

A randomised trial of fibrin glue vs surgery for pilonidal sinus disease: Results and long term follow up.

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Abstract:

Introduction: There is no consensus on the optimal treatment for pilonidal sinus disease. Fibrin glue treatment (FGT) is a minimally-invasive technique which we compared to conventional surgery.

Methods: Forty consecutive patients with pilonidal disease were randomized to either FGT or Bascom's procedure. End points included infection rates, QoL scores, analgesic requirements, convalescence time and long-term recurrence. Results: Pain scores and analgesic use were significantly reduced on day 1 and day 7 in the FGT group compared to the Bascom's group ($P < 0.05$ for both). Normal mobility was achieved more rapidly by FGT patients, who returned to work on average 7 days post-operatively compared to 42 days in the Bascom's group. QoL scores were superior with FGT (39.9 vs 31.9, $P < 0.05$) at day 7 and through week 6. There was no significant difference in wound infections. At a median of 4.63 years, there were 2 (10%) recurrences in the Bascom's group and 3 (15%) with the FGT. An estimated cost reduction of 2205 per patient was achieved in the fibrin glue group. Conclusion: Fibrin glue should be considered as an alternative to conventional surgical techniques in suitable cases of pilonidal disease, having benefits in terms of patient-centred outcomes and overall cost.