

The Effect of Anesthetic Techniques in Pilonidal Sinus Surgery

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Objectives: To compare local anesthesia plus sedation with spinal anesthesia for ano-rectal (pilonidal sinus) surgery, with respect to recovery time, postoperative complications and patient satisfaction.

Setting: Prince Rashid Military Hospital.

Methods: Total of 64 patients were randomized in two groups; group LA (n=32) received local anesthesia of 20 ml 0.5% bupivacaine infiltrated around pilonidal sinus plus 1.5-3 mg intravenous midazolam and group SA (n=32) received 1.5 mg of 0.5% bupivacaine into subarachnoid space as spinal anesthesia. Peri-operative side effects, visual analogue pain scale score for three days, patient satisfaction and hospital stay were recorded and assessed.

Results: patients in spinal anesthesia group spent more time in operating theatre and recovery room. Two thirds of the patients with local anesthesia group (65.6%) left the hospital on the day of surgery, compared to only (34.4%) in spinal anesthesia group. Ninety and point 6 percent were satisfied in LA group compared to 75% in SA group. Post-operative complications occurred in five patients of spinal anesthesia group (3 urinary retention and 2 spinal headache).

Conclusion: Sacrococcygeal local anesthesia for pilonidal sinus resulted in lower complications, shorter hospital stay and more post-operative patient's satisfaction.