



Anal fissure

An anal fissure is a tear in the distal anal canal. It is caused by increased anal pressure resulting in a tight internal anal sphincter. The tear is caused by trauma with bowel movements, which can occur with hard bowel movements and with diarrhea.

Symptoms include severe pain during and especially after a bowel movement and bleeding.

Treatment is aimed at relaxing the internal sphincter muscle thereby decreasing sphincter tone. Warm soaks immediately after bowel movements can help relax the internal sphincter muscle and reduce anal pain. Increasing dietary fiber can help create soft bulky stools, which are easier to pass and result in an empty rectum after defecation. Two liters of water or non-carbonated, non-alcoholic, or non-caffeinated fluid per day will help prevent dry firm bowel movements. Topical analgesia can also help relieve symptoms. Topical ointments, which reduce internal sphincter tone, include nitroglycerin, nifedipine or diltiazem. It is important to place the ointment inside the anus and not just around the anus as the internal sphincter muscle is inside the anus.

Surgical options for anal fissures include Botox injection into the internal anal sphincter muscle and dividing the internal anal sphincter muscle. Surgical division of the internal sphincter muscle is a definitive treatment for anal fissure but it is reserved for anal fissures that fail to respond to more conservative therapy.

It is important to remember it may take six or more weeks for total resolution of symptoms from an anal fissure after treatment so patience is the key.

The above information is not intended to replace instructions from your healthcare provider. If you think you have an anal fissure please call our office for an appointment.