

CASE REPORT

Pilonidal Sinus of Prepuce—An Unusual Presentation

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Abstract

Occurrence of pilonidal sinuses under the prepuce of penis is being reported in a patient aged 62 years

Key Words

Pilonidal sinuses, Balanoposthitis, Prepuce

Introduction

Report of a case of hair containing sinuses in the region of sacrococcygeal region appeared as early as 1833 (1). The term pilonidal was first coined in 1980 by Hedges (1). The overall incidence of this disease is 26 cases per 1,00,000 inhabitants (1) with males being affected more commonly (3 : 1) than females (1). The average age of presentation is 21 years with overweight being a predisposing factor. Commonest site involved is the sacrococcygeal junction. Even a case of perianal pilonidal abscess in a hair dresser has been reported (2). We hereby report the presence of pilonidal sinuses at another unusual site, the prepuce. The authors have not found any mention of such a site for pilonidal sinus which has not been reported so far in English literature.

Case Report

A. L., a 62 years old uncircumcised Hindu male was admitted for a groin hernia operation when, in course of examination, tufts of hair were seen protruding through two orifices on either side of frenulum of the prepuce (Fig. 1,2). Patient had diabetes mellitus under control

with oral hypoglycemics. The patient was unconcerned about the presence of these tufts of hair and gave history of repeated attacks of balanoposthitis which culminated in adhesion of the prepuce to the glans penis. There was also history of recurrent inflammatory changes in these sinuses followed by discharge of pus and hair. The patient didn't however consent for operation on these sinuses at the time of his groin hernia surgery.

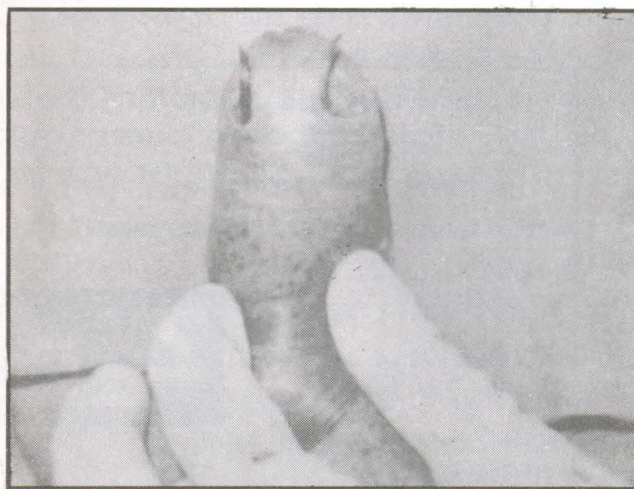


Fig. 1. Showing pilonidal sinus of prepuce

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Discussion

Pilonidal sinus is a disorder involving male especially having a family predisposition, obesity, sedentary life style or an occupation demanding prolonged sitting (3). Although commonest site for it is the sacrococcygeal junction yet it has been reported at other sites too like umbilicus, axilla, clitoris, the interdigital webs of barber's hand, inter-digital webs of feet of workers in hair mattress factory (1) and the periareolar region in hair dresser (2).

Diagnosis is based on the clinical features and examination of the patient. Eighty percent of the patients present with moist drainage and occasional bleeding. The lesion is usually asymptomatic till the affected follicle becomes infected and ruptures into the surrounding tissue. In general, there is minimal cellulitis and induration surrounding the pilonidal abscess. Also the systemic reaction to this abscess is minimal. Differential diagnosis has to be made from a carbuncle or furuncle, hidrandenitis suppurativa etc. Treatment of choice in these cases with abscess is the simple incision of the abscess, de-roofing and allowing the adequate drainage

with appropriate analgesics, antibiotics along with shaving off the adjoining area followed by a regular checkup every two weeks for twelve weeks. Definitive therapy is undertaken in patient after 10 weeks especially in those with pits and lateral tracts. The definitive therapy includes evacuation of the hair and curating the granulation tissue with wide exposure of the abscess cavity. In case of patient with chronic disease, the definitive therapy involves the removal of the cyst wall impregnated with hair.

In our case, the presence of the disease under the prepuce was rather peculiar since the site involved lies at the free end of an unsupported dangling organ—the penis. The patient was not taken up for the definitive therapy as he did not give consent for the same.

References

1. Sebastain MW. Pilonidal syst and sinsues. In Townsend CM Jr., Beavchamp RD, Evers BN (eds). Sabiston Text Book of Surgery, Harcourt Asia PTE Ltd., Singapore. 1997; 1 : 1330-32.
2. Gannon M *et. al.* Periareolar pilonidal disease in a hair dresser. *Br Med J* 1988 ; 297 : 1641.
3. Bvie LA. Jeep disease. *South Med J* 1944 ; 37 : 103.

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