dr. Phil Allen Dr. Jeff Marschall Dr. Jean Oosthuizen Dr. Alexis Porte Dr. Mark Sawatzky

What is pilonidal disease?

A pilonidal cyst is a common condition characterized by the formation of a small pocket or sac filled with fluid, hair, and debris near the tailbone area. While not totally understood, it is most commonly thought to be the result of friction or pressure on the skin causing hair to bend and penetrate the skin. This leads to inflammation and cyst formation. Some risks for developing pilonidal disease include obesity, sedentary lifestyle or prolonged sitting, high hair density, and family history.

Sometimes pilonidal disease can be found as pits or small holes near the groove at the top of the buttocks. As it progresses it may show as lump or fullness in the area. Pain or tenderness, particularly after sitting for long periods of time may result. If it becomes infected there may be an acute swelling, and blood or pus may drain. If a pilonidal cyst or sinus is noted, but not causing symptoms, treatment is not necessary.

Prevention

Since it is not well understood, measures to prevent symptoms or recurrence are mostly anecdotal. It is often recommended to avoid prolonged sitting. Taking breaks and using cushioned seating can reduce pressure on the tailbone area. In addition keeping the area clean-shaven or hair-free may reduce the risk of hair follicle irritation. Some evidence even suggests laser hair removal can reduce the chance of the disease recurring.

Treatment

Surgical treatment is often necessary to remove areas of cyst or sinus formation. If the affected area is small the skin may be opened through a small hole and the underlying tissue cleaned up (known as pit picking).

In some cases a flap may be used to move healthy tissues over and replace the spot where the cyst has formed. More commonly, the area of disease is removed and the wound left open to allow it to grow back in from the edges. This can take several weeks up to a few months to completely close over. While lengthy, this is often the best way to minimize the chance of the disease coming back. During this



Penticton General Surgery Associates

Dr. Phil Allen Dr. Jeff Marschall Dr. Jean Oosthuizen Dr. Alexis Porte Dr. Mark Sawatzky

time there may be packing or a small vacuum device used to keep the area clean and dry.