

FISSURE-IN-ANO

Anal fissure is a common disorder which affects any age group.

WHAT IS AN ANAL FISSURE (Fissure-in-ano)?

An anal fissure is a benign superficial ulcer in the anal canal. It is usually about 1 cm long, and at its lower end there may be a tag of oedematous skin. This tag is called a 'sentinel pile' – sentinel because it guards the fissure.

Primary fissures may be acute (sudden onset) or chronic (persistent symptoms of more than a few weeks).

CAUSE OF ANAL FISSURE

The most common cause of anal fissure is constipation. It may also be caused by ulceration of thrombosed haemorrhoids.

SYMPTOMS OF ANAL FISSURE

The most obvious symptom is intense anal pain made worse when passing a bowel motion. This intense pain is caused by the internal anal sphincter muscle going into spasm. Small amounts of blood can often be seen on the toilet paper or in the bowel motion.

TREATMENT OF ANAL FISSURE

Acute fissures may heal spontaneously, or after a topical application of a steroid ointment, local anaesthetic ointment or a vasodilator paste. If symptoms persist despite medical therapy, surgical treatment is advisable. Surgical treatment consists of dividing the internal anal sphincter muscle to prevent spasm occurring, this operation is called a Lateral Internal Anal Sphincterotomy.

POST-OPERATIVE CARES FOLLOWING LATERAL INTERNAL SPHINCTEROTOMY

Bowel function:

The first bowel motion is often uncomfortable and often associated with minor bleeding. Constipation can be particularly unpleasant and painful, so it is important to keep bowel motions soft and regular. Drink at least 6-8 glasses of water a day. A high fibre diet is recommended – including plenty of fresh fruit and vegetables. It may be necessary to use Metamucil or mucilax for the first few days after surgery to encourage bowel activity.

Hygiene:

You can shower or bath normally within 24 hours of your operation. It is important to keep the area clean and dry between bathing. Avoid using dry toilet paper – instead use a warm wet flannel, moist soft tissue or even 'baby wipes'. Saline baths (½ cup salt per bath) several times daily, especially after bowel movements, is good for hygiene, and is very soothing. If it is not possible to bath, have a suitable basin available to sit in (use 1 teaspoon of salt per basin of water).

Pain:

Some discomfort and a little bloody discharge can be expected especially after bowel movements, but this will diminish as healing progresses. You will be advised about the type of pain medication to use. Use pain relief regularly rather than waiting until pain builds up. If you have what you consider to be excessive pain, despite taking pain relief contact your surgeon (or nurse) to discuss.

Phone for advice if the following occurs:

- Excessive bleeding. Initially apply firm pressure to the area for 15 – 20 minutes.
- Excessive swelling to the anal region. A small amount of swelling is normal.
- Red, inflamed or excessive discharge from the anal region.
- A fever or temperature over 37.5deg C.
- If you feel you are becoming constipated.

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