

If you have any queries do not hesitate to ring the Day Case Unit on:

0191 5699053 between 8am – 7:30pm Monday to Friday.

### Useful websites

[www.nhs.uk](http://www.nhs.uk)  
[www.sunderland.nhs.uk/chs](http://www.sunderland.nhs.uk/chs)

This information was correct at the time of printing. While the Trust makes every reasonable effort to keep its information leaflets up to date, very recent changes may not yet be reflected in the guidance and you should discuss this with the clinical staff at the time of your appointment.

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## ANAL DISORDERS REQUIRING SURGERY

### PATIENT INFORMATION LEAFLET

Day Case Unit

Sunderland Royal Hospital

## **Anal Fissure**

An anal fissure is a tear in the mucosa (skin) of the anal canal, usually caused by passing a large constipated stool. The fissure (tear) causes acute pain when opening your bowels and the sphincter (opening) may go into spasm (cramp). This can last for up to an hour and often some fresh bleeding occurs.

First line treatment is usually with a cream called GTN or Diltiazem which causes the muscles around the back passage to relax and allow the fissure to heal in about 60% after 6 weeks treatment.

If this fails then injection of Botulinum Toxin (Botox) or a lateral sphincterotomy may be advised. (See below) These require a general anaesthetic.

### **Injection of Botulinum Toxin (BOTOX)**

Botulinum toxin is a chemical produced by a bacterium. It is widely used in cosmetic surgery to remove facial wrinkles (Botox injections). It has in recent years been used to cause a relaxation of the muscles around the back passage to cure fissures and is successful in more than 70% of patients

### **Lateral sphincterotomy**

This procedure is performed under a general anaesthetic. A small incision is made into the floor of the tear allowing it to heal without being torn apart when opening your bowels. Following your operation it is possible that the doctor has placed a pack inside the anal sphincter (opening). This is to help prevent any bleeding. This pack will slowly dissolve and will come out itself, usually within 24 hours. Lateral sphincterotomy heals about 95% of fissures

## **Pilonidal Sinus**

Pilonidal sinuses are common in young adults, especially men. They usually occur in the space between the buttocks. The hairs on the buttocks slowly penetrate the skin; this area becomes inflamed and sometimes infected.

An operation under general anaesthetic is performed to remove the affected tissue. If the area is infected at the time of surgery, the district nurse will pack the wound daily. This will allow the wound to slowly heal from the inside. If the area was not infected the wound will be closed at the time of surgery with stitches.

### **After the Operation**

Following your operation you will require some pain relief for 2/3 days. This will be supplied at the time of discharge. You will be advised by your named nurse to take this medication at regular intervals for the maximum effect.

You will be able to bath and shower after 24 hours, please do not use any bubble bath; soap or talcum powder near the wound site. It is important to keep the area as clean as possible therefore it is advisable to bath or shower daily. Also to keep the area thoroughly clean after using the toilet.

After your operation you may notice some anal bleeding or slight discharge. You may need to wear a pad for a couple of days.

As with any operation concerning Anal Disorders it is advisable to eat a healthy high fibre diet and to increase your fluid intake, try to increase your intake of water to 6-8 glasses a day. It may be necessary to take mild laxative