You are doing WELL when:
- Your pain is diminishing or gone
- You are able to participate in self-care of your wound
- Your energy and stamina increase from week to week

CALL your nursing agency when:
- You notice an increase in redness, pain, swelling, heat or drainage from the wound
- Your wound drainage changes to yellow, green/blue or brown liquid
- Your wound appears to be larger

CALL 911 RIGHT AWAY when:
- Your incision opens up dramatically
- Your wound begins bleeding and you cannot get it stopped

Your Nursing Agency contact information:

This booklet was produced as part of the South West Regional Wound Care Initiative June 2012.
Adapted from: Calea and CarePartners PSW Patient Information 2012.
and from Ready...Aim...Improve! Surgical Wounds http://www.qualitynet.org

South West Regional Wound Care Toolkit
My Pilonidal Sinus Wound

This booklet will help you to improve your health, help your wound to close and heal and may prevent new pilonidal sinuses from happening.

You can help with self-care by:
- Recognizing the signs and symptoms of wound infection
- Keeping your wound dressing clean and dry
- Changing the dressings as instructed by the nurse
- Eating a healthy, balanced diet
- Avoiding trauma, pressure or friction to the wound area (e.g. no tight clothing)
- STOPPING or decreasing smoking
- Keeping your pain under control
- Getting enough rest

Closed wounds are not the same as healed wounds, but health care professionals use both words.
New skin covering the closed wound will never be as strong as before the injury, even when healing is complete.
This can take up to 2 years.
It is important to take extra care to prevent the wound from opening again.
If you need care when at home, and have OHIP, the South West Community Care Access Centre (SWCCAC) may be part of the health care team. Your team might include:

**Doctor/Nurse Practitioner:** will oversee your health, and make referrals to other professionals.

**Nurses:** will change your dressings and teach self-care. They will provide information and make suggestions to improve your health.

**Enterostomal Therapy/ Wound Care Specialist Nurse:** These nurses have wound care knowledge beyond a general nurse, needed if wounds are complex or not healing.

**Dietitian:** can help to choose the proper foods to eat to help you to improve your health.

**Other possible team members** are Social Workers, Pharmacist, Diabetic Educator, Occupational Therapist etc.

*Surgical Options*

If the pilonidal sinus does not close, you may need to see a surgeon. Sometimes a plastic surgeon is needed.

The surgeon will discuss one of the following treatments with you:

**Wide excision and healing by secondary intention**

The sinus and all of the inflamed tissue and skin around the sinus is removed.

The wound heals from the bottom up.

This can take several weeks, and will need to have dressings and care to keep it free of hair, clean and healing.

**Excision and primary closure**

This is done by cutting out the sinus and all of the inflamed tissue and skin around the sinus, and stitching the two sides together.

If successful, the wound heals quite quickly. Sometimes the incision will open and the wound will need to be treated the same as for wide excision (above).

*Taking the Pressure Off 2009 Masspro, the Medicare Quality Improvement Organization for Massachusetts*

Medications

- Pain that is poorly controlled can cause delayed healing because you will have:
  - Poor appetite
  - Inactivity
  - Restless sleep
- Take your pain medication as ordered and if possible, 1 hour before dressing changes
- Take prescribed antibiotics until they are finished

Bowel Movements

Eat plenty of fiber or roughage (fresh fruit, whole grains, beans, vegetables) to keep your bowel movements regular.
Try to avoid foods that cause loose bowel movements – they make it hard to keep that area clean.
Drink more water than usual.

Talk to your doctor/nurse practitioner if you are constipated.

Clothing While Healing

Wear cotton boxer shorts, not nylon or synthetics - avoid thong-type panties.
Keep your belt off the area.
Avoid tight pants or jeans.

What is a pilonidal sinus?

Pilonidal means a 'nest of hairs'.
A pilonidal sinus is a tunnel usually containing hairs.
There can be infection between the buttocks (the natal cleft).
The skin opens at near the anus, or there can be more than one opening.
The causes are not certain, but the cause is likely from irritated hair follicles in the cleft result in infection.
The friction that occurs with walking and physical activity seems to be part of the problem.
It tends to occur in young adults, up to the age of 40 years of age, more common in males than females.
Signs of the abscess are pain, swelling and pus in the natal cleft or lower back.

What is the treatment?

Initial treatment is often in the emergency room, where the abscess will be opened and drained.
The wound will be packed and covered.
The packing will need regular changes until the wound has healed.
Antibiotics are usually ordered- you need to take them all.
Keep the area shaved, very clean and dry well after washing.
Removal of Hair around the Wound
Hair causes two problems that increase the risk of infection.

  i. Hair holds bacteria and material such as bowel movement or fuzz from clothing.
  ii. Hair irritates the wound when it grows over the edge.

The nurse will shave around your wound once or twice weekly. Razors for bikini shaves work well because they are narrow---try to buy these for the nurses.

