

Patient Information Leaflet



Anal Fissure

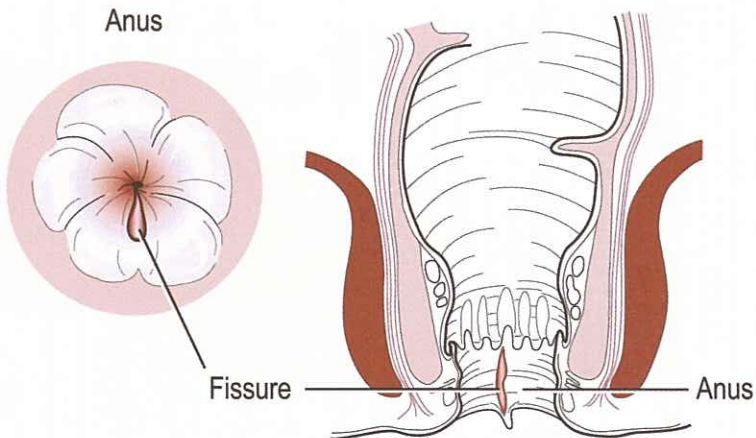
SM0703

The Burdett Institute
of Gastrointestinal Nursing



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 trinitrate) 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 anoplasty.

Contact details:

**St Mark's Hospital, Watford Road, Harrow,
Middlesex HA1 3UJ**

Frederick Salmon Ward South 020 8235 4022

Frederick Salmon Ward North 020 8235 4191

Robert and Lisa Sainsbury Wing 020 8869 3399

Call centre – 020 8235 4061

www.stmarkshospital.org.uk

**With thanks to the Friends of St Mark's
Hospital for funding the production of this
information leaflet**

Author: St Mark's Hospital nursing team
Date: May 2007
Date for review: May 2008