

# Pilonidal Cyst

## What is a pilonidal cyst?

A pilonidal cyst is an abnormal saclike structure in the skin. It usually happens in the crease between the buttocks, near the tailbone. It often contains hair and small pieces of skin. It can get infected and cause an abscess, which is a pocket of infected fluid (pus) with a thick wall around it.

## How does it occur?

These cysts seem to be caused most often by an ingrown hair. A hair grows back under the skin or skin grows closed over a hair. This might happen, for example, because of pressure or friction, like when you have been sitting or riding a bicycle for a long time. The ingrown hair irritates the skin and causes a cyst to form around the hair.

You may be more likely to have a pilonidal cyst if you were born with a little dimple in the skin between the buttocks. For reasons that are not well understood, the dimple can tend to get infected.

## What are the symptoms?

Common symptoms are:

- pain when you are sitting (sometimes it can be very painful)
- redness and swelling in the area of your tailbone and just above the crease between your buttocks
- in the crease between your buttocks and tailbone
- pus oozing from the swollen area
- tenderness when the swollen area is touched
- sometimes fever, weakness, or nausea.

The size of the pilonidal cyst may range from a small tender dimple to a large painful area.

## How is it diagnosed?

Your healthcare provider will ask about your symptoms and examine you.

## How is it treated?

If the cyst is infected, usually it needs to be drained by your healthcare provider. This treats the infection and gets rid of the pressure that causes pain. It can be done in your provider's office. Even if the cyst is not infected, opening it and draining it is recommended to relieve pain and prevent infection.

The process for draining a pilonidal abscess is:

- The area of infection is numbed with a local anesthetic.
- Your provider uses a sharp knife to make a small cut into the abscess so that the pus in the abscess can drain out of it and hair and other debris can be removed.

- Your provider fills the abscess with sterile gauze.

A problem called a chronic pilonidal sinus can happen after an abscess has been drained. A pilonidal sinus is a space under the skin that forms where the abscess used to be. The problem with the sinus is that it can lead to repeated infections. The sinus connects to the skin with one or more small openings. In some cases the sinus may heal and close by itself, but usually the sinus has to be cut out. The sinus area may be stitched shut after the sinus is removed or it may be left open to drain and heal from the inside out. Your provider will discuss your choices for treatment.

## **How long will the effects last?**

The wound will need 1 to 2 months to heal. In some cases it may take up to 6 months to heal.

A problem called complex or recurrent pilonidal disease is a complication of a pilonidal cyst. It may happen if:

- The area of the first abscess keeps getting infected again.
- You have hair growing in the area of the scar.
- The area gets sweaty and rubbed a lot.
- You have a sinus that was not seen in earlier treatments.

In this case your healthcare provider must cut away the old wound, scar, and other inflamed tissue. This is a more extensive surgery than simple drainage of an abscess or removal of a sinus.

## **How can I help take care of myself?**

Before you see your healthcare provider for treatment, it can help to:

- Soak in a tub of warm water to lessen pain. Sometimes the cyst may open on its own.
- Keep the area clean and dry.
- Take nonprescription pain medicine to relieve pain.

After incision and drainage of the cyst:

- Make sure that you follow all of your healthcare provider's instructions.
- Keep the area clean.
- Shave the area or use a hair removal cream every 2 to 3 weeks.
- Check the area for signs of infection, such as redness, pus, or pain.
- Keep all follow-up appointments with your provider for dressing changes and checks of the wound.

## **How can I help prevent a pilonidal cyst?**

- Keep the area dry and clean.
- Keep hair out of the area between the buttocks and tailbone by shaving or using a hair removal cream.

## **What is a pilonidal cystectomy?**

A pilonidal cystectomy is a procedure in which your healthcare provider opens or removes a cyst near your tailbone.

## **When is it used?**

A pilonidal cystectomy may be done to open and drain an infected pilonidal cyst. A pilonidal cyst is an abnormal saclike structure in the skin. It usually happens in the crease between the buttocks, near the tailbone. It often contains hair and small pieces of skin. It can get infected and cause an abscess, which is a pocket of infected fluid (pus) with a thick wall around it. The cyst may become painful, leak pus, and smell bad.

This procedure may also be done even if the cyst isn't infected. The procedure can relieve pain caused by the cyst and keep it from getting infected.

## **How do I prepare for a pilonidal cystectomy?**

Plan for your care and recovery after the operation, especially if you are to have general anesthesia. Arrange for someone to drive you home after the procedure. Allow for time to rest and try to find other people to help you with your day-to-day duties.

Follow your provider's instructions about not smoking before and after the procedure. Smokers heal more slowly after surgery. They are also more likely to have breathing problems during surgery. For these reasons, if you are a smoker, you should quit at least 2 weeks before the procedure. It is best to quit 6 to 8 weeks before surgery.

If you need a minor pain reliever in the week before surgery, choose acetaminophen rather than aspirin, ibuprofen, or naproxen. This helps avoid extra bleeding during surgery. If you are taking daily aspirin for a medical condition, ask your provider if you need to stop taking it before your surgery.

Follow any other instructions your provider gives you. If you are to have general anesthesia, eat a light meal, such as soup or salad, the night before the procedure. Do not eat or drink anything after midnight and the morning before the procedure. Do not even drink coffee, tea, or water.

## **What happens during the procedure?**

You will be given a local or general anesthetic. A local anesthetic is a drug that should keep you from feeling pain during the operation. A general anesthetic will relax your muscles and put you to sleep. It will prevent you from feeling pain during the operation.

If the cyst is infected, your healthcare provider may just make a cut in the skin, remove the hair, and drain any pus that has formed. Your provider may try to remove the whole cyst or may just leave the cyst open to allow it to drain completely. If there is no infection, the provider may remove the whole cyst and close the cut in the skin with sutures (stitches).

## **What happens after the procedure?**

You may go home that day or stay in the hospital for 1 to 2 days, depending on the procedure and your condition. Keep the area as clean as possible. It may take as long as 6 months or more for the area to fill in completely with scar tissue if it was left open. If it was closed with stitches, they may stay in as long as 2 to 3 weeks.

Make sure that you follow all of your healthcare provider's instructions. To help prevent or postpone getting another cyst:

- Keep the area clean.
- Shave the area or use a hair removal cream every 2 to 3 weeks.

Check the area for signs of infection, such as redness, pus, or pain. Ask your provider what other steps you should take. Keep all follow-up appointments for dressing changes and checks of the wound.

## **What are the benefits of this procedure?**

You no longer have a painful, draining cyst.

## **What are the risks associated with this procedure?**

- There are some risks when you have general anesthesia. Discuss these risks with your healthcare provider.
- A local anesthetic may not numb the area quite enough and you may feel some minor discomfort. Also, in rare cases, you may have an allergic reaction to the drug used in this type of anesthesia.
- You may develop another cyst.
- The cyst could get infected again if it was not removed.
- You may need another operation to try to control the problem.
- You may have infection or bleeding.

You should ask your healthcare provider how these risks apply to you.

## **When should I call my healthcare provider?**

Call your provider right away if:

- You develop a fever over 100°F (37.8°C).
- You have uncontrollable pain.
- You notice extensive drainage from the operation site.

Call during office hours if:

- You have questions about the procedure or its result.
- You want to make another appointment.

For more information contact the American Society of Colon and Rectal Surgeons at 847-290-9184 or visit their Web site at <http://www.fascrs.org>.

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