A randomised trial of fibrin glue versus surgery for pilonidal disease:

Results and long term follow up.

Authors: Boereboom C., Watson N.F.S., Liptrot S.A., Lund J.N., Tierney G.M.

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Abstract:

Aim: No consensus exists on the optimal treatment for pilonidal sinus disease (PSD). Treatment with

fibrin glue represents a novel minimally-invasive option. Method: Forty consecutive patients with

PSD were randomized to either fibrin glue treatment (FGT) or Bascom's procedure. End points

included infection rates, QoL scores, analgesic requirements, convalescence and long-term

recurrence. Results: Pain and analgesic use were significantly reduced on days 1 and 7 in the FGT

group (both P < 0.05). Normal mobility was achieved in 19/20 of FGT patients by day 7 vs 5/19 of

those randomised to surgery, remaining statistically significant at week 6. The FGT group returned

to work on average 7.2 days post-operatively compared to 42 days in the Bascom's group. Higher

QoL scores in the FGT group at day 7 were sustained through week 6 (P < 0.05). There was no

significant difference in wound infections or recurrence at a median of 4.6 years. Significant direct

cost reductions were achieved in the fibrin glue group. Conclusion: Fibrin glue is an effective

treatment for PSD, with improved patient centred outcomes and long-term recurrence no different

from surgery in this small group. Fibrin glue should be considered as an alternative to conventional

surgical techniques in suitable cases.