**ANAL FISSURE**

**What Is An Anal Fissure?**

An anal fissure is a small tear or cut in the skin lining the anus which can cause pain and/or bleeding.

*A simple acute fissure, transanal view.*

**What Are The Symptoms Of Anal Fissure?**

The typical symptoms of an anal fissure are extreme pain during defecation and red blood streaking the stool. Patients may try to avoid defecation because of the pain.

**What Causes An Anal Fissure?**

A hard, dry bowel movement can cause a tear in the anal lining, resulting in a fissure. Other causes of a fissure include diarrhea and inflammation of the anorectal area. Anal fissures may be acute (recent onset) or chronic (present for a long time or recurring frequently). An acute fissure is usually due to altered bowel habits while a chronic fissure may be either due to poor bowel habits, overly tight or spastic anal sphincter muscles, scarring or an underlying medical problem.

**How Can A Fissure Be Treated?**

An acute fissure is managed with non-operative treatments and over 90% will heal without surgery. Bowel habits are improved with a high fiber diet, bulking agents (fiber supplements), stool softeners, and plenty of fluids to avoid constipation and promote the passage of soft stools. Warm baths for 10-20 minutes several times a day are soothing and promote relaxation of the anal muscles. Occasionally, special medicated creams may be recommended.

A chronic fissure (lasting greater than 4-6 weeks) may require additional treatment. Depending on the appearance of the fissure, other medical problems such as inflammatory bowel disease or infections may be considered and testing may be recommended.
What Can Be Done If The Fissure Doesn’t Heal?

A fissure that fails to respond to treatment should be re-examined to determine if a definitive reason exists for lack of healing. Such reasons can include scarring or muscle spasm of the internal sphincter muscle. Those, which continue to cause pain and/or bleeding, can be corrected by surgery.

What Does Surgery Involve?

**Lateral Internal Sphincterotomy** is an operation performed on the internal anal sphincter muscle for the treatment of chronic anal fissures. The internal anal sphincter is one of two muscles that comprise the anal sphincter, which controls the passage of feces. The internal anal sphincter is always under tension, also known as resting pressure. If that pressure becomes too high, the patient may experience an anal spasm, and a fissure may form or an existing one may be unable to heal. The procedure helps lower the resting pressure of the internal anal sphincter, which improves blood supply to the fissure and allows for faster healing. It is a minor procedure that is performed on an outpatient basis and uses either local or general anesthesia.

How Long Does The Healing Process Take After Surgery?

The fissures usually heal within 3 weeks. By undergoing this procedure, patients experience long-lasting results and reduced recurrence as compared to treatment with medicine. Recurrence rate after LIS is found in about 5% of all cases.

Complications of Fissure Surgery

Although the lateral internal sphincterotomy is a standard procedure, in the treatment of fissures, rare risks can occur.

- **Minor fecal incontinence** and difficulty controlling flatulence are common side effects following surgery. Persistent minor fecal incontinence has been reported in 1.2% to 3.5% of patients.
- **Hemorrhage** can occur, more often with the open technique, and may require suture ligation.
- **Perianal abscess** occurs in about 1% of closed sphincterotomies, generally in association with anal fistula caused by a breach of the anal mucosa by the scalpel. Incision and drainage of the abscess and fistulotomy are required.
Understanding How BOTOX® Can Treat Your Fissure

**BOTOX® (botulinum toxin)** is a purified neurotoxin that produces a temporary localized muscle paralysis. In cases of anal fissure, the botulinum toxin is injected directly into the internal anal sphincter and, in effect, performs a *chemical sphincterotomy*. This injection of the toxin can be used to paralyze your sphincter muscle, allowing the fissure to heal. BOTOX® is administered in the operative suite with anesthesia, with the entire process taking no longer than 15 minutes on average. Patients will usually be able to go home within an hour or two of having the procedure performed.

BOTOX® is an effective treatment in the short to medium term, with three out of four people remaining symptom-free for 3 to 6 months after treatment, until the nerves regenerate. Further treatment may be required in the long-term, as around half of patients might experience a return of their symptoms within three years. In this instance, if there is a recurrence, the patient may benefit from surgical options such as a lateral internal sphincterotomy.

The Side Effects

Side effects of BOTOX® include potential urinary retention, gas/fecal incontinence, bleeding, infections, heart block, muscle weakness, postural hypotension, and allergic skin reactions. For most people, however, these side effects are rare.

**TREATMENT OF ANAL FISSURE:**

You have been prescribed a special cream for the treatment of your fissure. It is Diltiazem 2% compounded with lidocaine and it is made at a Compounding Pharmacy.

Instructions:

1. When you receive the cream, use it 3 times a day. Apply a small amount of cream (pea-size) just inside the anal verge.
2. Clean the area well prior to applying the next dose of cream.
3. Do sitz baths or warm water soaks 3 – 4 times per day, and after bowel movements.
4. Increase the fiber in your diet to 20g – 25g per day, and drink eight 8oz glasses of water per day.
5. Return to your physician in 4 weeks to check the healing progress of the fissure.
6. If your physician prescribed other medications to eliminate constipation, and keep stools soft (Colace/docusate, 100mg, twice per day), take these medications as prescribed.
7. If you have any questions, please call the office.

Prescription pain medications can only be picked up during office hours and on an “as needed” basis by your physician. The on-call physician cannot “call in” or refill pain medication prescriptions. Please plan accordingly if you are running low on your pain medication and feel you need a refill. Our office hours are Monday thru Friday from 8:00am – 4:00pm.