Minimally Invasive Surgery In Pilonidal Disease: Evaluation Of The Gips Procedure In Adolescent Cases

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Introduction

- Pilonidal disease is a prevalent chronic inflammatory condition in adolescents, often leading to school absenteeism and reduced quality of life.
- Traditional surgical methods are associated with prolonged healing, postoperative pain, and high recurrence rates.
- Minimally invasive techniques, such as the Gips procedure, have emerged as promising alternatives.
- This study aimed to assess the clinical outcomes of adolescent patients with pilonidal disease treated with the Gips technique

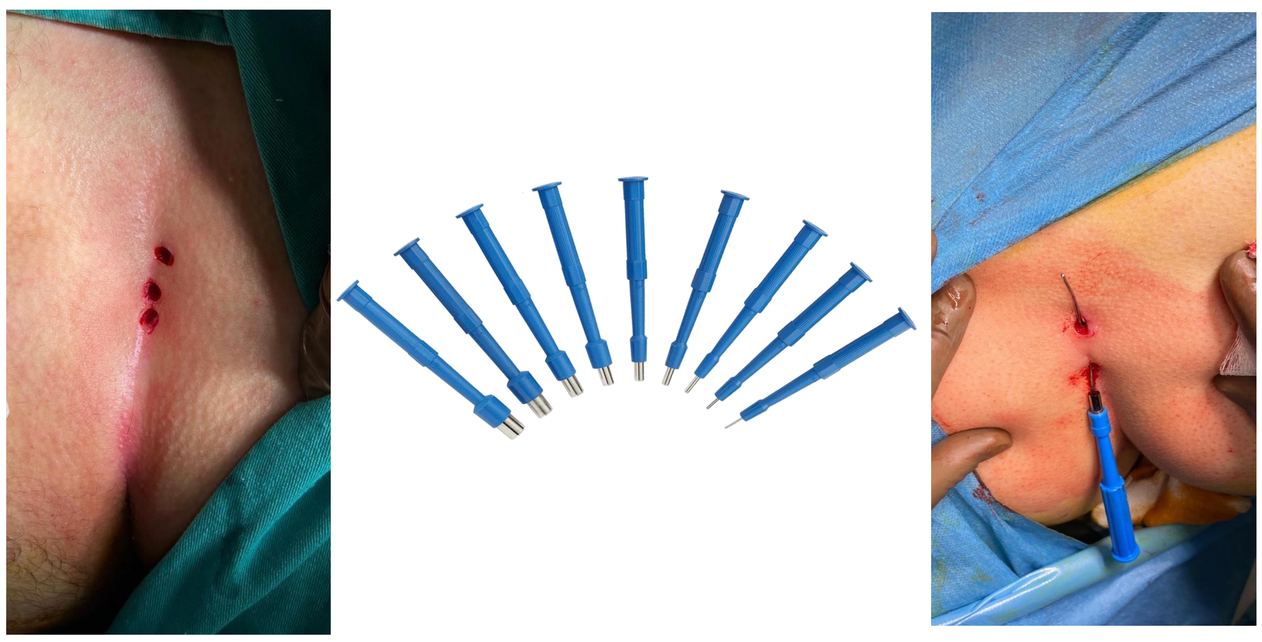

Figure 1: Intraoperative views and multiple infected tracts between sinus orifices are connected using a stylet (probe) for complete excision

Methods

- Retrospective analysis of **16 adolescent patients** treated with the Gips procedure in our department.
- Performed under local anesthesia/sedation; sinus tracts and pits were excised using **cylindrical punch biopsy instruments**.
- Daily wound care: **Povidone-iodine** for infection prevention and **boric acid** to promote epithelization.

Results

- 10 male (62.5%) and 6 female (37.5%)
- Mean age: 15.5 years (range: 13–18 years)
- Mean number of excised sinus orifices per patient: 1.81
- All patients achieved early mobilization within 24 hours postoperatively .Hospital discharge occurred on the same day or following morning
- Mean time to resumption of academic and daily activities: 2.3 days

RECURRENCE

- Recurrence rate was 12.5% (n=2)
- Recurrences were late, emerging after the 6th postoperative month.
- Recurrence was associated with the presence of multiple sinus orifices and systemic comorbidities.
- Reoperation (second Gips procedure) was planned for both cases.

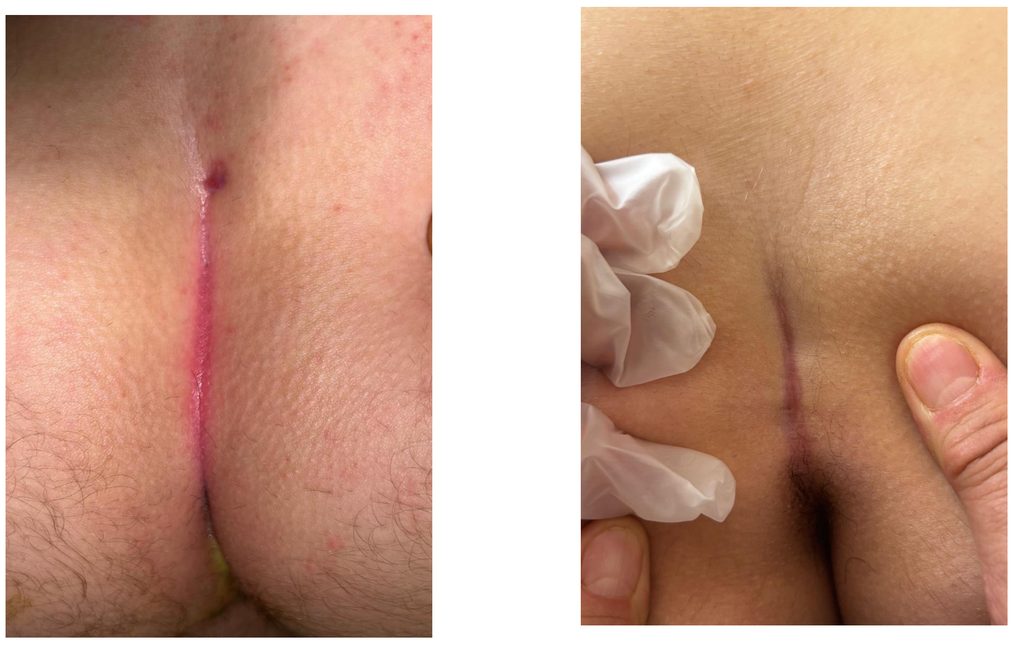

Figure 2: Patient view after the completion of postoperative treatment.

Conclusion

- The Gips technique is a safe and effective minimally invasive option for pilonidal disease in the pediatric and adolescent population.
- It allows for fast recovery, low complication rates, and acceptable recurrence rates, making it well-suited for outpatient settings.
- Fewer sinus tracts and the absence of comorbidities are associated with better outcomes.
- Patients should be monitored for late recurrences, and reoperation may be needed in some cases.