

Failed Pilonidal Surgery

New Paradigms

And New Operations Leading to Cures

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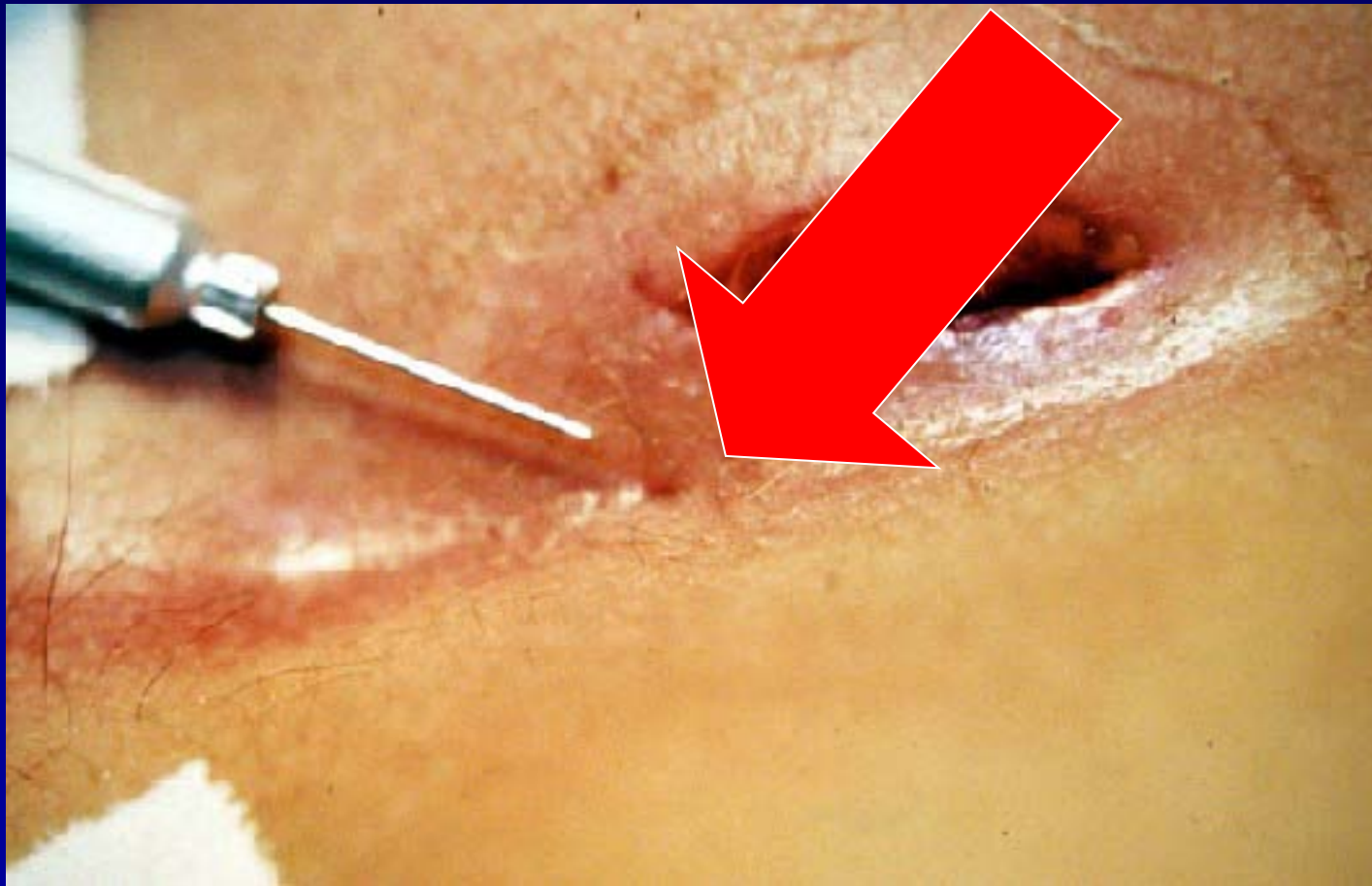
PILONIDAL DISEASE

Many forms

From pimple or “PIT”--

To a tragedy....

The “PIT“ is the source of ALL trouble.



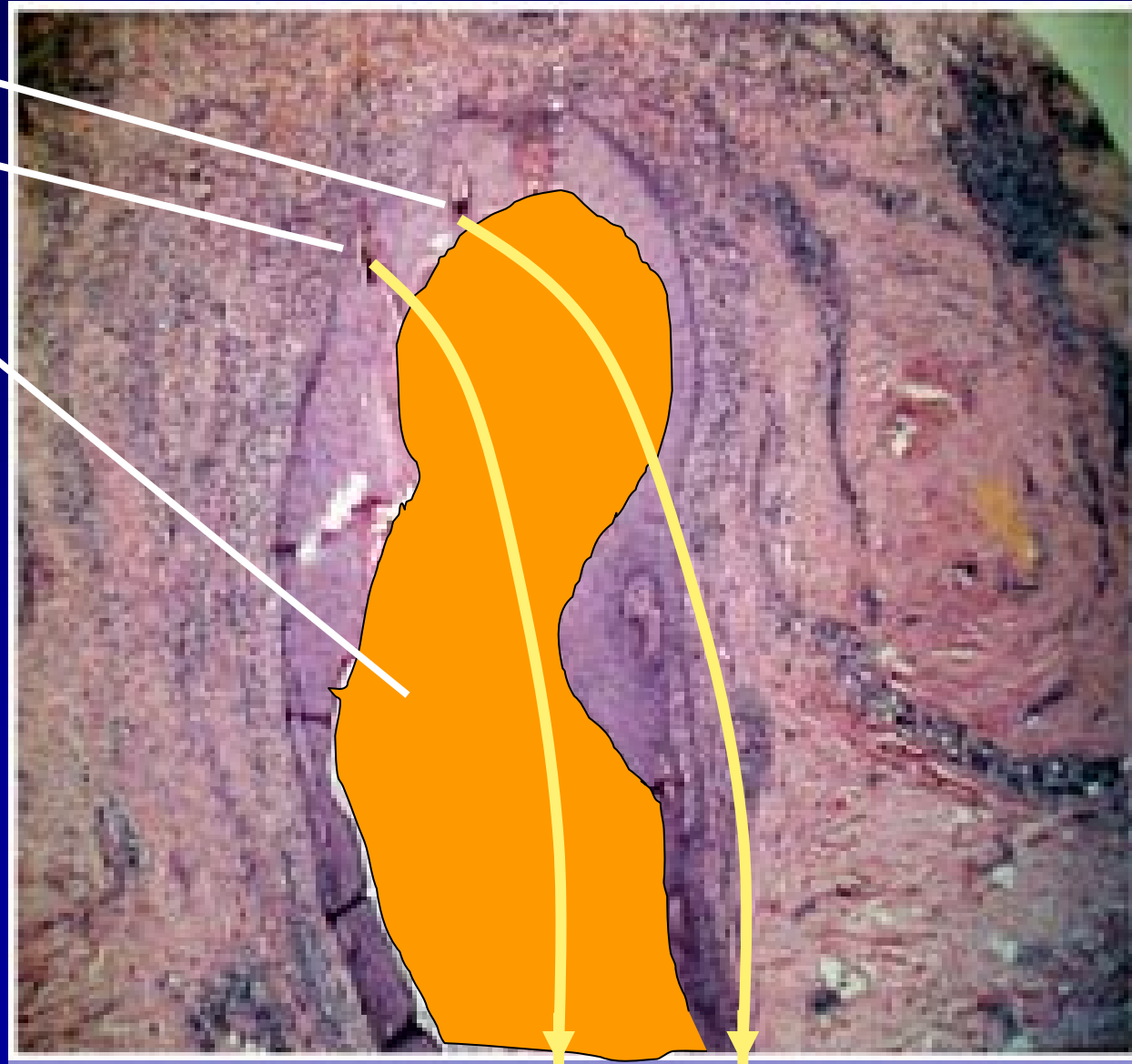
Options for Simple Home Treatment of Early Pits

1) Use tweezers to remove hairs (pull out at surface)

2) Curette out keratin. Use the eye of a darning needle. Allows pit to shrink

This simple move will cure ~ 30 % of early pilos.

You will never start trouble if you begin with this.



When I am asked how to deal with
simple pilonidals,

in contrast to complex problems that call for cleft lift,

I focus on the source, the stretched and elongated hair follicle,

the PIT.

And recommend simple control.

Local anesthetic, in office if possible.

List 2 points to remember on pilos

1 PICK ALL PITS

2 STAY OUT OF THE DITCH

PICK ALL PITS!

When this pit walks into your office -

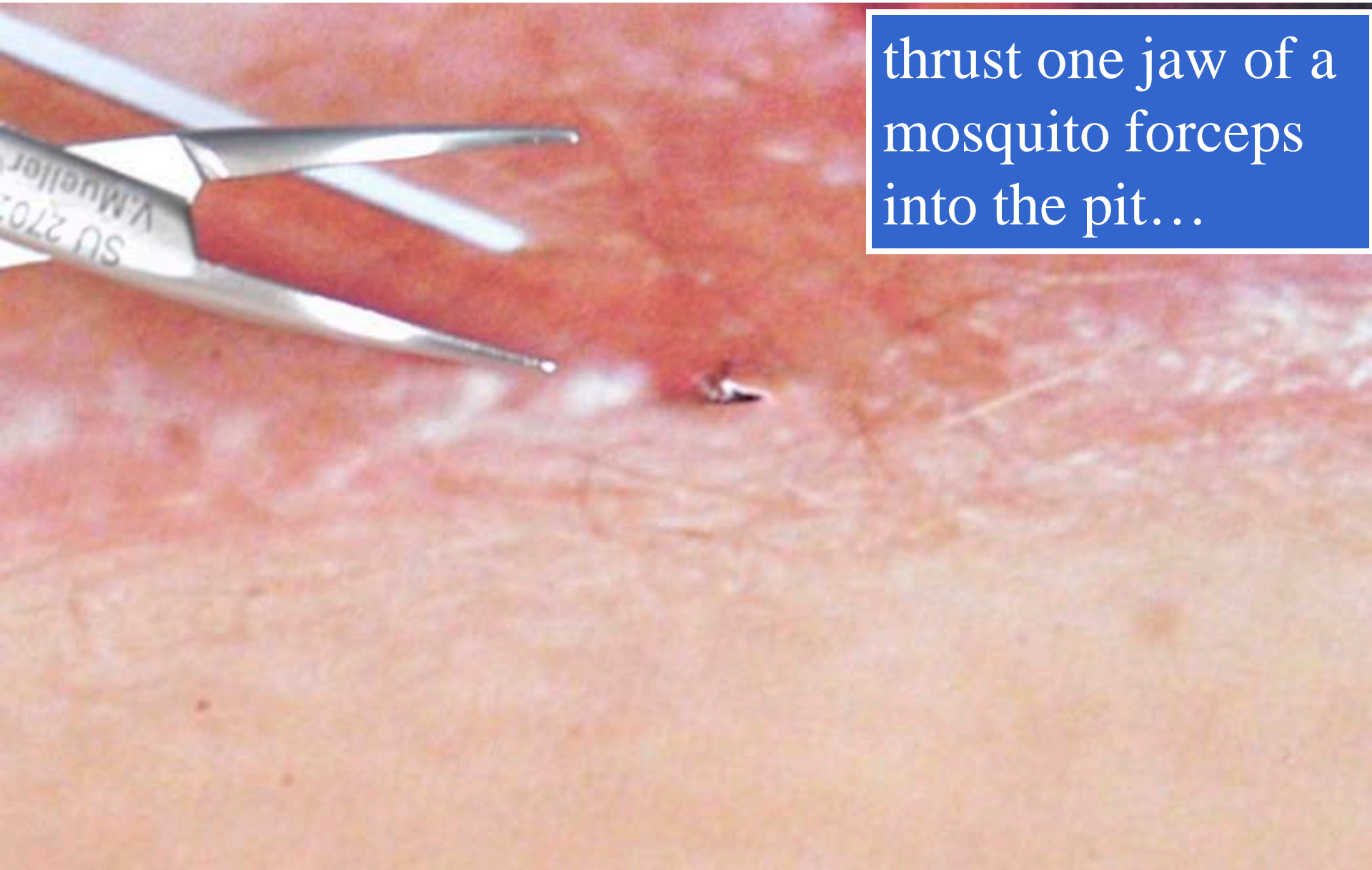


minimal symptoms, single pit,
shallow cleft.....

Keep it simple.

Inject a drop of local....

Do the right thing.....

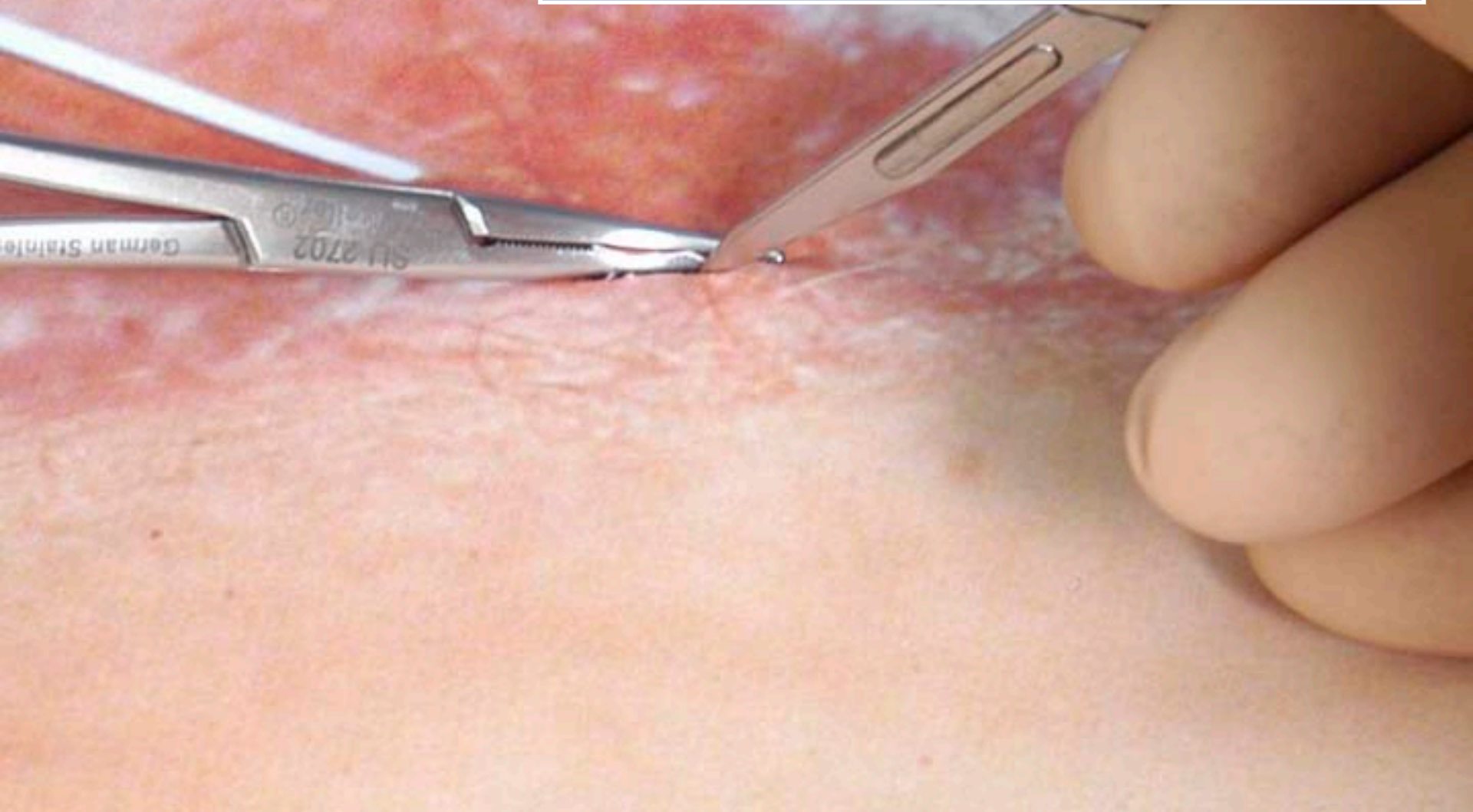


thrust one jaw of a
mosquito forceps
into the pit...

