

ANAL FISSURE MANAGEMENT INSTRUCTIONS

Colorectal Surgery Services

INTRODUCTION:

You have been diagnosed with an anal fissure. This is a tear of the lining of the anus which is often due to trauma, poor healing, hard stools and / or frequent defecation.

Due to the nature of repeated trauma or tearing and poor healing it may take up to 6 (six) weeks or longer to heal the fissure.

You may experience ongoing symptoms such as pain during defecation or bleeding while you are being treated. It is important to follow up with your doctor as directed to check your progress. Make sure to report any changes or worsening of your symptoms.

INSTRUCTIONS:

Pain:

Soak in a tub of warm water at least twice each day and after bowel movements for 10 minutes each time. This may help relieve the spasm so that there is less trauma. It also may help healing by improving blood flow to the healing tissue.

Medications:

Your doctor may prescribe various medications to apply to the anal canal. It is important that you use them as directed. Some may be for pain and others for healing. Some of the medications are made by a compounding pharmacy and can't be bought over the counter. These may cause headaches. If this happens call your doctor or nurse. Please inform your doctor of all your medications especially those for blood pressure and chest pain as there may be interactions of your medications. Your doctor has prescribed the following medications:

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|---|--|
| <input type="checkbox"/> Nifedipine cream or ointment | <input type="checkbox"/> Pramozine cream |
| <input type="checkbox"/> Nitroglycerine cream or ointment | <input type="checkbox"/> Lidocaine ointment or jelly |
| <input type="checkbox"/> Diltiazem cream or ointment | <input type="checkbox"/> Ducosate tablets |
| <input type="checkbox"/> Hydrocortisone cream or ointment | |

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Bowel Management:

The goal is to make stools of a normal consistency. Avoid foods or anything that causes diarrhea or hard stool. It is important to avoid straining when passing stools. The goal is to avoid traumatizing the anal canal. You should do the following checked actions:

- Have one stool every 1 – 2 days. Use a stool softener like Colace™ twice a day or as directed on the bottle. Mineral oil can be used instead of Colace™
- Use a laxative like milk of magnesia if needed if there is no stool for 3 days. Discuss this with your physician.
- If you have severe diarrhea, use an anti-diarrhea medication like Immodium™ as directed on the bottle. Call your doctor if needed.

Diet management & fluid:

Increasing fiber intake helps the stool stay consistent. Eat about 30 grams of fiber each day. It is best to eat lots of fruits and vegetables. An example would be two servings of fruits and / or vegetables with each meal.

If it is difficult to eat fruits or vegetables use a fiber supplement. Use either of the ones available over-the-counter checked below:

- Metamucil™ or Konsyl™ as directed on the bottle.
- One bowl of All-Bran™ (1/2 cup) each morning.
- Citrucel™ as directed on the bottle.
- Benefiber® as directed on the bottle

Fluid management:

Increase your fluid intake. Drink 8 glasses (8 ounces) of non-caffeine, non-alcohol drinks each day. This can easily be achieved by taking two glasses with each meal. Increase fluid intake on hot days. It may be helpful to take 500 cc plastic bottles of water with you to work or school or to other activities. Ask your health care team for instructions if you are taking a diuretic or fluid pill, have heart failure or kidney disease.

Other Instructions:

Remember to follow the instructions given to you and see your physician or nurse as scheduled. These written instructions **do not** replace a discussion with your physician or nurse. They may give you other instructions. Feel free to ask questions, come back for a visit or call if you are unclear about your diagnosis or treatment plan.

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