Positioning for Dressing Changes
Lie on your stomach, with one or two pillows under your hips.
This helps to open the buttocks so that the nurse can see, clean and dress your wound better than if you lay on your side.

Hygiene to prevent new pilonidal sinus wounds
• Shower or bath at least daily
• Shower or bath more often if activities or summer weather cause you to perspire
• Use mild liquid soap
• Keep the area free of hair to prevent recurrence—shave or consider laser hair removal
• Carefully dry the area by patting, not rubbing with the towel
• Avoid harsh friction to the area

Sources of zinc are: meat, fish, seafood (especially oysters), poultry, liver, eggs, milk, legumes, whole wheat products, and wheat germ.

Sources of iron are: meat, poultry, fish, liver, organ meats, eggs, legumes, nuts, dried fruit, fortified breads, cereals, and pastas. Iron from animal sources is better absorbed than that provided by plant foods. Iron absorption is improved if taken with foods containing vitamin C.

Healing requires extra calories, and a diet high in protein is needed to build new tissue. Increase your protein intake: meat, eggs, fish and dairy products, nuts, whole grains combined with beans, soya tofu.

*With thanks to CarePartners/ET NOW for use of this information


Silver Nitrate in the Wound
Sometimes unhealthy tissue in the pilonidal sinus wound needs treatment with silver nitrate by the nurse/doctor/nurse practitioner.
It comes on a stick that looks a little like a match.
There may be some burning pain for a short time after it is used.
The drainage from the wound increases after it is used, and may be a gray colour - this is normal.
Nutritional Information for Wound Healing*

NOTE- If you have diabetes you may not be able to follow all of these suggestions. You may also be on a restricted diet due to other health conditions, or have food allergies.

Don’t skip meals. If you are not hungry, eat small amounts more often.

Many vitamins and minerals are important in the healing process, including vitamins A & C, zinc and iron. If your appetite is poor, ask your pharmacist about taking a multivitamin and mineral supplement.

If you are taking vitamin E please stop taking it while the wound is healing (it delays healing).

The following foods are important for healing:
Sources of vitamin C are: citrus fruits and juices, strawberries, tomatoes, sweet peppers (especially red), potatoes, broccoli, cauliflower, brussels sprouts and cantaloupe.

Sources of vitamin A are: liver, milk/dairy products, egg yolk, and fish oils.

Pilonidal Wound Infections *If you have any of these symptoms contact your doctor, nurse or nurse practitioner right away!

Closed incision: Surgical Site infections (SSI) happen when harmful germs enter the incision within 4 weeks of surgery.

Signs and Symptoms of Surgical Site Infection:
• Purulent drainage (pus)/unusual odour
• Increased pain or tenderness around the incision or wound
• Increased swelling, firmness, redness or heat surrounding the incision/wound
• Fever greater than 38°C (100°F)
• Your incision opens up and has drainage

Open wound: wound infections happen when germs enter the tissue in the wound at any time while it is open. They delay healing and the wound can extend.

Signs and Symptoms of Infection:
• The wound is not getting smaller
• Increased pain or tenderness
• Increased drainage with redness and warmth of the skin around the wound
• The wound tissue is bright red, and bleeds easily
• The wound tissue is a dark, dull red or grey/green, raw, red or salmon colour with a jelly-like texture
• Foul smell is getting worse
• Strands of red tissue are crossing the base of the wound or new skin is forming over tissue that is not
Learning Self Care
Your nurse will teach you or a family member how to change your dressing if it is appropriate.

Ask your surgeon about how much you may exercise following surgery.
People are often afraid of “making the wound worse” with physical exercises like:
• bending to tie your shoelaces
• lifting heavy things
• sitting for a long time
• gardening or shoveling snow
• cycling, hiking, or playing sports
Walking, bicycling & running all cause increased friction and moisture between the buttocks, causing problems.
If sports and exercise are an important part of your life, introduce sports activities and exercise gradually.
Watch for fresh bleeding, and stop if this happens.

Hygiene During Healing
• Keep the area clean, dry and covered with a dressing to heal and protect
• Never leave the wound open to the air
• Dressings soiled with bowel movement or drainage increase the risk of infection-- it needs to be removed!!
• Remove soiled dressing before showering or sitz bath
• Shower after each bowel movement (if possible) and at least daily (don’t sit in a tub)
• Use a hand held shower sprayer to gently flush out the inside of the wound
• Don’t let soap, shampoo and loose hair into open wound
• After showering, clean the wound as instructed, pat the area dry, never rub with force, and apply a new clean dressing
• Apply a clean dressing as demonstrated by the nurse-folded into the natal cleft
• Carry moist baby cleanser wipes to use after a bowel movement if you are away from home

If your doctor has recommended a Sitz bath for comfort:
• Use it after your bowel movement, and remove your dressing. Use fresh water every time.
• Use a Sitz Bath basin kit & soak for no more than 5 minutes.
• You can buy one at most pharmacies.
• The wound still needs to be cleaned after the sitz bath