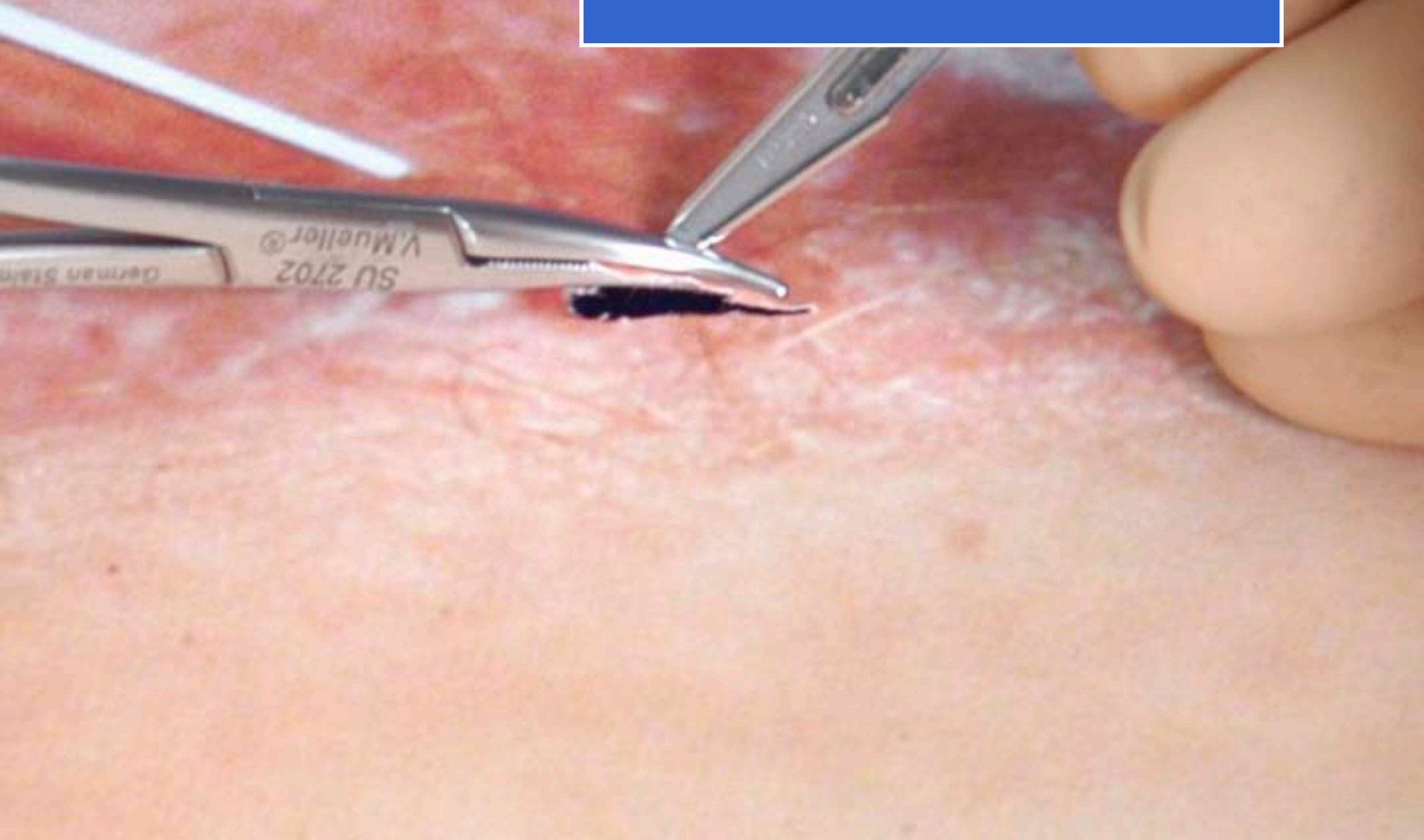
Clamp Down...



Cut Around It -

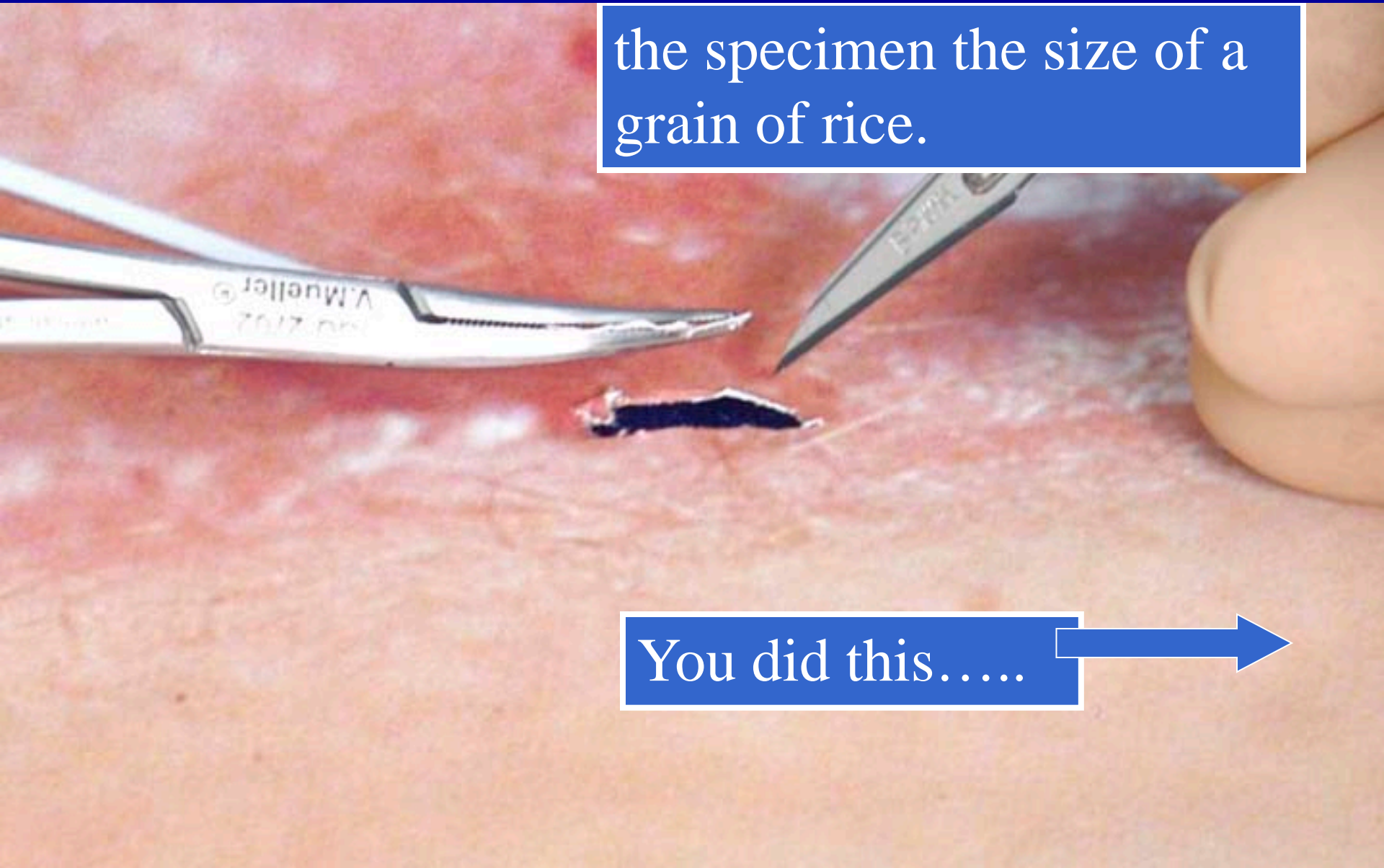


All Around....

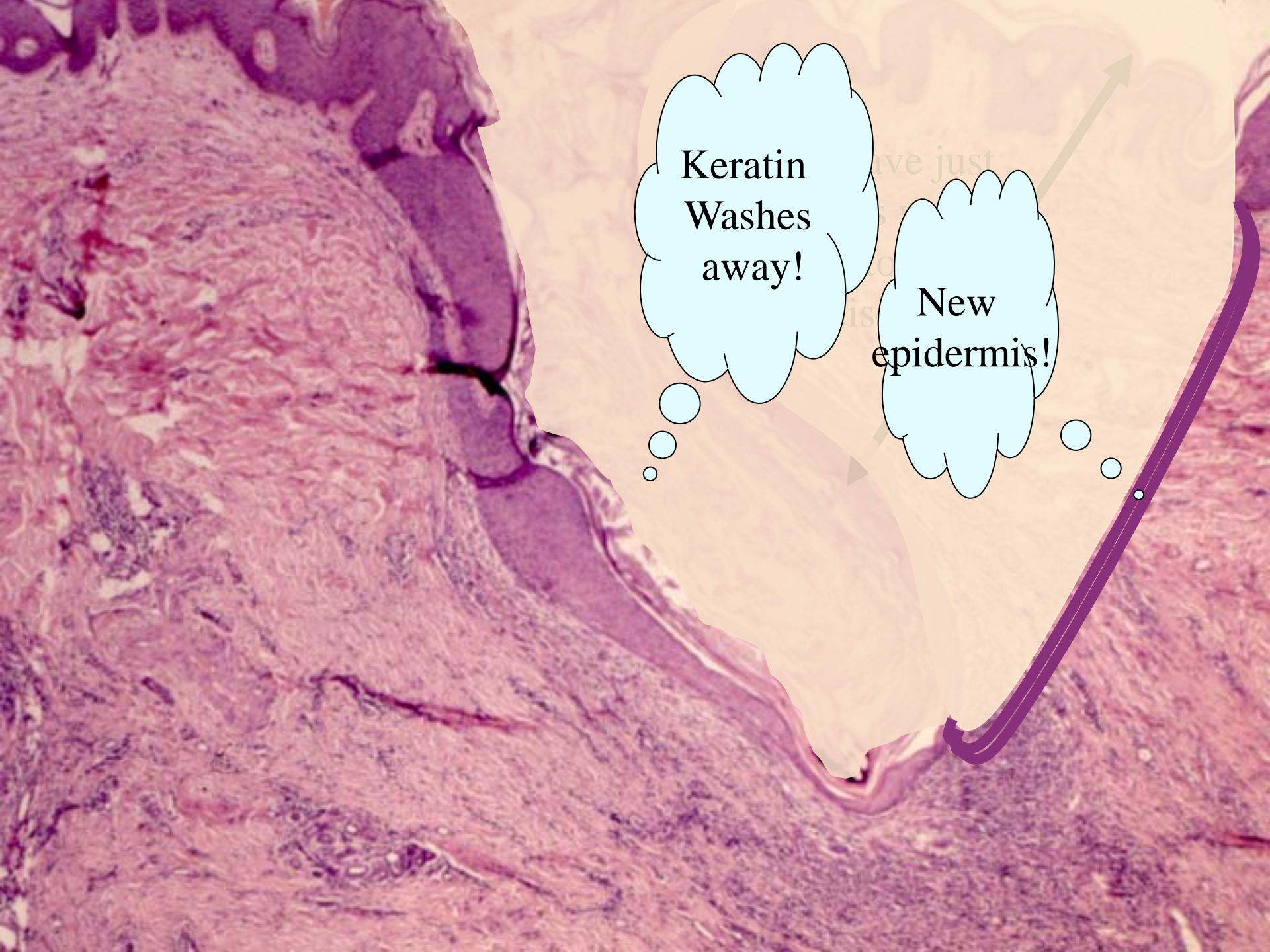


Unroofing the follicle -

the specimen the size of a grain of rice.



You did this.....



Keratin
Washes
away!

New
epidermis!

When this Acute Abscess Walks into Your Office....



This is the Right Thing to Do -



Drain laterally --



A finger's width off the midline.

STAY OUT OF THE DITCH

Once the Abscess is Open -

STOP!

