

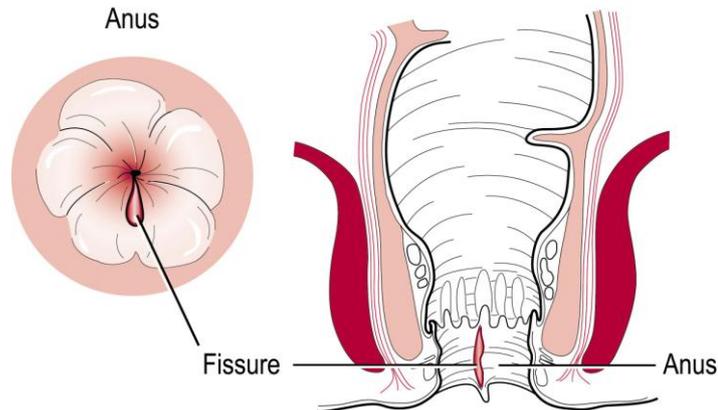
Patient Information Leaflet



Anal Fissure

Anal Fissure

An anal fissure is a crack in the lining of the anal canal (the bottom of the back passage). This can occur at any age, but usually occurs in young adults. Fissures may be caused by constipation and passage of a hard stool, or diarrhoea and passage of frequent stools. However, the majority seem to develop without any particular cause. The symptoms of a fissure are pain, especially when passing a bowel motion, and some bleeding. Occasionally, people experience discharge of an abscess in association with a fissure.



How can a fissure be treated?

At least 50 per cent of fissures heal either by themselves or with non-operative treatment, including application of special medicated cream, use of stool softeners and avoidance of constipation. Some fissures, if they do not respond to these methods, may require an operation.

Conservative treatment

Commonly an ointment 0.2 per cent GTN (glyceryl tri-nitrate) is used. Recently another ointment called Diltiazem has also been found to be effective.

What does surgery involve?

The commonest operation for this condition is lateral anal sphincterotomy. This involves cutting a portion of one of the anal muscles and helps the fissure to heal by preventing pain and spasm, and which improves the blood supply to the skin. Cutting this muscle rarely interferes with the ability to control bowel movements and can often be performed without an overnight hospital stay. Other operations, less frequently performed, include anal stretch or anooplasty.

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