

Anal Fissure

An anal fissure is a tear or crack in the skin lining in the anal canal. Fissures may occur when straining to pass large, hard stools.

Some fissures may be associated with other conditions such as Crohn's disease.

How are Anal Fissures investigated?

When you are seen in clinic the consultant will take a full history and carry out a clinical examination. Usually this will involve a rigid sigmoidoscopy and sometimes a proctoscopy as well. If the area is too uncomfortable to examine then the consultant may recommend carrying out an examination under anaesthetic.

If you are over the age of 40 and have had any bleeding or change in bowel habit the consultant may recommend endoscopic examination of the bowel either by flexible sigmoidoscopy or colonoscopy to ensure that it is otherwise healthy, alongside treating the fissure.

How are Anal Fissures treated?

1. Most fissures can be treated without the need for surgery. With small, shallow anal fissures patients are advised to keep their stools soft and to avoid straining. This can be helped by taking a high fibre diet with plenty of fluids. The use of stool softeners can help. Warm baths and careful personal hygiene, especially after a bowel movement, can help to relieve pain and irritation.

Some patients benefit from using haemorrhoid preparations either bought over-the-counter or prescribed by the doctor.

2. Fissures that do not respond to the simple measures above can be treated with creams that are specifically designed to relax the anal muscle and improve blood flow to allow healing. The creams used are GTN (rectogesic) or Diltiazem (Anoheal). Both can cause headaches and need to be used for at least 2 months to ensure healing.

3. Some fissures don't respond to specialist creams. Botulinum Toxin (Bot Tox) has been used to bring about relaxation in the muscle. This involves a simple injection. Although now widely used Botulinum Toxin is not specifically licensed for treatment of fissures. Sometimes Botulinum Toxin injection can relax the muscles so much that patients can experience some leakage from the anus. This will recover after a few weeks.

4. For fissures that don't heal with creams or Bot Tox injection, surgery may be required. This takes the form of a small cut made into the lowest part of the anal sphincter muscle. This is known as a sphincterotomy and is carried out under general anaesthetic usually as a day case. This is a very effective procedure but occasionally this operation can result in some loss of control and leakage.

Birmingham Bowel Clinic 2016

What are the next steps?

If you think you have this condition or any of these symptoms, you will need to seek medical advice.

If you have private medical care or wish to pay to see a consultant:

Take this factsheet along to your own GP and request a referral to one of our consultants.

For more information or to make an appointment:

Contact the Birmingham Bowel Clinic on 0845 241 7762 or email enquiries@birminghambowelclinic.co.uk.