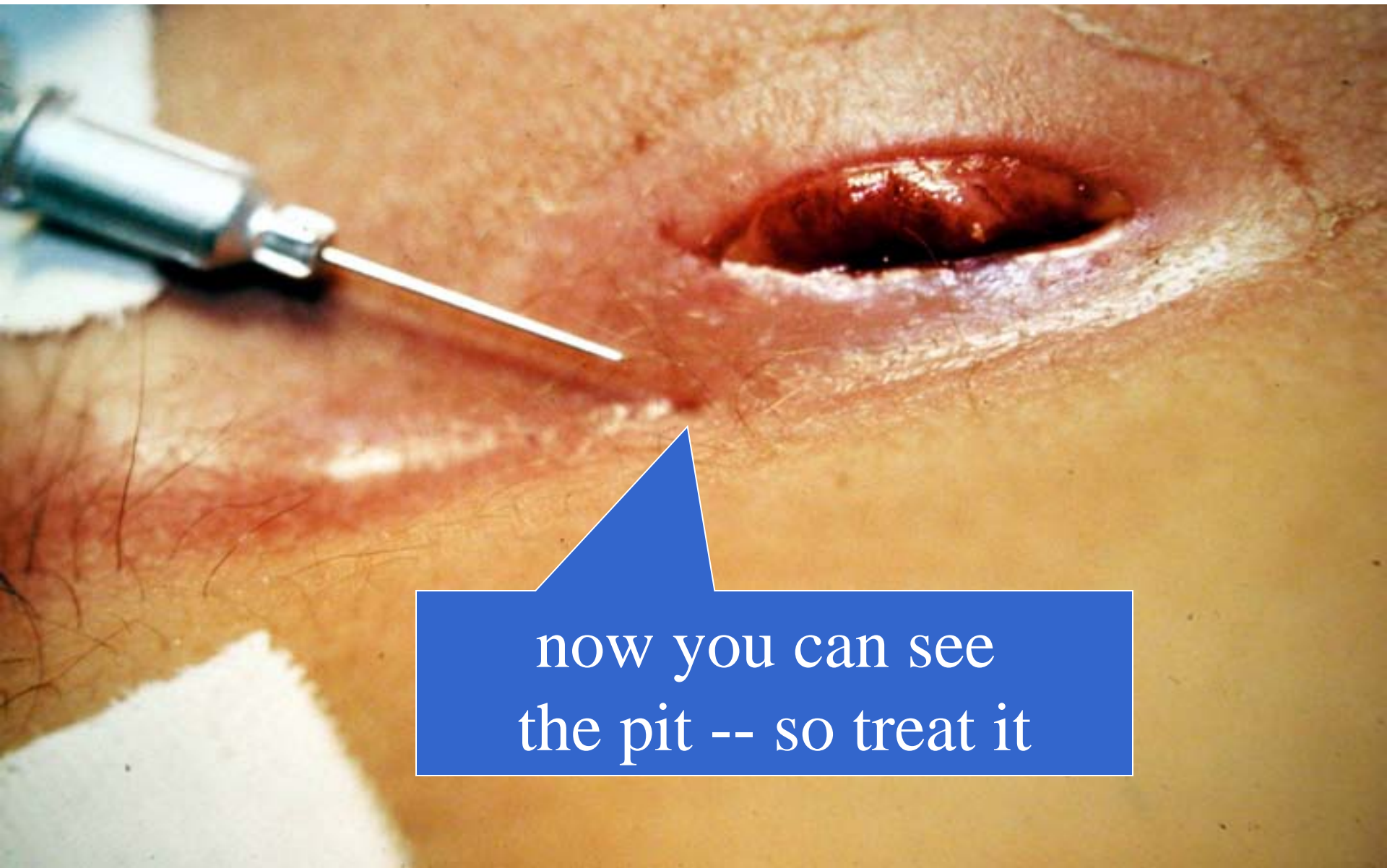
...For 10 Days to let EDEMA fade. DON'T PACK.

When this drained abscess RETURNS
to your office --



10 days after Incision
& Drainage.....

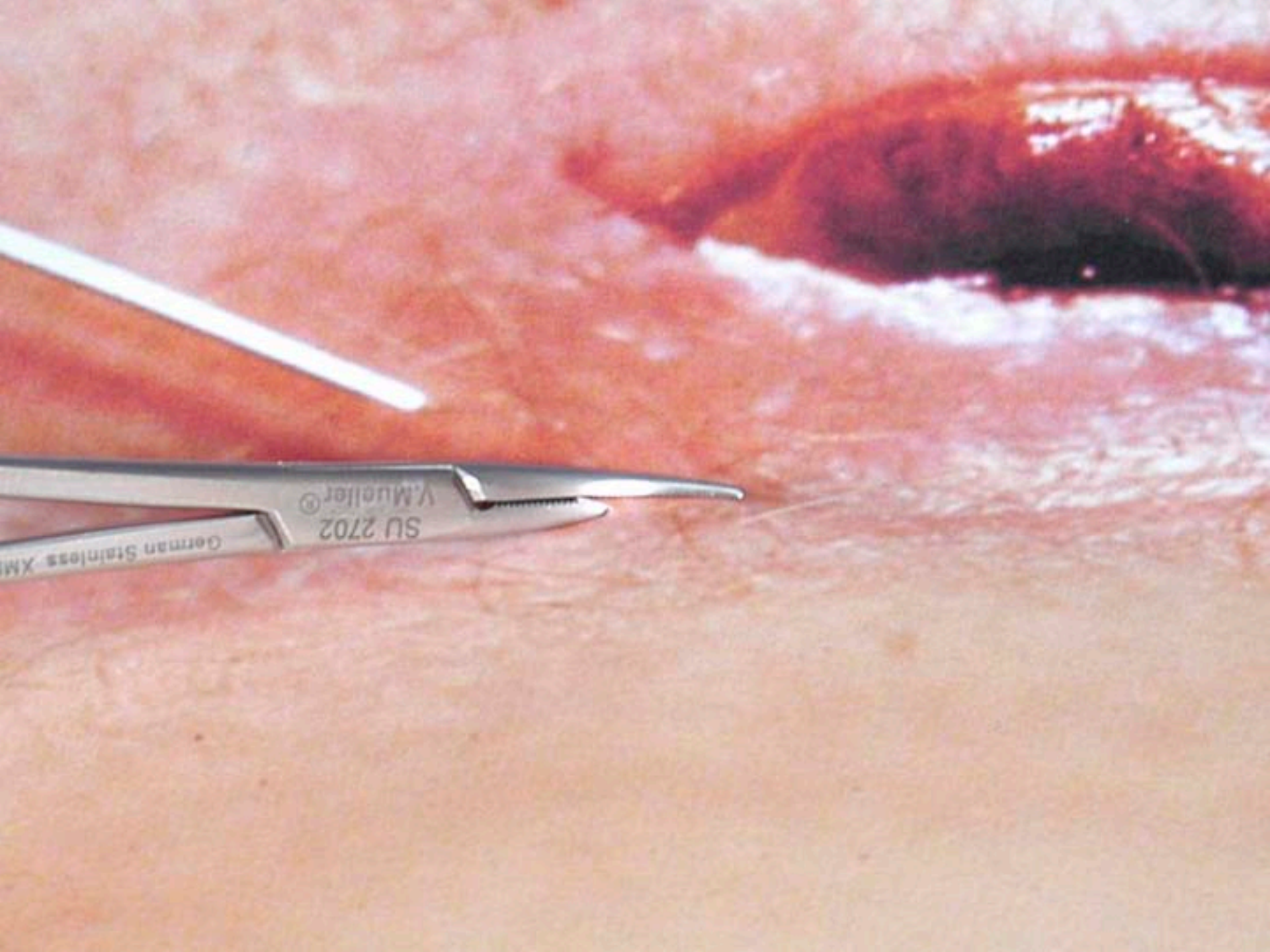
Edema has cleared;



now you can see
the pit -- so treat it

Insight!

PICK ALL PITS



German Stainless Steel XM

SU 2702

V. Mueller

If a cavity is present it is a
CHRONIC ABSCESS:

Insight!

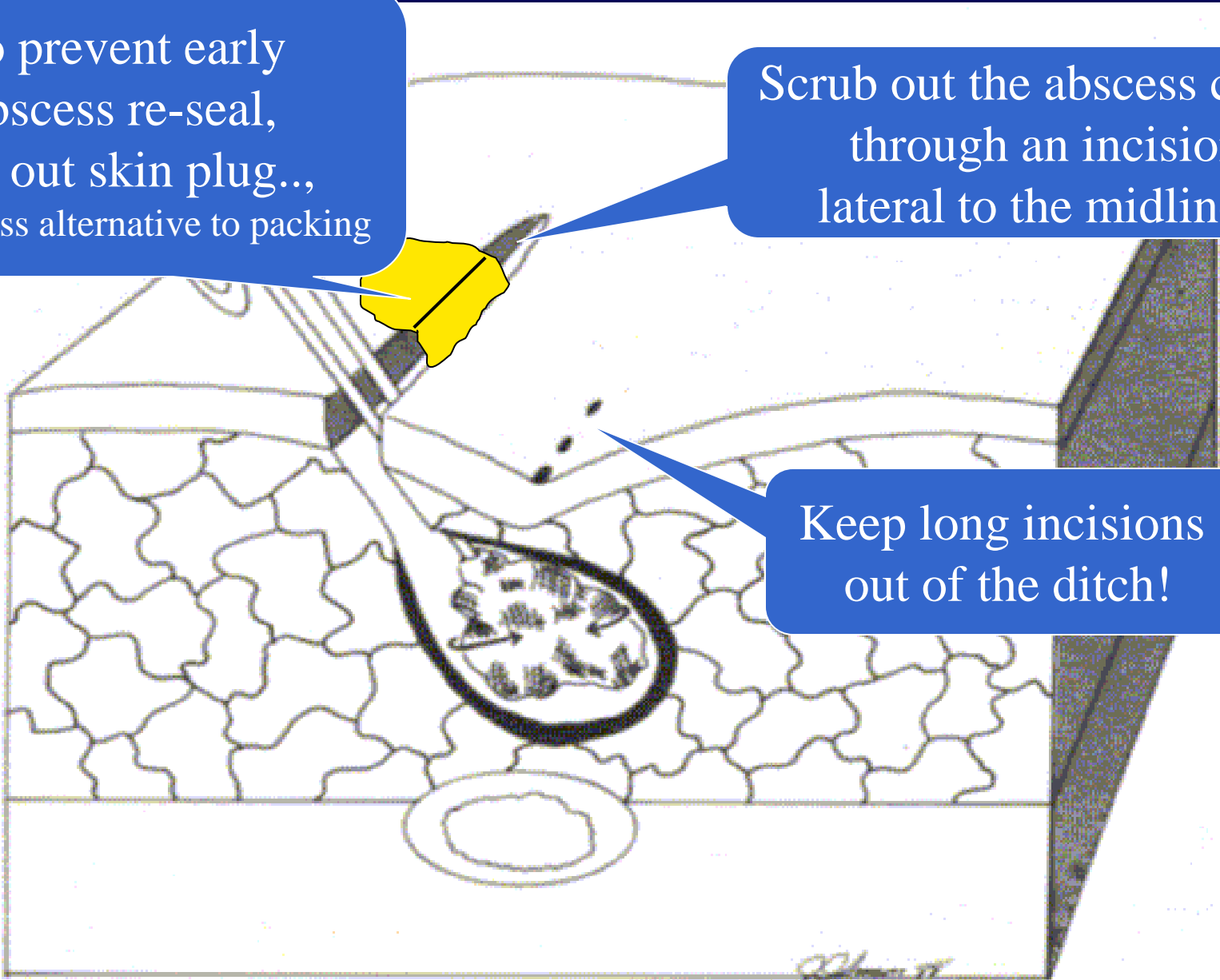
STAY OUT OF THE DITCH

Prevent Early Abscesses

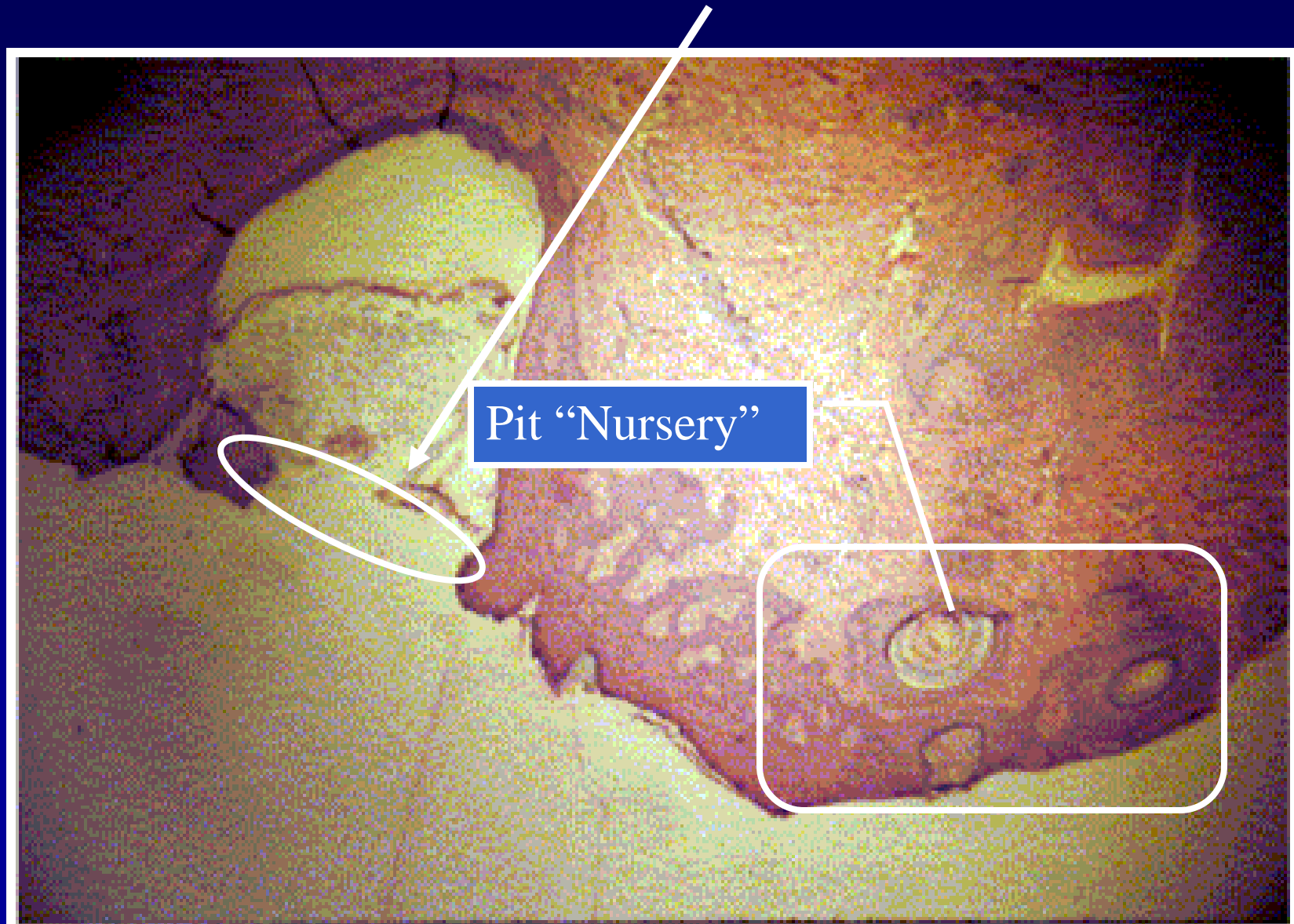
To prevent early abscess re-seal, cut out skin plug., a painless alternative to packing

