



Sandwell and West Birmingham
NHS Trust

EPSiT – Endoscopic pilondal sinus treatment

Information and advice for patients

General Surgery



Operation

It is a minimally invasive procedure to manage a pilonidal sinus and for when a pilonidal abscess has not healed. During this procedure, the pilonidal sinus cavity is visualised using an endoscope and the diseased tissue is cauterised.

What to Expect

1. **Consultation:** You'll have a consultation with your surgeon before the procedure. They will explain the details, answer your questions, and discuss any preoperative preparations.
2. **Preparation:** Your surgeon/pre-assessment Nurse will provide specific instructions for preoperative preparations. This might include fasting before surgery and any medications you should or shouldn't take.
3. **Anaesthesia:** This procedure will usually be done under general anaesthesia, which makes you unconscious during the procedure. However, there is also an option for spinal anaesthesia, where you are awake but numb from the waist down.
4. **Procedure:** During the operation, the surgeon will visualise the pilonidal sinus and assess the extent of disease with a thin camera. Then they will cauterise and clean the pilonidal sinus/ cyst and any infected tissue. The wound will be left open and will be dressed lightly.
5. **Recovery:** After the procedure, you'll spend some time in a recovery area to wake up from anaesthesia and ensure there are no immediate complications. You may have some pain and discomfort, which can be managed with medication.
6. **Hospital Stay:** EPSiTs are usually day case procedures, meaning you will go home the same day. However, in some cases, you might need to stay overnight for observation.
7. **Postoperative Care:** Your surgeon/recovery nurse will provide detailed postoperative care instructions. This will include self-wound care, possible dressing changes and instructions for keeping the surgical area clean.

Recovery

1. A dressing may be in place for the first 1-2 days
2. Use sanitary pads regularly until wound heals as there may be some leakage during the recovery phase.
3. Keep the wound clean and dry for 48 hours. Can shower or bathe when able.
4. Avoid use of perfume sprays around the wound
5. Avoid synthetic materials (use loose cotton underwear) till the wound heals
6. Avoid sitting for long periods of time(try lying on your side – avoiding long period on your back)
7. Limit strenuous exercises for 4-6 weeks
8. Avoid driving for 2 weeks
9. Avoid sexual intercourse for 2 weeks
10. If you have any concerns, contact your GP

Follow up

Locally with your GP and Patient Initiated Follow up (PIFU) if required.

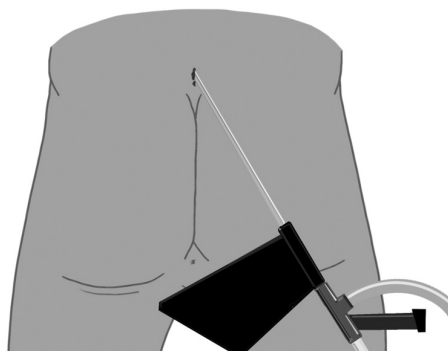
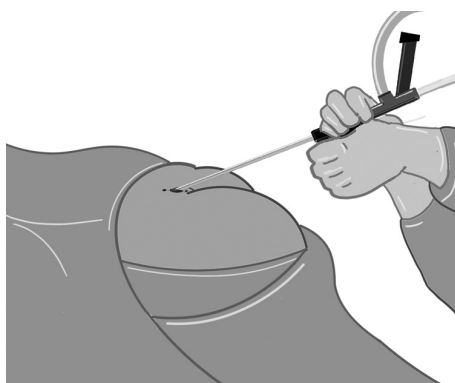
Advantages

In the post operative phase, patients experience less pain and have a faster wound healing time than conventional surgical methods. Complete healing occurs in around 70% of cases.

Complications

1. Wound infection: swelling and redness over and around the wound and feeling unwell
2. Delayed healing of the wound (can take up to 12 weeks)
3. Residual disease can be treated with repeat EPSiT or other surgical options which will be discussed with you.

For any further questions: Please contact – General Surgery (secretary) 01215073393



Images created on behalf of General Surgery department by Joseph Anthony Attard - University Hospitals Leicester

Further information

NHS Website

Pilonidal sinus

<https://www.nhs.uk/conditions/pilonidal-sinus/>

Patient UK

Pilonidal sinus

<https://patient.info/skin-conditions/pilonidal-sinus-leaflet>

Websites accessed 15th February 2024

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