

This information is for patients who are having an operation to repair an anal fissure. It explains what it is, what it involves and any risks that there may be.

A lateral sphincterotomy is an operation to treat an anal fissure (a tear in the lining of the back passage) by releasing the sphincter muscle of the anus a little. It is performed in the day surgery unit under a general anaesthetic.

This is a very successful operation relieving symptoms of pain in 95% of patients.

If your anal (bottom) muscles are already weakened by a previous operation or childbirth where forceps were used, then this operation will not be advised; an alternative operation may be offered in which the anal fissure is removed and the gap sewn up. This has a slightly lower success rate than a lateral sphincterotomy otherwise the recovery time and the home care are the same.

Preparation

You will need to have a medical check-up a few weeks before your operation with a nurse. This may include some or all of the following checks:

- ✓ Your medical history;
 - ✓ Your blood pressure;
 - ✓ A blood test;
 - ✓ Your height and weight;
 - ✓ A chest x-ray; and
 - ✓ A heart tracing (an ECG).
- Please bring with you any medications that you are taking in their containers.
 - If you take **warfarin**, you should stop taking it a few days before your operation; please check with the nurse.
 - Please tell the nurse if you have **diabetes or any allergies**.
 - **Please note** the operation cannot go ahead if you do not attend this check-up.

If you are having a general anaesthetic you must not eat anything for 6 hours before your operation. You may drink water only until 2 - 3 hours before.

On the day of your operation

- Please go to the Day Surgery Unit.
- You will be given a gown to change into.
- Your surgeon will see you and ask you to sign a consent form to confirm that you understand the procedure and agree to go ahead with it.
- Your anaesthetist will see you to discuss your anaesthetic.
- You will be taken to the operating theatre.

The operation

- You will have a general anaesthetic, when you are asleep (see separate leaflet).
- First the surgeon will examine the lining of the back passage to check that there is no other reason for your pain (such as piles). This is often difficult to do without an anaesthetic in clinic because it is painful.
- Then the surgeon will make a small cut at the edge of the anus and release part of the muscle that tightens around the anus to loosen it a little. This is known as a lateral sphincterotomy.

- There are no stitches; a small pack of gauze is used as a dressing over the cut.
- You will be given an injection of local anaesthetic to reduce the pain.
- The operation takes about 10 minutes.

After the operation

- After recovery you will return to the Day Surgery ward to rest for about 2 to 3 hours.
- You can have something to drink and to eat as soon as you feel like it.
- If you have any pain please do not hesitate to ask the nurse for some painkillers. Your recovery will be quicker if you are not in pain.
- You may have a small plug of gauze in the back passage. This will either fall out spontaneously or be passed in the first bowel motion in the toilet.
- You may be given laxatives and painkillers to take home, which you should take as directed.
- You can go home when the nurse has checked that it is safe for you to do so.
- You do not usually need to return for an outpatient appointment.

At home

- **You must make sure that a friend or relative takes you home** and stays with you for 24 hours following your operation.
- You must not drive, drink alcohol, use machinery (including a kettle) or make important decisions for at least 24 hours to allow the effects of the anaesthetic to wear off.
- **Constipation** – it is important to take your laxatives and painkillers as prescribed. Drink plenty of fluids, eat plenty of fresh vegetables and fruit and take plenty of exercise.
- **Bowel actions** - the first few bowel actions may be painful or uncomfortable and may be accompanied by a small amount of bleeding.
- **Bathing** - you should take a bath twice a day, until the slight stinging goes away; a bath to soak the wound is preferable to a shower.
- **Work** - you should recover very quickly and be able to return to work within 2-3 days.
- **Driving** – you can return to driving as soon as you are able to do an emergency stop, usually within 48 hours.

- **Sex** – when you feel comfortable.
- **Pain** – most people find that the pain after the operation is less than the pain they experienced before it. We advise you to take your painkillers as directed.
- **Healing** – the wound usually heals completely in 1 – 2 weeks.

Risks and complications

This is a very successful operation. But most procedures have some risks or complications; for a lateral sphincterotomy these include:

- **Reduced control of the anal (bottom) muscle**, resulting in less control of wind and rarely, staining of underwear.
- **Bleeding** – apply pressure with a clean paper tissue for 2- 3 minutes; if this fails to stop it or the bleeding is heavy then contact your GP.
- **Pain** – if this is not controlled by taking your painkillers regularly as prescribed, then contact your GP.

- **Infection** – if your wound area becomes inflamed and you start to feel feverish you should contact your GP. Please note that taking antibiotics can make you constipated, which should be avoided; see below.
- **Constipation** – it is important not to get constipated which puts additional strain on the bottom muscle. It may help to take a laxative, which you can get from your chemist. Keep drinking fluids, eating fresh fruit and vegetables and exercising.

If you have any worries about the risks and complications you should talk to your surgeon before your operation.

Any further questions?

Please phone the Day Treatment Centre on 020 7288 3824, Monday – Friday, 7.30am - 8pm. Or NHS Direct 0845 46 47

Day Treatment Centre

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