Scrub out the abscess cavity through an incision lateral to the midline --

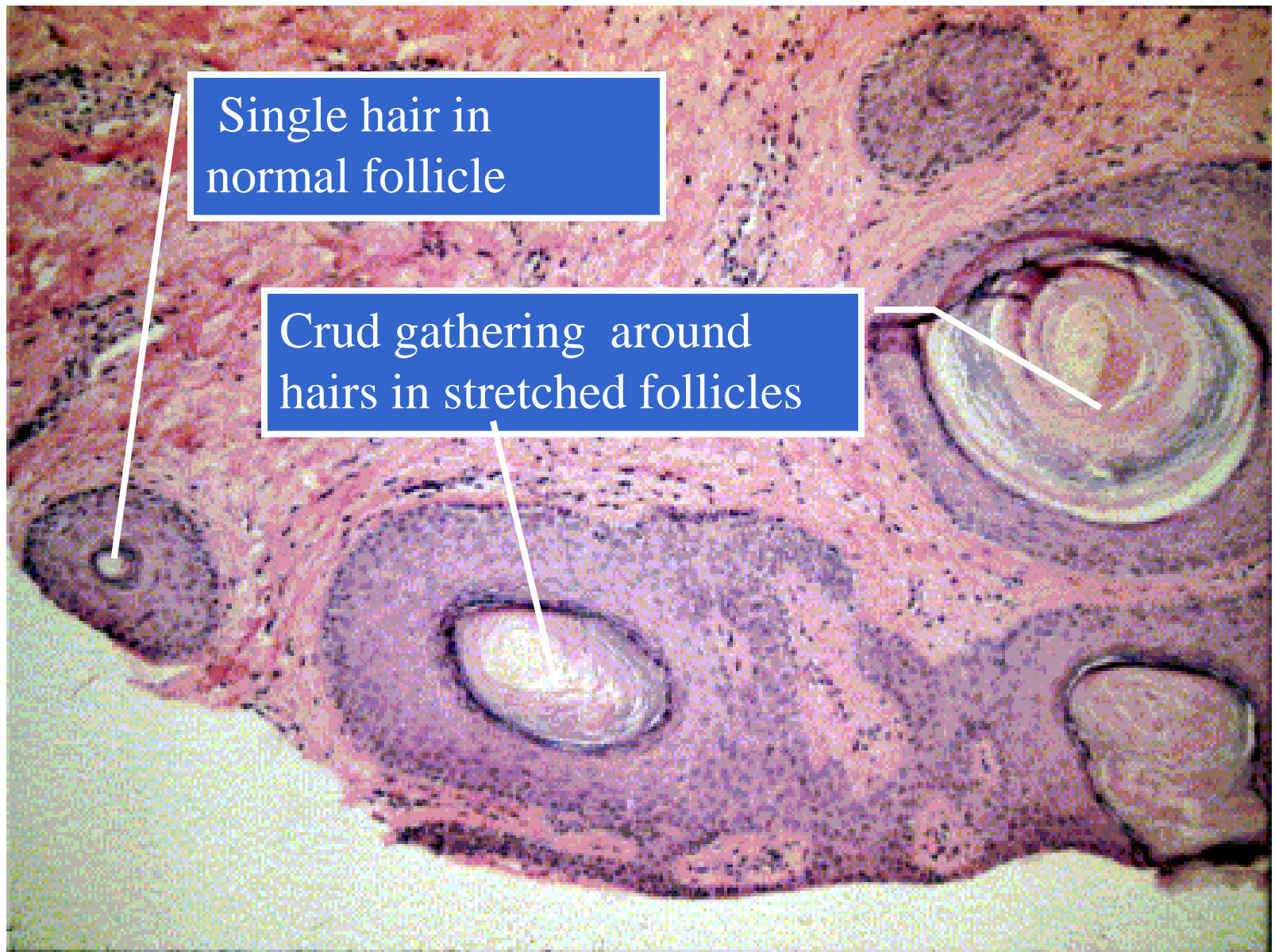
Keep long incisions out of the ditch!



What is this Opening we call a Pit?



The “Pit” Nursery



Single hair in normal follicle

Crud gathering around hairs in stretched follicles

The Pilonidal Pistol

Shoots a hole in the Saran Wrap (epidermis)



Drives hair and crud into fat,



Which puts bacteria in fat
-- to start a



PILONIDAL

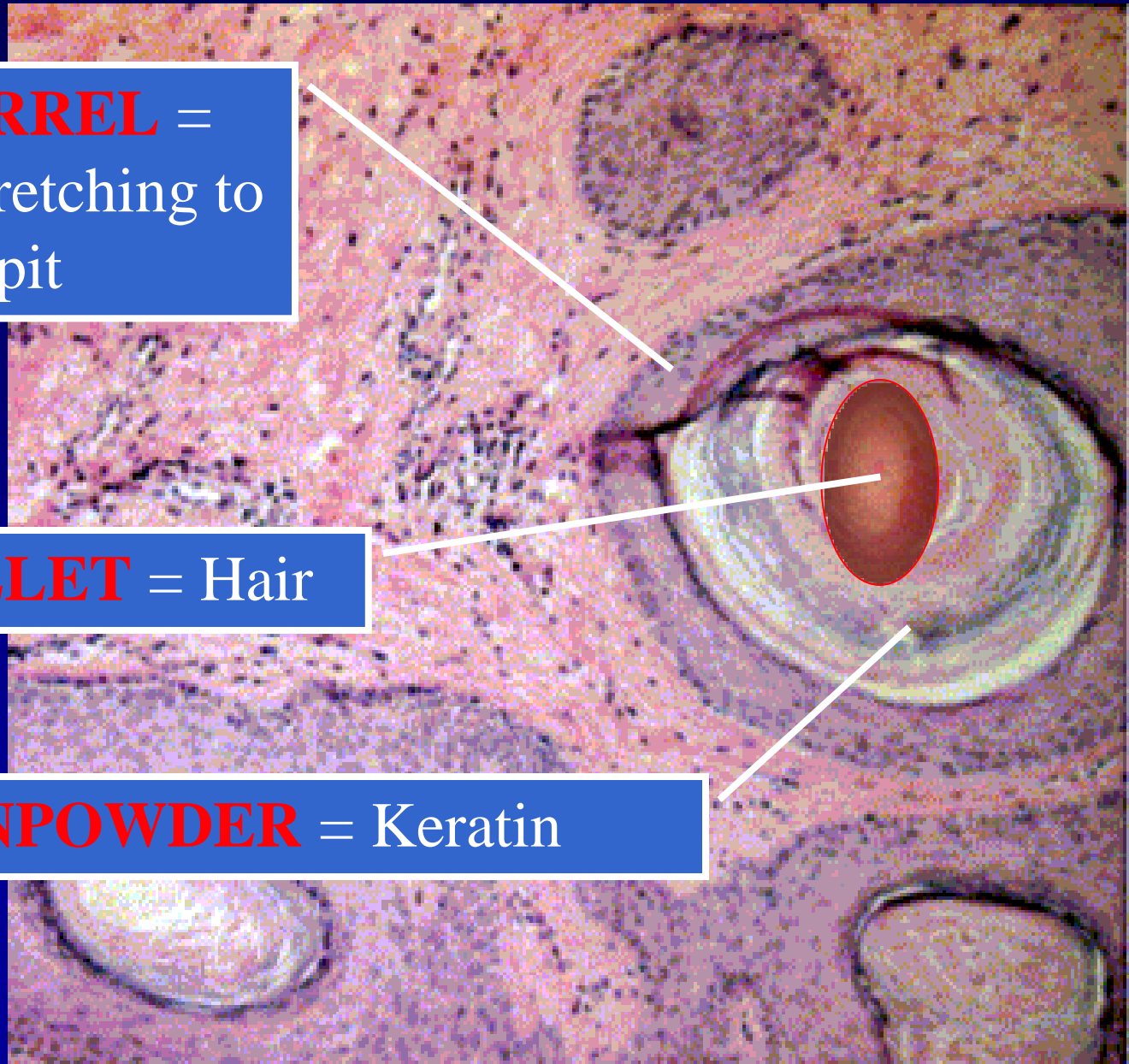
ABSCCESS !!!

Growing a Pilonidal Pistol -

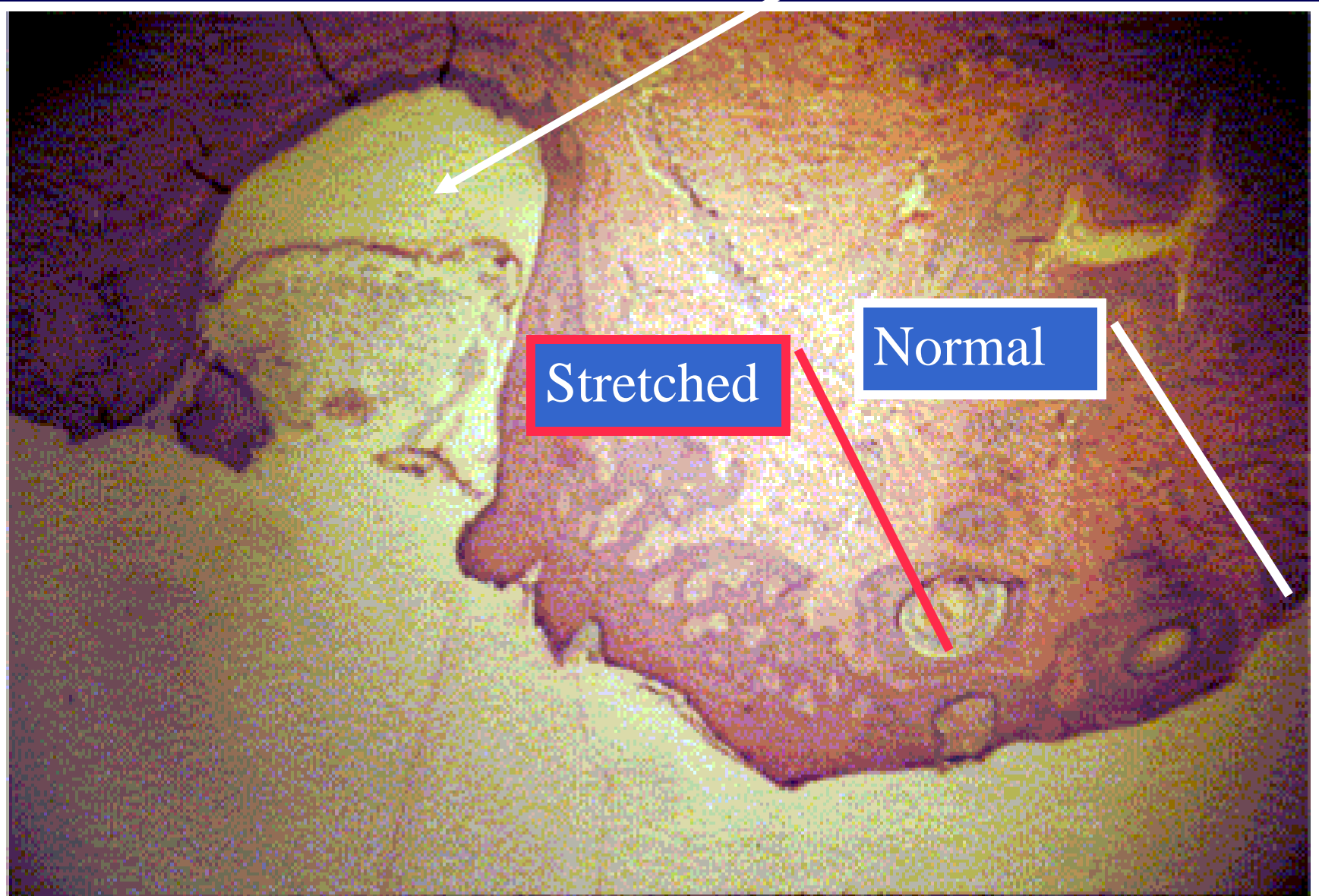
GUN BARREL =
Follicle stretching to
become a pit

