

UOA MS

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Patient Name:

Special Instructions:

Follow Up:

Anal Fistula

An anal fistula is an abnormal tunnel that leads from the *anal canal* (which carries stool from the large intestine) to a hole in the skin near the *anus* (the opening through which stool passes out of your body).

CAUSES

Food you eat goes from your stomach into your intestine. As the food is digested, waste material (*stool*) forms. Stool passes through your large intestine, through the rectum and anal canal, and out of your body through the anus.

The anus has a number of tiny glands (clusters of specialized cells) that make lubricating fluid. Sometimes these glands can become infected. This type of infection may lead to the development of a pocket of pus (*abscess*). An anal fistula often develops after an infection or abscess; It is nearly always caused by a past anorectal abscess.

You are at a higher risk of developing an anal fistula if you have:

- Had an anal abscess.
- Chronic inflammatory bowel disease, such as Crohn's disease or ulcerative colitis.
- Conditions in which there are inflamed outpouchings of the intestinal wall (*diverticulitis*).
- Colon or rectal cancer.
- Sexually transmitted diseases involving the rectum, such as gonorrhea or chlamydia.
- A history of anal radiation treatments, injury, or surgery.
- An HIV infection.
- A problem that has required treatment with steroid medicines for more than a short time.

SYMPTOMS

- Anal pain, particularly around the area of a past abscess.
- Drainage of pus, blood, stool or mucus from an opening in the skin.
- Swelling around the skin opening.
- Worn off skin around the opening.
- A hot or red area near the anus.
- Diarrhea.
- Fever and chills.

- Tiredness (*fatigue*).

DIAGNOSIS

- In some cases, the opening of an anal fistula is easily seen during a physical exam.
- A probe or scope may be used to help locate the opening of the fistula. In some cases, dye can be injected into the fistula opening, and X-rays can be taken to find the exact location and path of the fistula.
- A sample (*biopsy*) of the fistula tissue or anus may be taken to check for cancer.

TREATMENT

- An anal fistula may need surgery to open it up and allow it to heal. This type of operation is called a *fistulotomy*.
- A specialized kind of glue or plug to seal the fistula may be used.
- An antibiotic may be prescribed to treat an existing infection.

HOME CARE INSTRUCTIONS

- Take medications (such as antibiotics) as prescribed by your caregiver.
- Only take over-the-counter or prescription medicine for pain, discomfort, or fever as directed by your caregiver.
- Follow your prescribed diet. You may need a higher fiber diet to help avoid constipation.
- Drink lots of water as directed.
- Use a stool softener or laxative, if recommended.
- A warm sitz bath several times a day may be soothing, as well as help with healing.
- Follow excellent hygiene to keep the anal area as clean as possible. Consider using pre-moistened towelettes to keep the anal area clean after using the bathroom.

SEEK MEDICAL CARE IF:

- You have increased pain not controlled with medications.
- You notice new swelling, redness, or hotness in the anal area.
- You develop any problems passing urine.
- You develop a fever (more than 100.5° F (38.1° C)).

SEEK IMMEDIATE MEDICAL CARE IF:

- You have severe, intolerable pain.
- You have severe problems passing urine or cannot pass any urine at all.
- You develop an unexplained oral temperature above 102.0° F (38.9° C).
- You notice new or worsening leakage of blood, pus, mucus, or stool.

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