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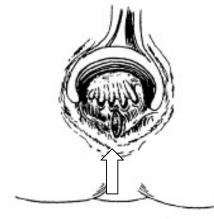
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ANAL FISSURE (Fissure-in-Ano)

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 an anal fissure?

The typical symptoms of an anal fissure are severe pain during defecation and fresh blood associated with the stool. Patients may try to avoid defecation because of the pain. This increases constipation and therefore pain when stool is eventually passed. This becomes a viscous cycle.

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 diarrhoea 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 habit (constipation) while a chronic fissure may be either due to poor bowel habit, overly tight or spastic anal sphincter muscles, scarring or an underlying medical problem such as Crohn's disease or anal cancer.

How can a fissure be treated?

An acute fissure is managed with non-operative treatments and over 66% will heal without surgery. Bowel habit is improved with a high fibre diet, bulking agents (fibre supplements such as Metamucil-2 teaspoons daily), stool softeners, and plenty of fluids to avoid constipation and promote the passage of soft stools. Warm baths (Sitz Baths) for 10-20 minutes several times each day are soothing and promote relaxation of the anal muscles.

Rectogesic (0.2% GTN cream) is prescribed to relax the internal sphincter spasm.

A chronic fissure (lasting greater than one month) may require further investigation and possibly biopsy under anaesthetic.

What can be done if a 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 anal sphincter muscle. Those which continue to cause pain and/or bleeding can be corrected by surgery.

What does surgery involve?

Surgery usual consists of a small operation to cut a portion of the internal anal sphincter muscle. This helps the fissure to heal by decreasing pain and spasm. Cutting this muscle rarely interferes with the ability to control bowel movements and can usually be performed without an overnight hospital stay.

A chronic fissure with a skin tag and the site of the sphincterotomy (arrow)

How long does the healing process take after surgery?

Healing occurs in a few weeks, although pain often disappears after a few days.

Will the problem return?

More than 90% of patients who require surgery for this problem have no further trouble from fissures.

Can fissures lead to colon cancer?

No! Other conditions can cause similar symptoms, so other investigations may be necessary. If a change in bowel habit was the original problem then a colonoscopy may be indicated. Both colon cancer and inflammatory bowel disease need to be excluded.