BULLET = Hair

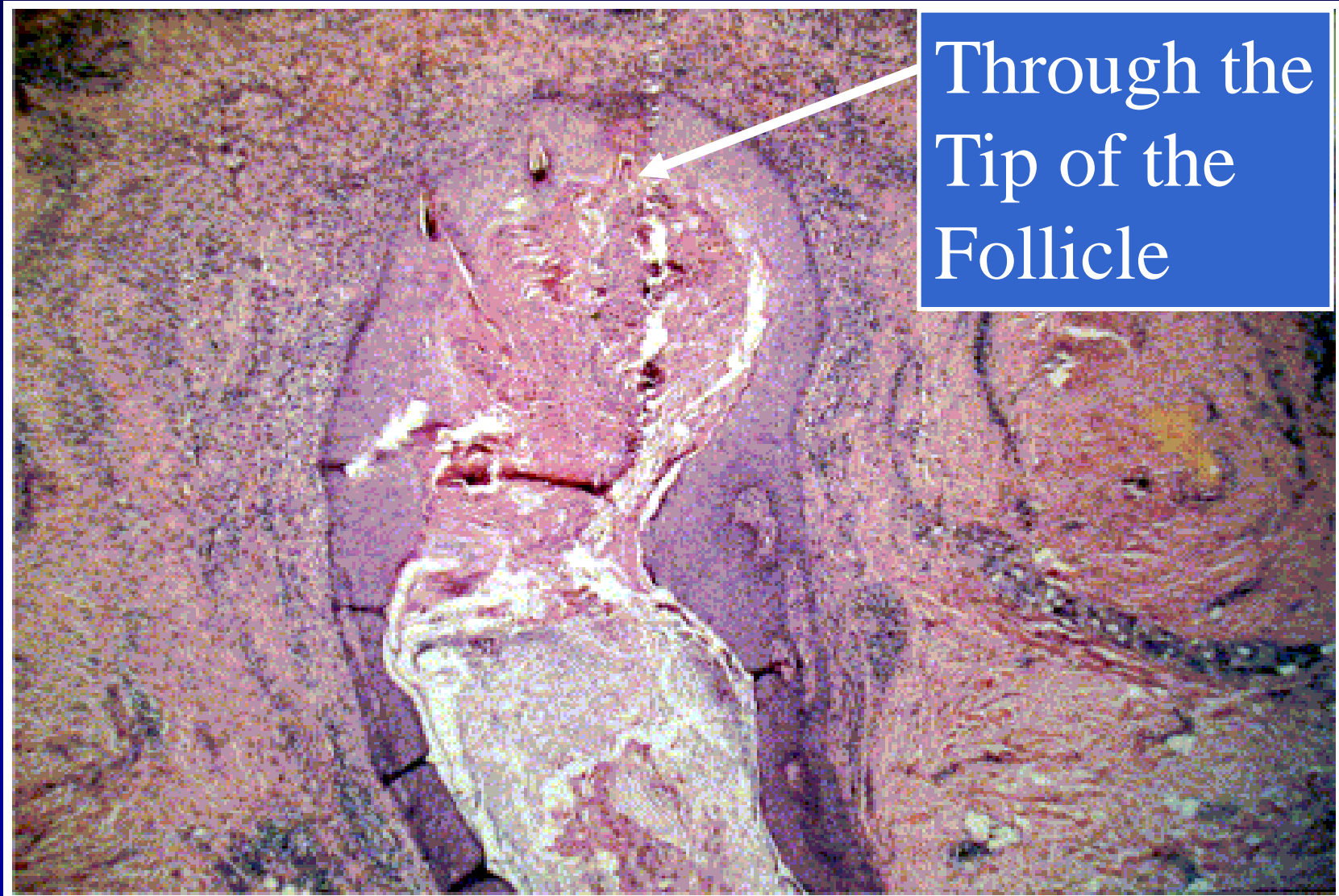
GUNPOWDER = Keratin



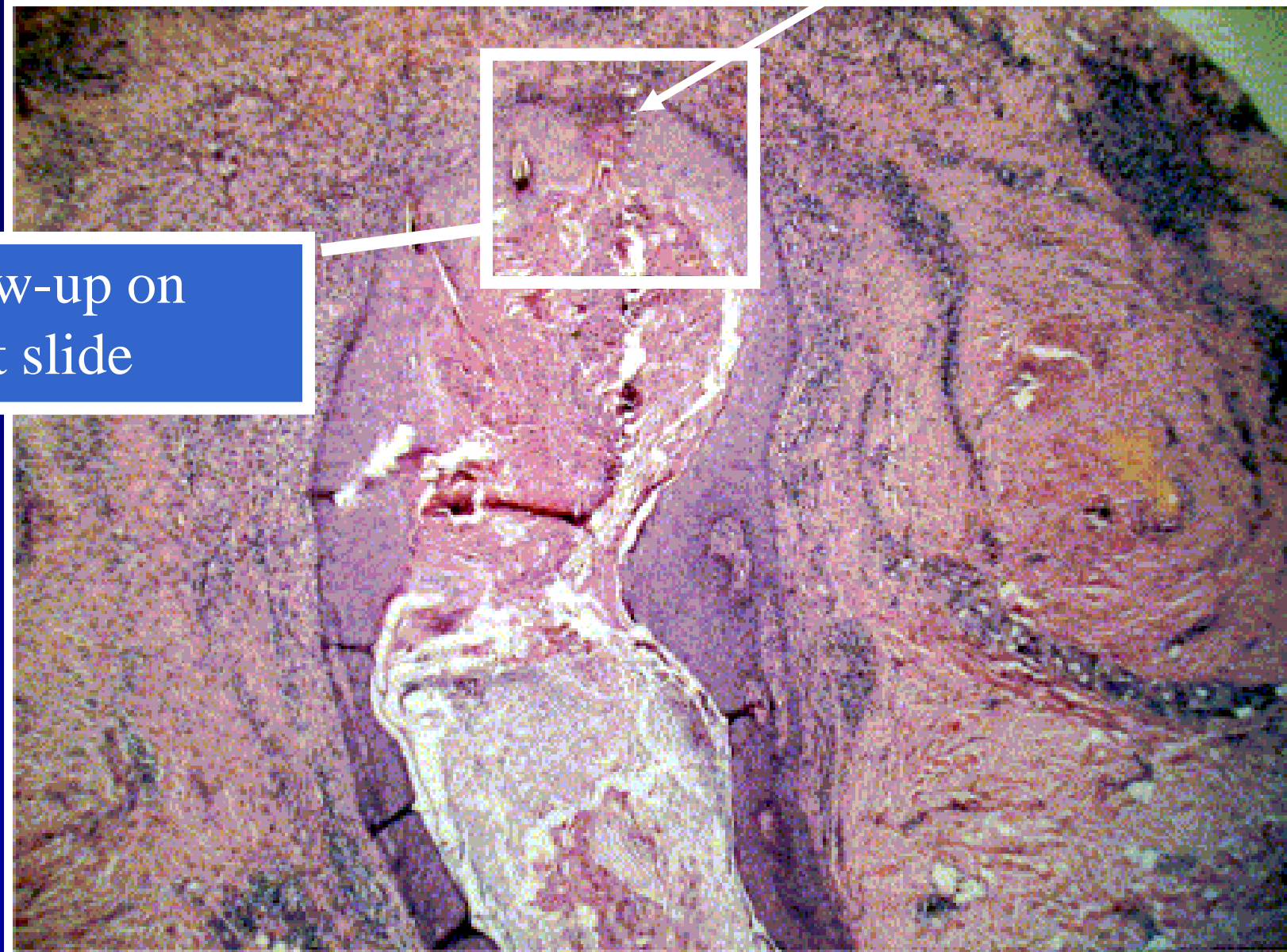
The Pit – a Loaded Pistol



The Pilonidal Pistol “Fires”



Earliest Infected Follicle



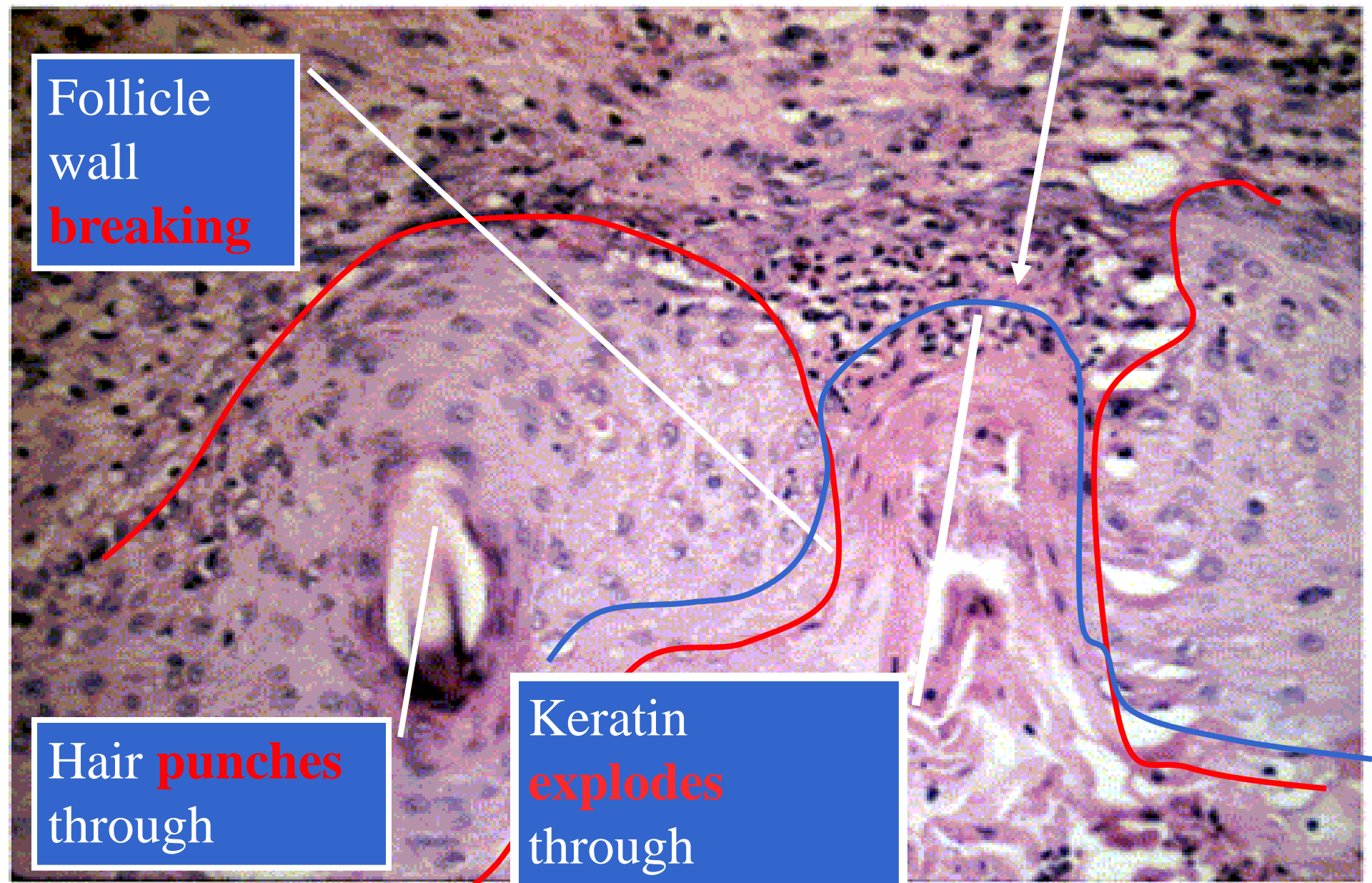
Blow-up on
next slide

Start of an Acute Abscess

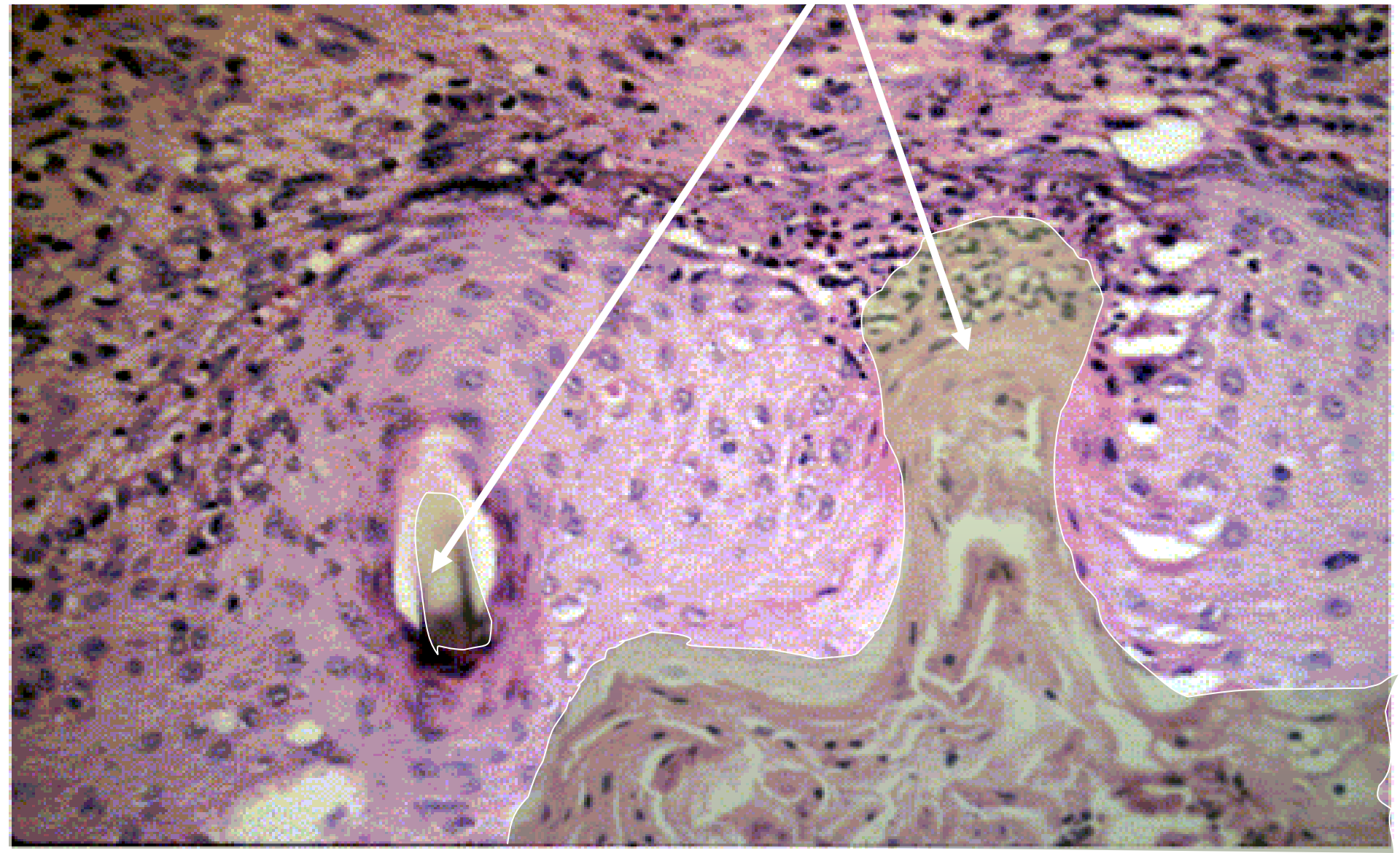
Follicle
wall
breaking

Hair **punches**
through

Keratin
explodes
through



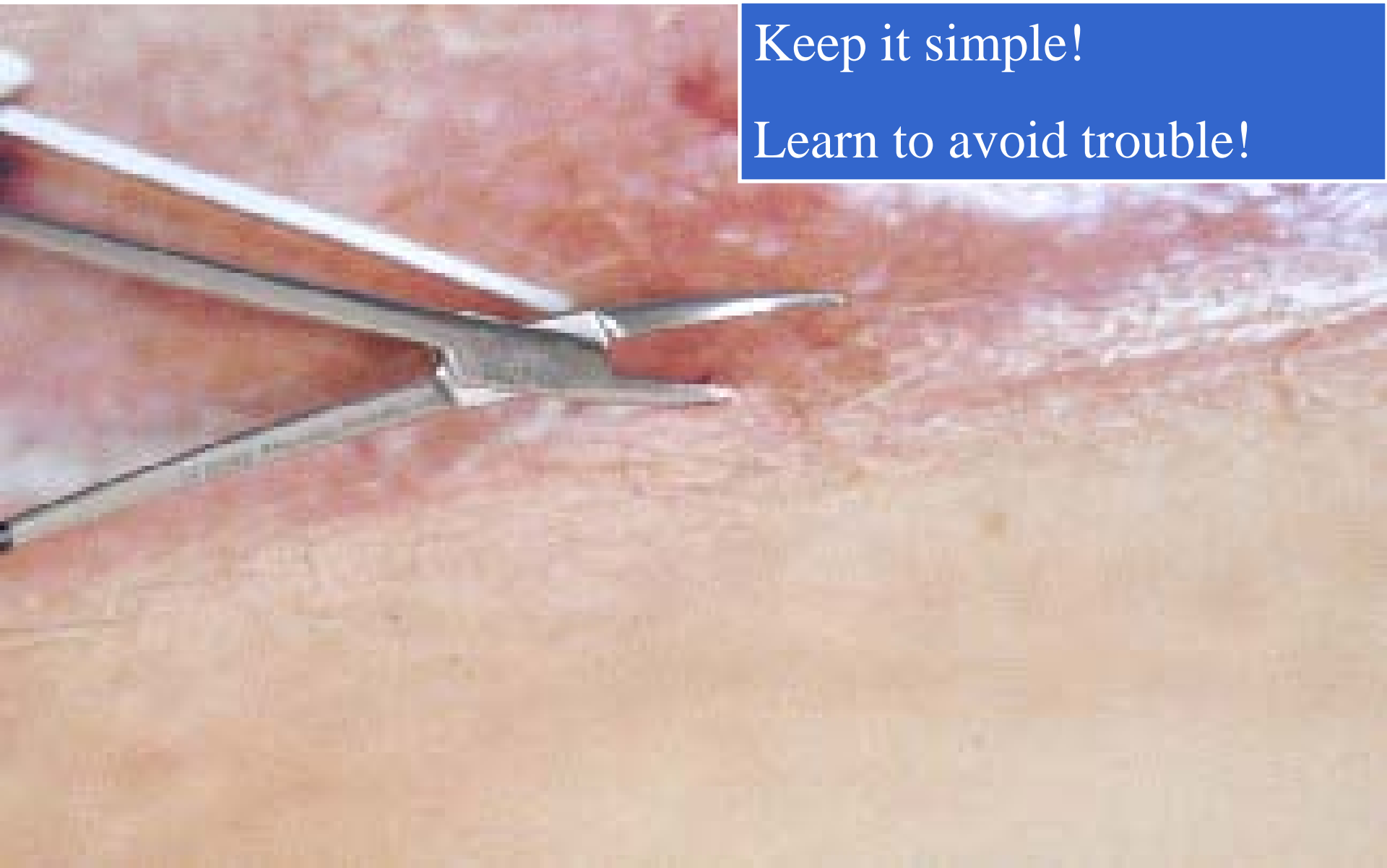
Summary:
Pick (Clean) ALL Pits!



