

# Anal Fissure

An information guide



# **Anal Fissure**

## **What is an anal fissure?**

An anal fissure is a small crack or tear of the skin inside the anus, which often takes a very long time to heal. Although the tear may be small, it can be very painful because the anus is very sensitive. It can occur at any age, but is more common in young or middle aged adults.

## **What causes an anal fissure?**

The full cause of fissures is not known, but it is always associated with constipation. When passing a large or hard stool the anus may stretch and tear slightly.

We presume that the hard stool cuts the back passage as it passes through and starts off the process. As the pain of this cut leads to muscle spasm, proper healing is prevented. The fissure may reopen in a six-week cycle or whenever the stool becomes too hard again. A fissure that lasts more than 6 weeks is called a chronic fissure (persistent).

## **Symptoms of anal fissure**

The main symptom of a fissure is severe pain, which occurs during and after opening your bowels. People usually describe it as a sharp, cutting or tearing sensation. The pain may continue as a burning or gnawing pain for three or four hours.

To some people, the pain is so agonising that they become too frightened to open their bowels and become very constipated, making it worse. Bleeding does not always come with pain, although it is common. This may only be slight, rather than streaking on the surface of the motion.

## **Why do some anal fissures not heal and become chronic?**

It is thought that the muscle tone (pressure) around the anus is quite high in people with a chronic anal fissure. This may reduce the blood flow to the torn area, which slows or prevents healing. Treatment aims to relax the muscle around the anus. This allows an improved blood flow and enables the fissure to heal.

## **What are the treatments for chronic anal fissure?**

There are two forms of treatment. These are Medical and Surgery:

### **Medical**

#### **Supportive measures**

About half of all fissures will heal in this time with the 'traditional' treatment of regular warm baths and using an anaesthetic cream.

#### **Glyceryl Trinitrate ointment**

If you apply glyceryl trinitrate (GTN) to the rim of the anus, it relaxes the muscle around the anus (anal sphincter). This allows the fissure to heal better. It may also ease the pain very quickly. Some points to note if you use GTN treatment include the following:

- About 60-70% people with a chronic anal fissure are cured with a 6-8 week course of GTN. Therefore, the chance of a cure by using GTN is better than with the supportive method alone.
- You should rub a pea size amount of the ointment into the skin around the rim of the anus 2-3 times a day. Do not push it inside the anus. If you do, it will be absorbed into the blood stream

and you are more likely to get side effects, such as a headache.

- It is important that you complete the full course of treatment, as it may take 6-8 weeks of treatment for the fissure to heal fully. However symptoms such as pain may ease quickly.
- The ointment may have a "use by" date of 4 weeks and as the treatment lasts for 6-8 weeks you will have to obtain a further supply. You will need to speak to the pharmacist a week before the ointment "use by" date, as it may take a while to prepare a further supply.
- Up to 6 in 10 people have a headache after applying GTN ointment. This is due to the GTN getting into the blood stream. The headache usually lasts about 30 minutes and may be relieved by taking painkillers such as paracetamol. If headaches become troublesome, try using a smaller amount of the GTN ointment for a few days and gradually increase the amount over several days until you are using the normal amount.

**Other products for the medical treatment of fissure e.g. Diltiazem ointment or Botox injections may be used.**

## **Surgery**

If GTN treatment is not successful, surgery may be an option. It is also an option if you have recurrent fissures. Nine out of ten cases are cured if surgery is performed.

The operation involves making a small cut in the muscle around the anus. This procedure is called an internal sphincterotomy. This allows relaxation of the muscle and allows the fissure to heal.

This is a minor operation, which is usually performed under general anaesthetic as a day case. As with all surgery there may be complications.

After this operation 1 in 3 people have poor control of gas (wind) and a small number have soiling of their underclothes or mild bowel incontinence.

## **Preventing constipation**

It is important that you keep your stools soft and avoid getting constipated. This will help the fissure to heal and prevent it from happening again. You can prevent constipation by doing the following:

- Eat more fibre such as fruit, vegetables, cereals, wholemeal bread, brown rice, wholemeal pasta or dried fruit such as raisins, figs and prunes.
- Drink more fluids. Adults should aim to drink at least 2 litres (10-12 cups) of fluid per day. You will pass most of the fluid as urine, but some remains in the gut to soften the stools. You should not have strong tea or coffee as your main drink, as caffeine can sometimes make constipation worse. Try and drink more water or fruit juice.

- Fibre supplements. If a high fibre diet is not helping you can take bran or other bulking agents such as Fybogel.
- Exercise regularly. Keeping the body active helps to keep your bowels active too.
- Toileting. Do not ignore the feeling of needing the toilet, as this may result in the formation of bigger and harder stools which may be difficult to pass later.
- Avoid painkillers that contain codeine, such as co-codamol, as these are a common cause of constipation. Paracetamol is preferred to help ease the discomfort of a fissure.

### **Will it happen again?**

Some people seem prone to recurring anal fissures. Up to 3 in 10 people who are successfully treated with GTN ointment will have one or more recurrence. It is thought that these people have a higher than average pressure (tone) of the muscle around the anus. They are more likely to tear the lining of the anus.

Avoiding constipation is important. However, a further course of GTN ointment is likely to heal any future fissure. If you have frequent recurrences surgery may be an option.

**Notes:**

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