ANAL FISTULA

WHAT IS AN ANAL FISTULA?
Anal fistula, an uncommon condition, is a communication or tunnel between the anal canal and the outer skin of the anus. It often drains pus or liquid, which can soil or stain clothing and may irritate the outer tissues or cause discomfort.

HOW DOES IT OCCUR?
An anal fistula usually results from an injury to the tissue lining the anal canal or an infection in that area. It may occur as a result of:

• constipation causing injury
• infection in the crypts (crevices) glands lining the anal canal
• Crohn's disease, a chronic inflammation of the intestines
• Abscess of the large intestine (very rare).

WHAT ARE THE SYMPTOMS?
The first sign of an anal fistula may be anal pain and swelling or abscess followed by persistent discharge or drainage. Symptoms of anal fistula may include:

• regular or intermittent discharge of mucous or pus
• recurrent anal pain and swelling

HOW IS IT DIAGNOSED?
Anal fistula is diagnosed by physical examination of the anus and rectum. This may include the following procedures:

• Rectal examination and measurement of your sphincter length (how long your anal canal is).
• anoscopy, a procedure in which the doctor inserts an instrument called an anoscope into the rectum to inspect the anal canal
• sigmoidoscopy, a procedure in which a doctor uses a flexible or rigid scope to inspect the lower part of the intestine for inflammation and/or disease.
• In some instances, examination under anesthesia in an operating room is needed.

HOW IS IT TREATED?
Treatment of an anal fistula always requires surgery. The surgical procedure used to correct an anal fistula is called a fistulotomy or cutting the fistula open. In a fistulotomy the doctor cuts open the infected area which allows the fistula to heal. Stitches usually aren't used. It is an outpatient procedure.

Fistulas are usually treated surgically under regional or spinal anesthesia in the operating room. If the fistula is complex and goes through both anal sphincter muscles, a different, more complex procedure may be necessary.

After a fistulotomy, the doctor will prescribe sitz baths and moist dressings to be done 2 or 3 times a day.

HOW LONG WILL THE EFFECTS LAST?
Typically, an anal fistula will not heal until it is surgically treated.
WHAT ARE THE RISKS OF SURGERY?
The chief risk is loss of anal sphincter muscle function. It may take 1 - 4 weeks for the surgical wound to heal.

HOW CAN I HELP PREVENT AN ANAL FISTULA?
Follow these guidelines to help prevent an anal fistula. They help to keep the lower gastrointestinal tract healthy.

- Eat foods high in fiber and maintain regular bowel habits.
- Drink plenty of water each day (up to six 8-ounce glasses).
- Be aware of the signs and symptoms of bowel disease, and seek medical attention if any appear.