...And Pick (Out) Early Pits

Keep it simple!

Learn to avoid trouble!



2 Points to Remember on Pilos

1 PICK ALL PITS

2 STAY OUT OF THE DITCH

Curing Complex Problems

When you ask “How can I cure complex pilonidal problems?”

I reply, “**Cleft Lift.**”

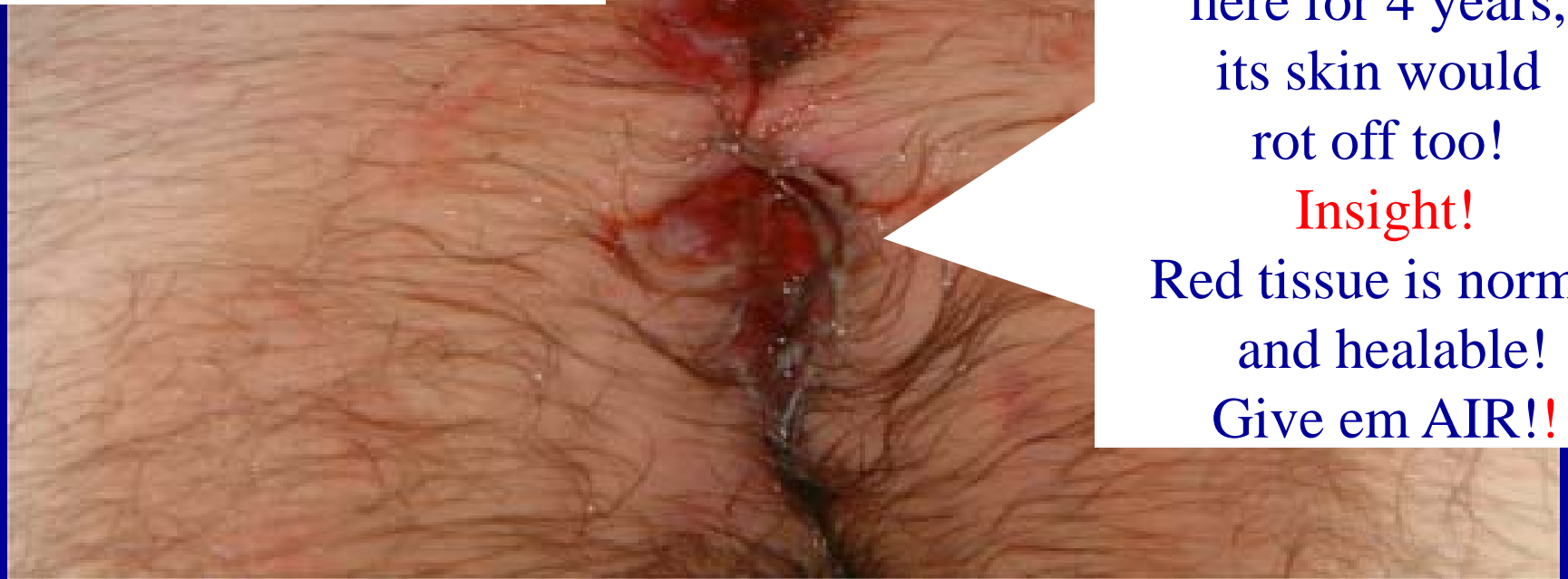
(Overlooked simple care or failed previous surgery often starts these complex problems.)

A Small Tragedy

21 yr old after--

Four years of disease &
Five operations (2 were
huge Rotation Flaps)

Learn to PREVENT
these WRECKS



This is a SEWER!
Here anaerobic bacteria
destroy
skin & suture lines.
If you held your finger
here for 4 years,
its skin would
rot off too!

Insight!
Red tissue is normal
and healable!
Give em AIR!!

623 Patients

Out of 623 Pilonidal patients we treated,
we located charts on the 31 WORST

These 31 had endured--

- 141! Prior operations
- 252! Years of open wounds
- All 31 healed after 1 cleft lift

After 4
yrs and
Pre-op



Ready for
dressing



Cleft Lift--Result

1 week post
operative



Failure to heal-reasons

in our 31 patients

- In 16 Surgeon left a deep cleft
- In 7 Surgeon left an overhang
- In 5 Surgeon left pits (or new ones grew)
- In 3 Scar too tight, not enough skin left

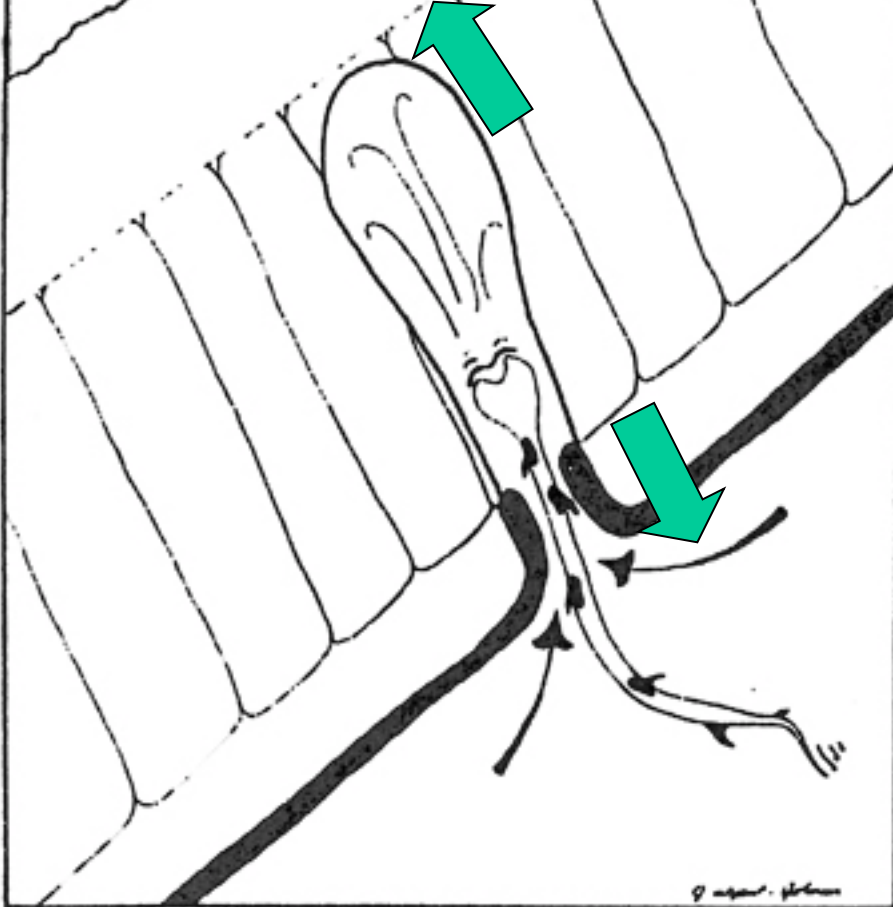
When Clefts Will Not Heal -

WHAT GOES WRONG?

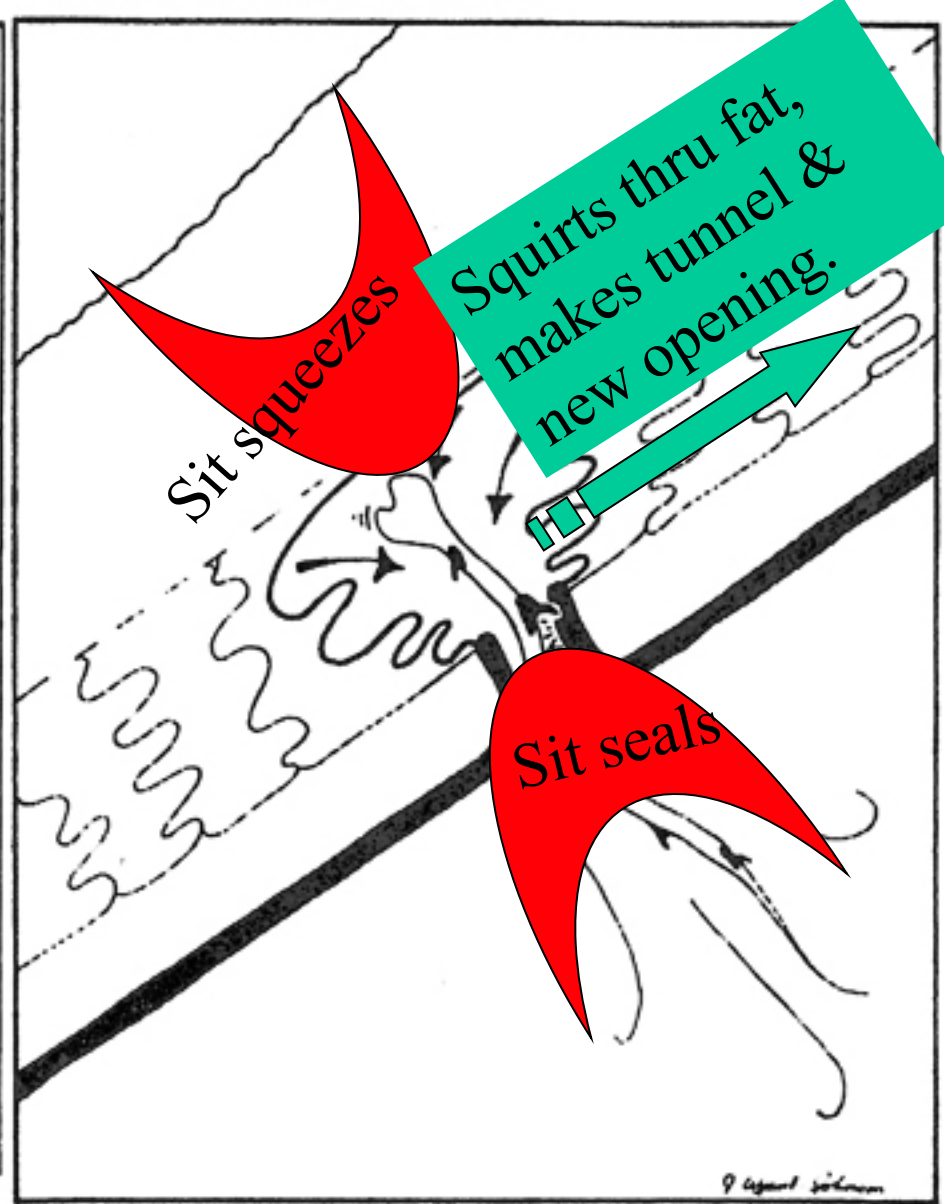
Clues from a Case That Failed to Heal....



Insight!
A pit pumps pus



When patient stands, the cavity sucks in debris.



Squirts thru fat,
makes tunnel &
new opening.

Sit squeezes

Sit seals

When patient sits

Processes that keep wounds open for years....

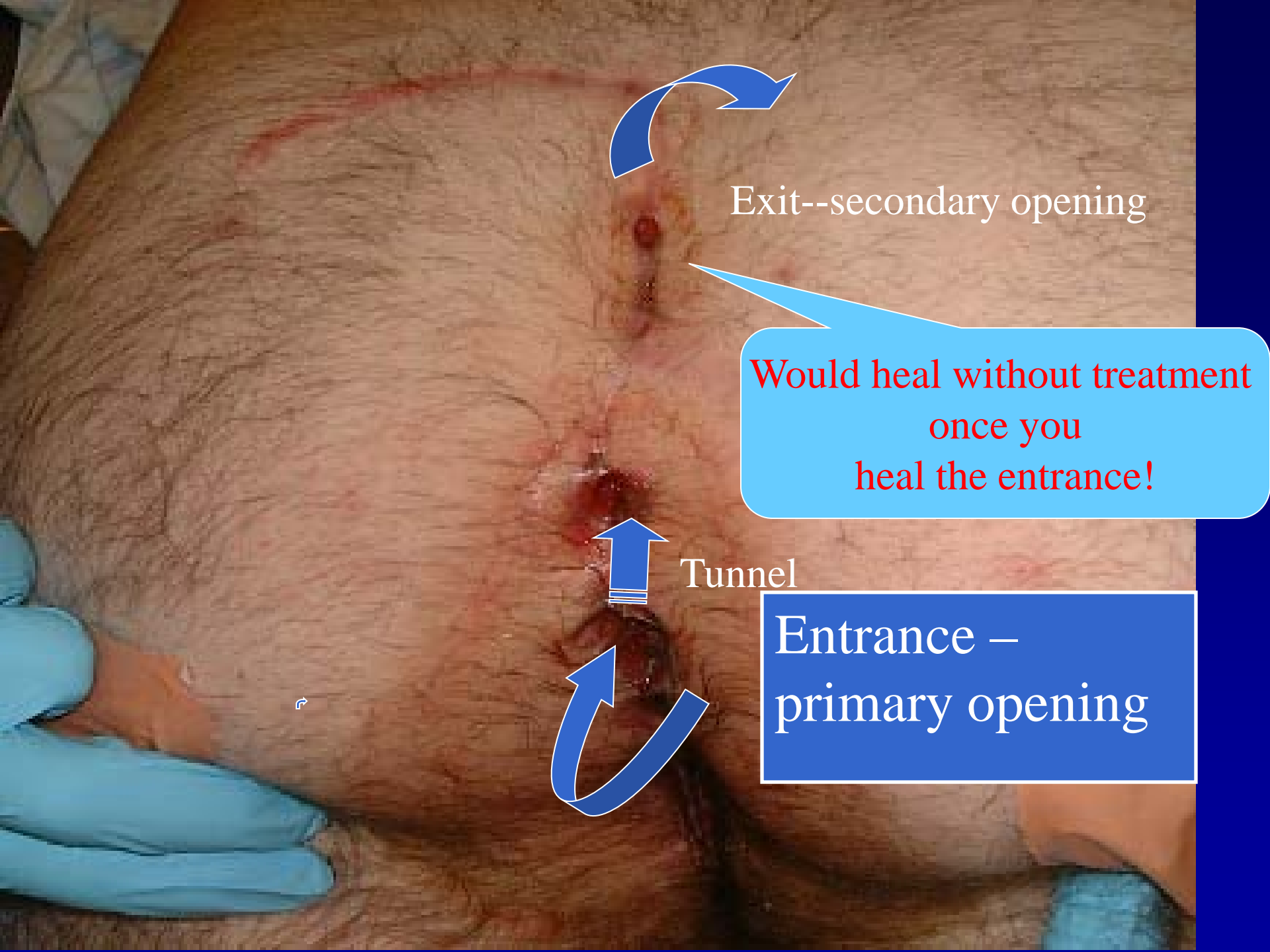
1. Tight scar
generates...

