

## International Surgical Week

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# **KEYSTONE FLAP FOR** PILONIDAL SINUS DISEASE



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#### Introduction

- Simple excision
  - With primary closure
  - Marsupialization
  - Delayed closure
  - VAC
- Reconstructive procedures such as flaps
- Other Procedures
  - EPSiT
  - Medicated Seton (Ksharasutra)

#### Key stone flap (KF) Relatively a newer flap

- Described by Behan in 2003
- Especially useful in cases where there are multiple pits in the mid line and just paramedian area.
- ❖ A curvilinear trapezoidal shaped flap, representing the architectural shape of the keystone in Roman arches, relying on randomly fasciocutaneous or musculocutaneous perforators.
- It represents two opposing V-Y flaps joined together, with a flap width at a 1:1 ratio to an elliptical defect. Its length is determined by the size of the wound.

#### **Reconstructive Surgery**

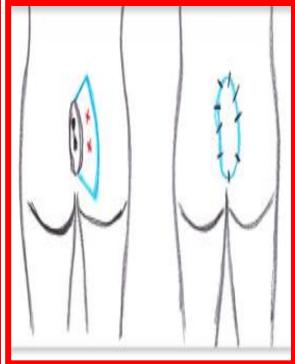
- Karydakis flap
- Rhomboid or Limberg
- •Bascom (Cleft lift)
- Z plasty
- Multiple Z plasty
- Gluteus maximus flap
- Key Stone Flap

#### **Operative Procedure**

- Patient under spinal anesthesia in Jack knife position.
- ❖ An elliptical incision, including all the pits and sinuses is made and excised up to sacral fascia.
- ❖ A flap paddle is raised from the side with a width of roughly equal width with corners at right angle, elevated and advanced to cover the defect. The donor site is closed primarily in two layers.
- ❖ A drain is placed. Skin is sutured with interrupted Prolene 2/0 or subcuticular sutures are placed.
- The flap obliterates the natal cleft

















#### **Material and Methods**

- Total number of patients: 15
- **❖** M:F: 12:3
- ❖ Age: 18-36 yrs (mean
  - 20 yrs)
- ❖ Duration of disease: 2-3 yrs
- Previous operation: 4 had incision & drainage
- Number of pits and sinuses: 3-4 pits
- Location of pits and sinus: majority in midline and paramedian area

#### **Results**

- Operating time: Approx 45 mins
- Blood Loss: Minimal
- Drain placement for 2-3 days
- Hospital stay: 2-5 days (average 3 days)
- Suture removal: 10-14 days
- Flap Necrosis: None
- Recurrence: None at maximum follow up of one year

#### Ref

- Behan FC. The Keystone Design Perforators Island Flap. ANZ J Surg 2003, 73:112-120
- Caliser etal, Updates Surg 2021, 73: 2341-6
- Roatis et al. Inter J Clin Med. 2020, 11

### **Conclusion**

- Apart from many other reconstructive procedures, Key Stone flap is another alternative available for pilonidal sinus, especially if the pits and sinuses are in mid line and paramedian area.
- Flap viability is good and it takes shorter time for operation as flap designing is relatively easy.