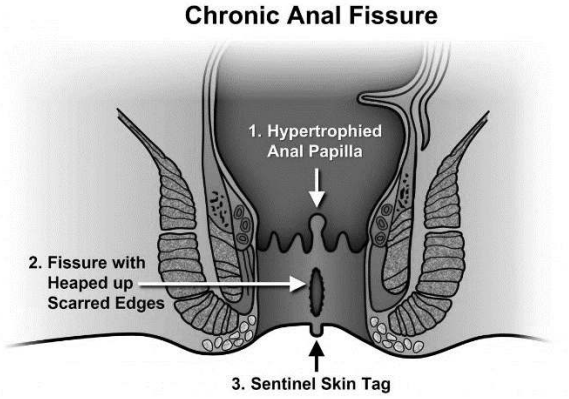
Daniel Abramowitz MD FRCSC
Colorectal and General Surgery

1333 Sheppard Ave E, Suite 243
North York, Ontario M2J 1V1
Telephone: 647-945-2687
Fax: 416-226-1515
dabramowitz@northyorkcolorectal.ca

www.northyorkcolorectal.ca
www.nygh.on.ca/colorectalcare



What is it?

An anal fissure is a rip/tear in the lining of the anus. It causes pain following a bowel movement, often felt as a burning sensation or like passing glass with bowel movements. The pain usually lasts 30 minutes-1 hour, but can last much longer

Why does it happen?

The fissures often starts from an episode of either hard stools (constipation) or diarrhea. The fissure causes the muscle to spasm and this prevents healing

How do we treat fissures?

Fissures do not heal because of the muscle spasm, all of the treatments are to cause muscle relaxation to allow the fissure to heal

TREATMENT

1. Non operative management

There are 2 components to non operative management

- Sitz bath – soaking in a tub of warm water for 10-15 minutes
- Diltiazem cream – given as a prescription and applied to the area (on the outside, never on the inside) and left on

I recommend doing both of these items 2-3 times a day. Non operative management comes with low risk, and is successful for more than half of patients. It takes 8-12 weeks for full healing

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2. Botox

Botox causes muscle paralysis for 2-3 months. It leads to healing of the fissure in about 80% of patients. Botox is not covered by OHIP, but often covered by extended health benefits. Risks of botox are low, and any changes to continence wear off in 2-3 months.

3. Surgery

Sphinctertomy is a procedure done in the operating room under a general anesthetic. It is a day operation, meaning you go home the same day as the operation. During the operation a small portion of the sphincter muscle is cut, allowing for permanent relaxation. This leads to healing in more than 90% of patients.

Risks

- Small risk of minor changes in continence
  - Some people have a more difficult time holding on to gas after the operation
- Bleeding
- Wound infection

Prevention

After the fissure heals, focusing on good bowel habits will prevent further fissures. The aim is to have 1-2 bowel movements a day, they should be formed not hard. Bowel movements should come without straining. There are many ways to help achieve this, I suggest:

- Increased fibre intake
  - 25-30 g/day from dietary source or Metamucil
- Increased fluid intake
  - 6-8 glass of water a day
- Daily exercise
- Over the counter medications
  - Lax-a-day
  - Milk of magnesia