... a hidden overhang.

3. Debris collects,
anaerobes eat
a new hole in
skin

4. Primary opening
collects pus and debris.
It pumps pus
and hair upward.





Exit--secondary opening

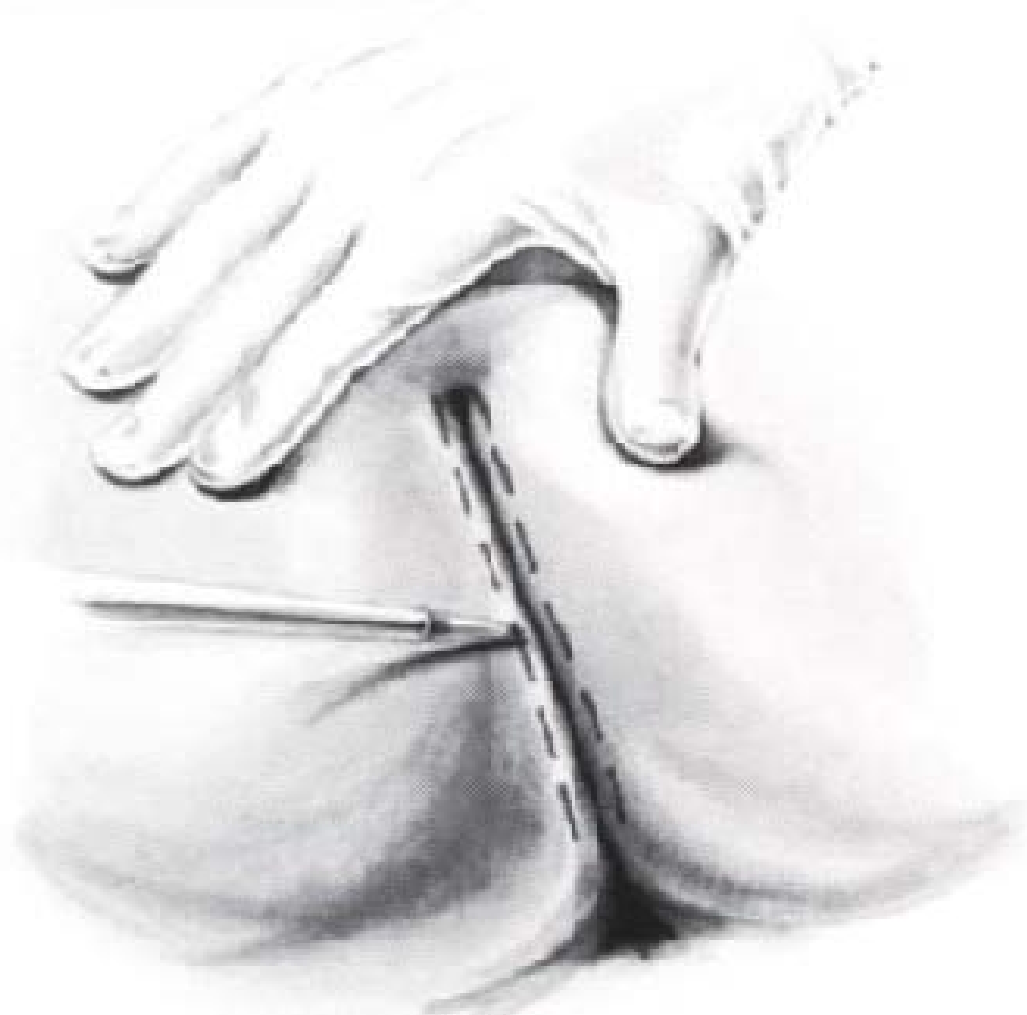
Would heal without treatment
once you
heal the entrance!

Tunnel

Entrance –
primary opening

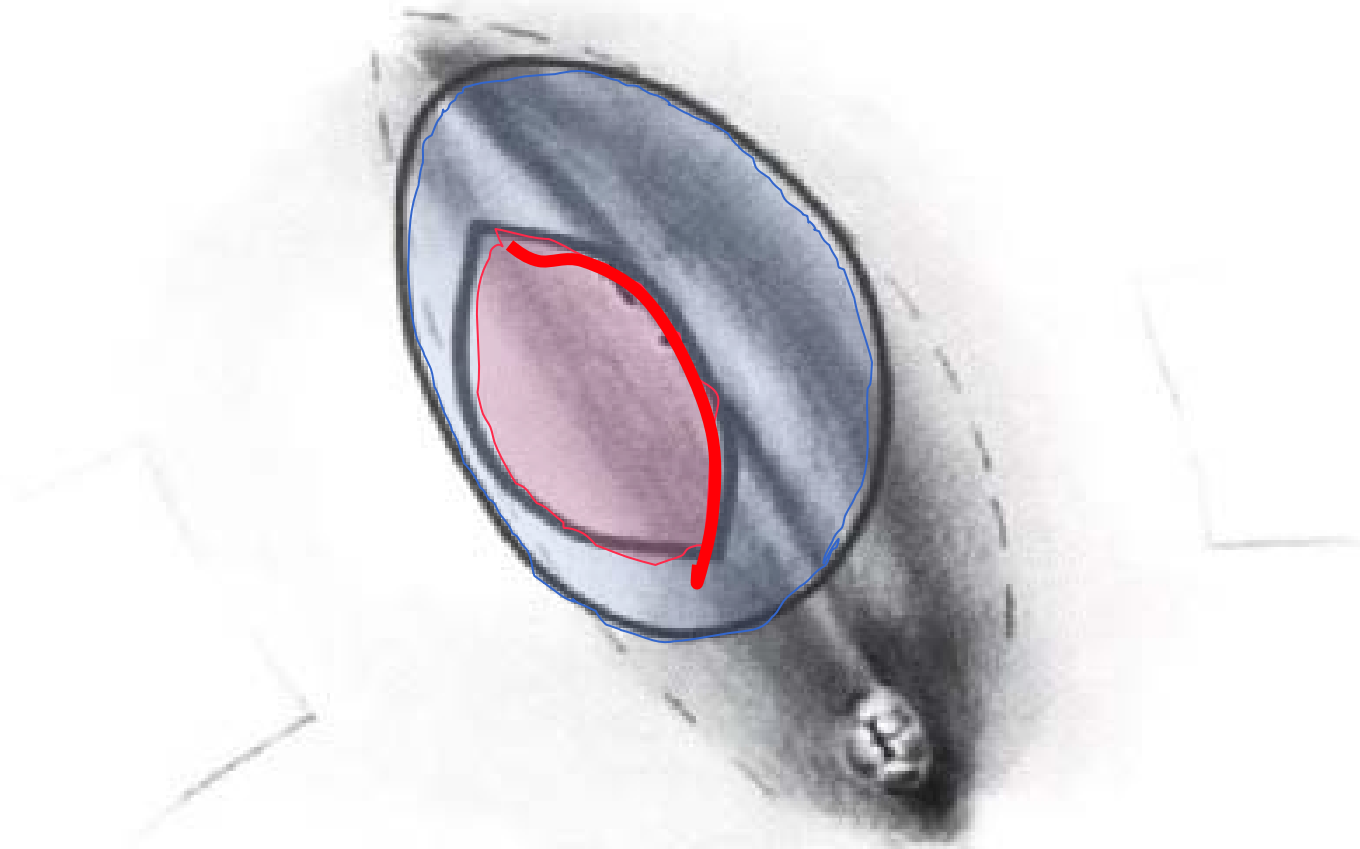
Technique

Push buttocks together and mark the outer line of contact.



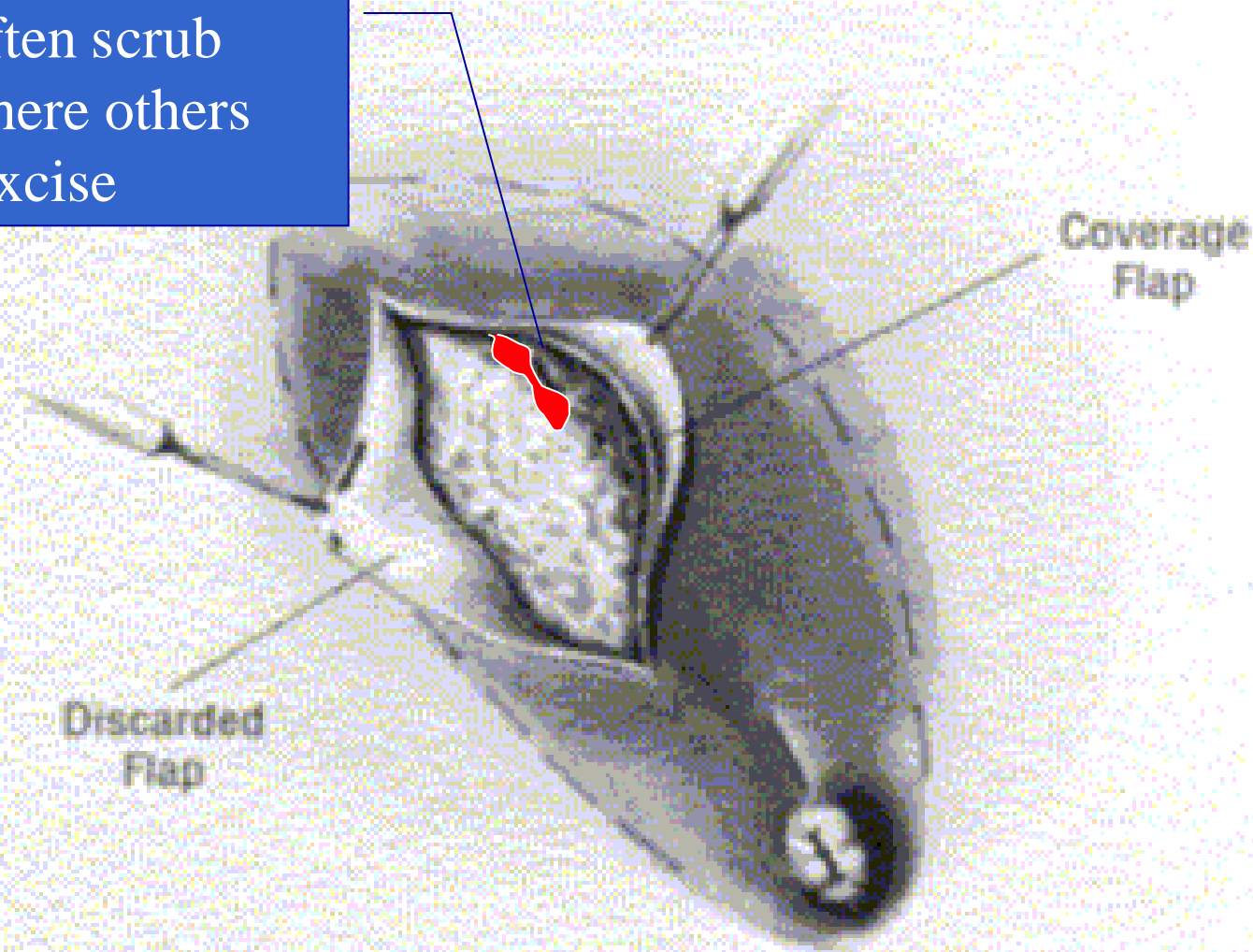
Incise

Incise through the heavy red line first, then elevate all skin tinted blue. Plan to remove the skin tinted pink.

