GENERAL AND LAPAROSCOPIC SURGEON

# Lateral internal sphincterotomy

## What is an anal fissure?

An anal fissure is a tear in the skin around your back passage. It is a common problem that causes severe pain, especially after a bowel movement. It may also cause bleeding.

The condition is associated with spasm of the internal anal sphincter. This reduces the blood supply to the area and prevents healing. The treatment is aimed at breaking this cycle to allow healing to take place.

## Are there any alternatives to surgery?

- drinking plenty of fluid and increasing the amount of fibre in your diet
- laxatives
- glyceryl trinitrate (GTN) and diltiazem are ointments that can be applied to the skin at your back passage
- botox
- local anaesthetic ointments

# What does the operation involve?

Sphincterotomy simply means dividing the sphincter.

The operation is usually performed under general anaesthetic but various anaesthetic techniques are possible.

The operation usually takes about 15 minutes. Your surgeon will make a small cut on the skin near your back passage. They will cut the lower part of the internal sphincter muscle. This will relieve the spasm in the sphincter, allowing a better blood supply to heal the fissure.

#### How can I prepare myself for the operation?

If you smoke, stopping smoking now may reduce your risk of developing complications and will improve your long-term health.

You will be asked not to eat or drink some hours before admission to the hospital. If you usually take blood-thinning medication, you will be asked to stop taking it some days before the procedure.

You might also be asked to take an enema or laxative to empty out your bowel on the day of surgery.

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# What complications can happen?

#### General complications of any operation

- bleeding
- infection of the surgical site (wound)
- allergic reaction to the equipment, materials or medication
- chest infection

#### Specific complications of this operation

- involuntarily passing wind or loose faeces
- difficulty passing urine
- permanent incontinence from your bowel
- recurrence of the fissure

#### Consequences of this procedure

• pain

#### How soon will I recover and post operative recommendations?

You should be able to go home the same day, but make sure you are collected by someone who can take you home.

The pain from the fissure should improve rapidly. You should be able to return to work after a few days, depending on your type of work. Take regular pain medication as advised.

Avoid constipation and straining when opening bowels, so you should drink plenty of water and eat a healthy diet that is high in fibre, fruit and vegetables. Please take regular aperients/stool softeners from early postoperative period.

**Sitz bath** – sitting in lukewarm water salty water for 15-20 minutes for 2-3 times per day, will help in reducing spasm and keeping the area clean, decreasing the chances of infection.

Mild bleeding is likely for first few days. Monitor the amount of bleeding. If there is continuous / significant, please return to your nearest emergency department.

Most people make a full recovery and can return to normal activities. Improving your diet will help to speed up your recovery and will reduce the risk of the problem coming back.

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