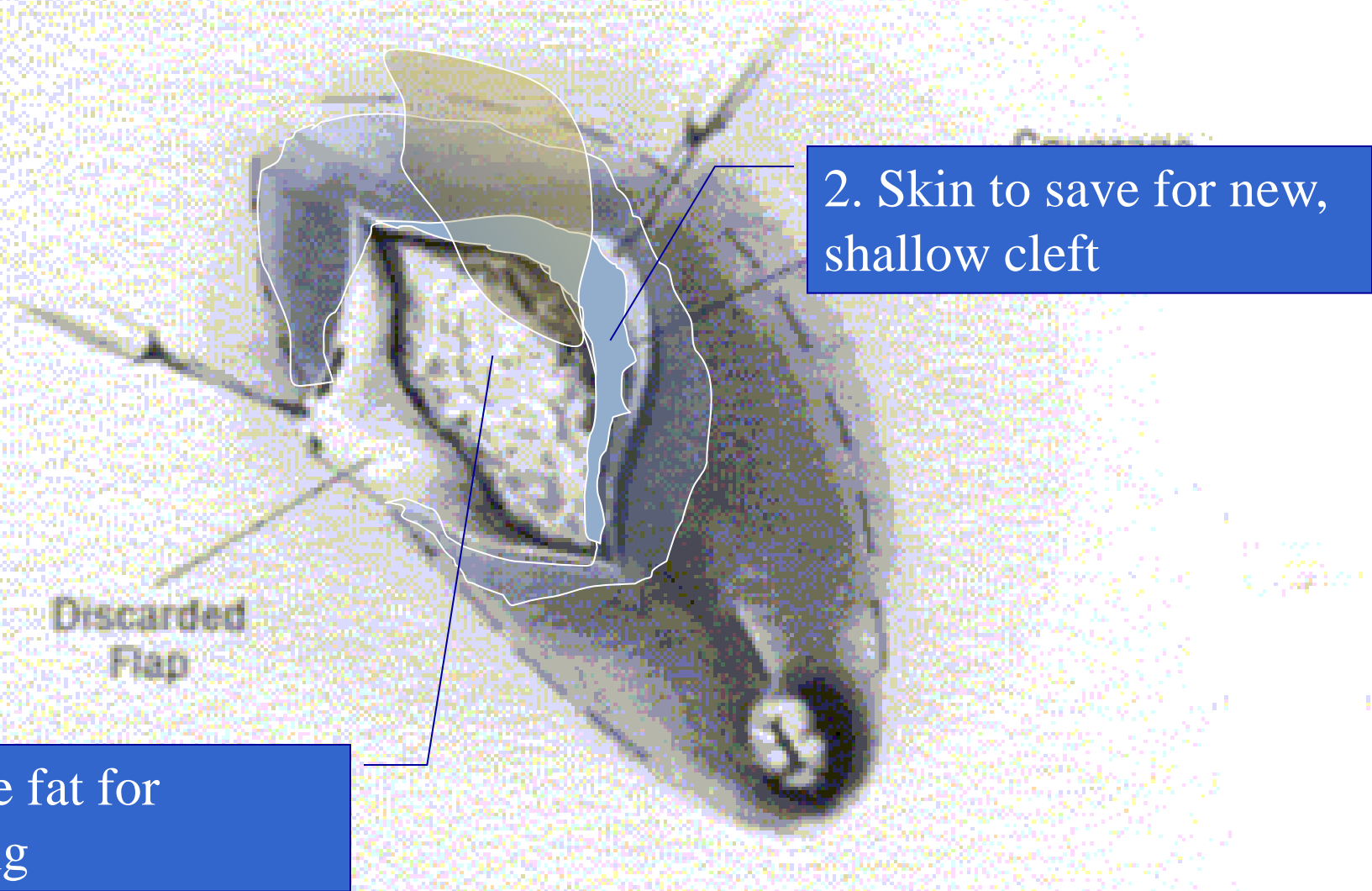


Flaps Turned Back, Red is exposed abscess cavity--

1. We often scrub clean where others would excise



What to Save

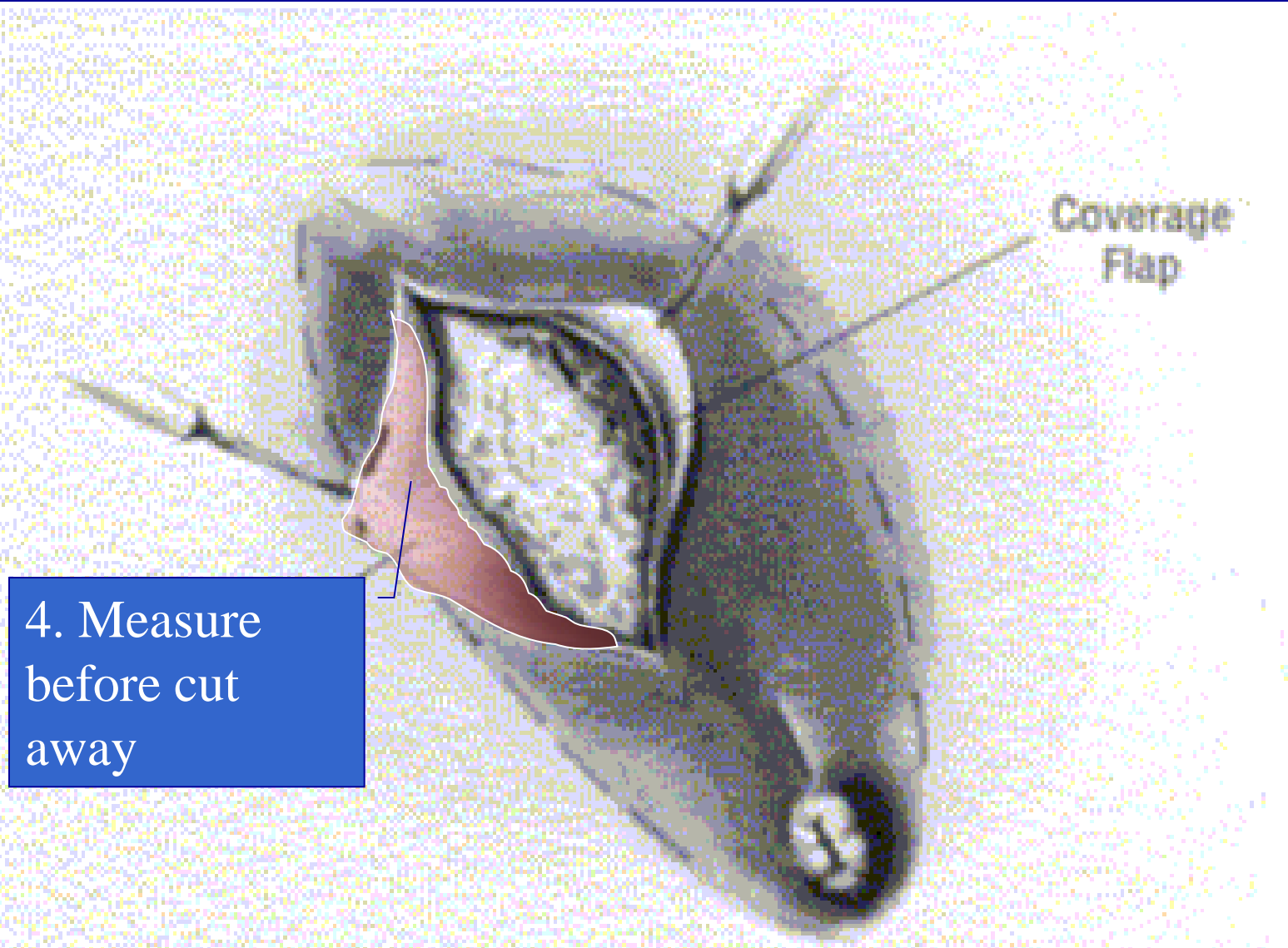


2. Skin to save for new, shallow cleft

3. Save fat for padding

Discarded Flap

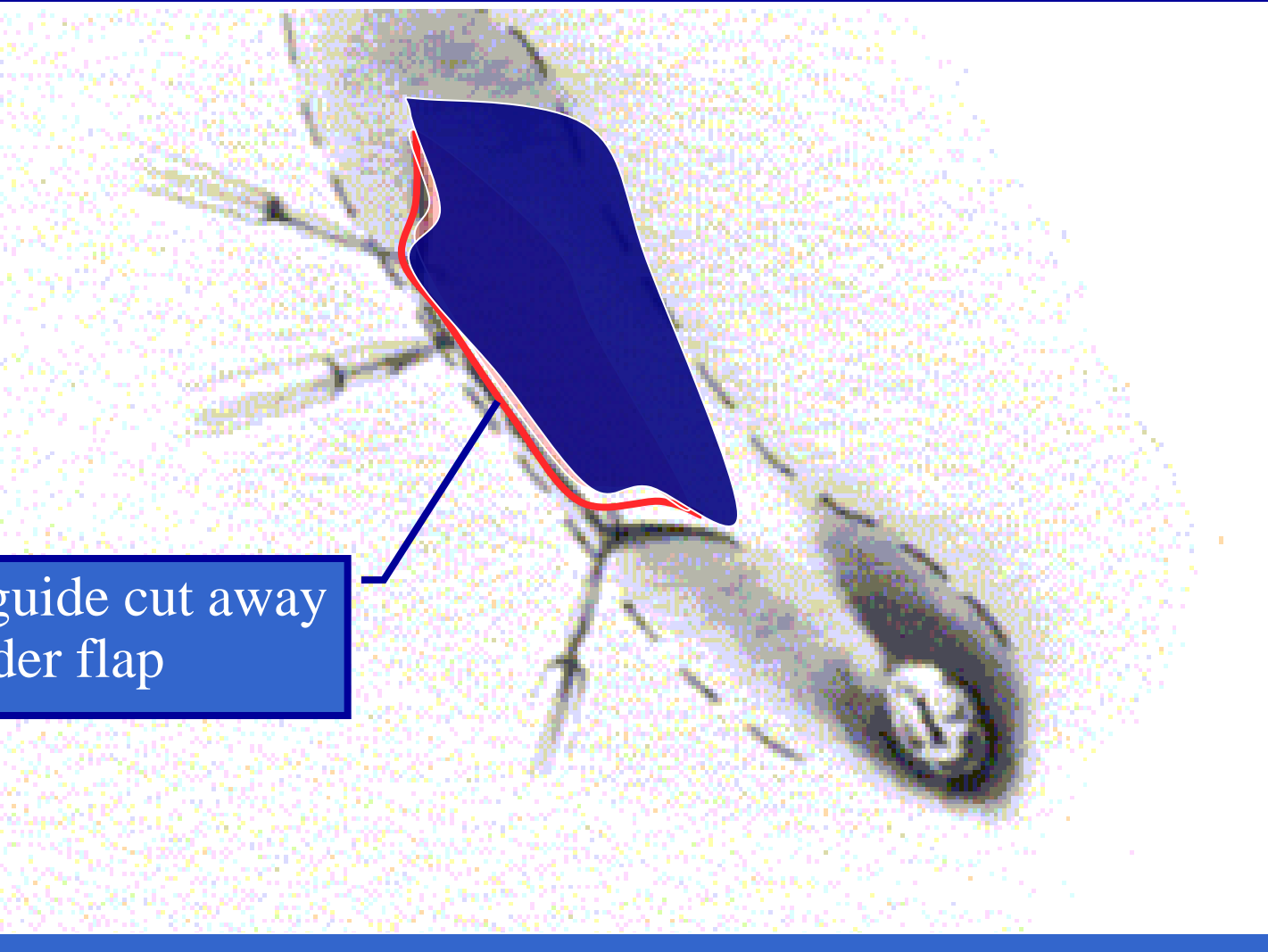
Cut Away



4. Measure
before cut
away

Coverage
Flap

Check for Coverage

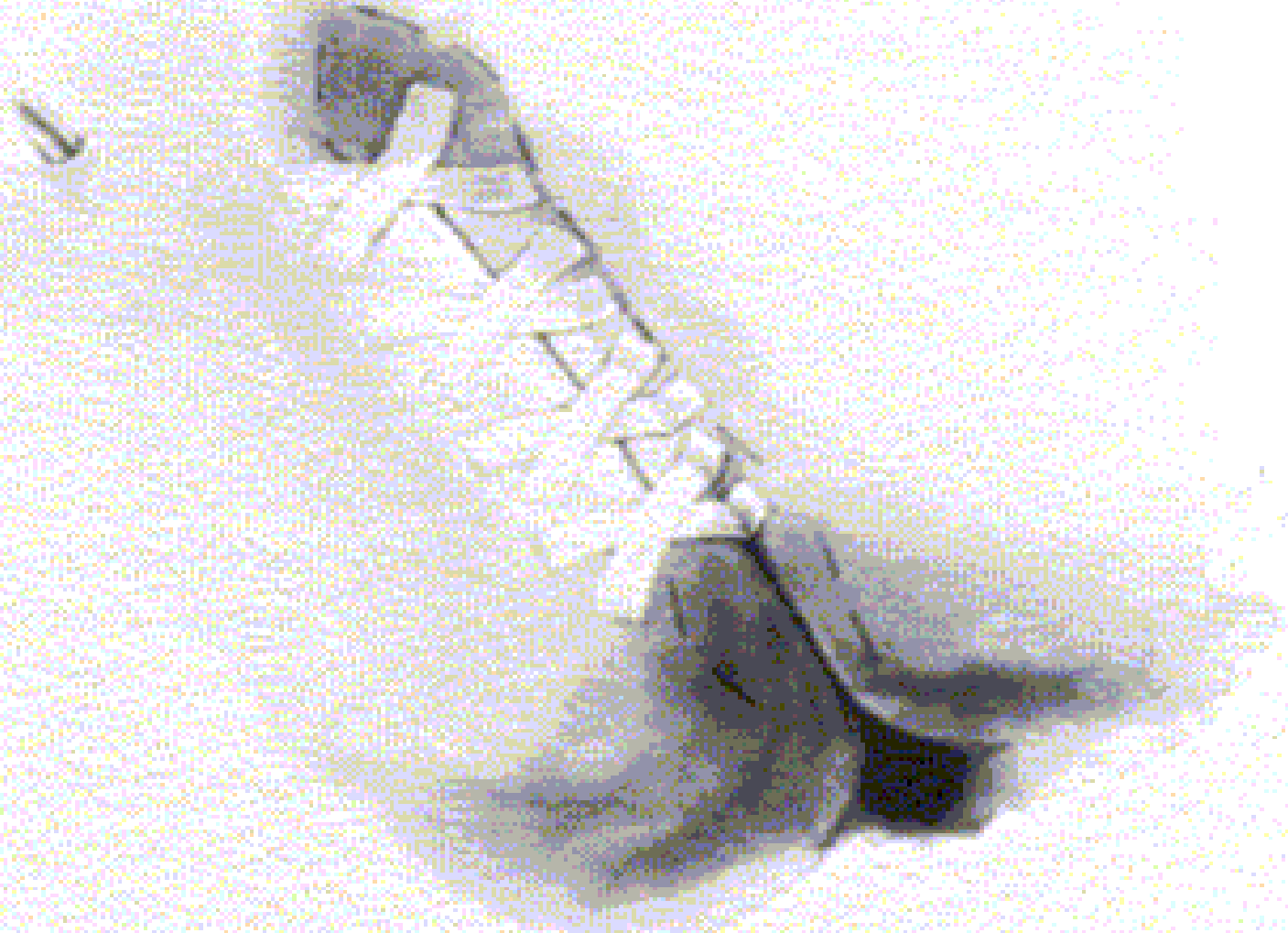


Line to guide cut away
of under flap

The diagram shows a top-down view of a buttock. A blue, irregularly shaped flap is positioned over the buttock. A red line follows the inner edge of this blue flap. A pink area is visible beneath the blue flap, representing the discard flap. A blue line with an arrow points from the text box to the red line.

Push buttocks together to check fit of blue coverage flap,
mark a line and cut away pink discard flap (covered).

Control Shearing Forces



Tape strips are applied in an X shape to control shearing forces. Subcuticular sutures are removed at 10 days. No sutures to sacrum.

After 4
yrs and
Pre-op



Ready for
dressing



Cleft Lift--Result

1 week post
operative



3 points to remember on Pilonidals

1. PICK ALL PITS

2. STAY OUT OF THE DITCH

3. CLEFT LIFT for worst cases

Failed Pilonidal Surgery

New Paradigms

And New Operations Leading to Cure

Arch Surg 2002;137:1146-1150

–Available :

- CD of this Power Point talk
- DVD of cleft lift operation
- Reprints

•Questions? thomasbascom@yahoo.com or <JBascomR@pacinfo.com>