

MANAGEMENT OF PRURITUS ANI (ITCHING ANUS)

Colorectal Surgery Services

Definition:

Pruritus ani is itching or burning of the area near the anus. The disease is caused by any process that results in irritation, inflammation, wetness or trauma to the anal area. Sometimes the exact reason causing the symptoms is unknown and can take a long time to treat. Usually the cause can be found and treated without surgery. The ultimate cause for the symptoms is a change in the pH & natural, protective oils of the anal skin. Other causes may include allergies leading to inflammation or an overactive anal relaxation reflex. It afflicts 1 – 5% of the populations usually at 20 – 40 years of age.

Common Causes of Pruritis Ani:

- Seepage/ Soilage
- Poor hygiene
- Excessive cleansing
 - Soaps
 - Ointments
 - Perfumes
- Obesity / Tight fitting clothes
- Persistent diarrhea
- Pelvic radiotherapy
- Excess hair
- Dermatologic conditions
- Dietary agents
 - Caffeine
 - Citrus
 - Tomatoes
 - Spices
 - Beer or alcohol
- Infections near the anus
- Systemic diseases
- Certain medications

Common Treatments:

The goal is to keep the anal region dry and damage free. Skin is naturally oily with some acid. Too much cleaning can remove the important oils or acids or result in repeated trauma. The basic treatments for pruritis ani include:

- Treating the underlying cause
- Changing personal hygiene
- Making dietary changes
- Taking fiber supplements
- Avoiding scratching & trauma
- Removing excess hair
- Protecting the skin

Surgical Management:

Surgical treatment is rarely needed. Surgery may be indicated only if other treatments fail. First medicines are often tried and usually are successful. Surgery is never an emergency.

Bowel Management:

The goal is to make stools of a normal consistency. Avoid foods or anything that causes diarrhea or hard stool. You may be directed to do the following checked actions:

- Have one stool per day. 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 you don't have a stool after 3 days.
- If you have severe diarrhea, use an anti-diarrhea medication like Immodium™ as directed on the bottle.

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Diet management & fluid:

The diet can play an important role in treatment. Avoid foods that change the acid content of the anal skin, you may be allergic to or cause the anus to weaken. Avoid foods or drinks that contain:

- Caffeine (Coffee or caffeinated soda) Two cups of caffeine free coffee per day is okay.
- Chocolate or chocolate containing foods
- Citrus fruits or drinks (Example: Oranges, orange juice, lemons)
- Tomatoes or tomato sauces
- Spicy foods
- Beer, ale and alcoholic beverages
- Seeds, popcorn and nuts

Increasing fiber intake helps. 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 checked below which are available over-the-counter:

- Metamucil™ or Konsyl™ as directed on the bottle.
- One bowl of All-Bran™ each morning.
- Benefiber® as directed on the bottle.
- Citrucel™ as directed on the bottle.

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.

Peri-anal skin management:

It is important not to damage the skin more. The following are instructions:

- No scratching or rubbing the anal area. Avoid excessive cleaning when bathing. This can actually cause the symptoms to worsen over time.
- Take showers if possible instead of baths. A handheld shower head is useful. Use no soaps, bath oils or other cleansers on the anal skin. Use your hand & avoid using a wash cloth on the area. Pat the area dry after cleaning or showers/ baths.
- Use a hair dryer on the coolest setting to dry anal skin as an option
- Put A & D™ or Destin™ on the area three times a day, after showers & after stools. Plain petroleum jelly to the area works well too.
- During the day use a bit (1/4) of a cotton ball against the anus & Maxipad™. This keeps moisture away.
- Dust the bit of a cotton ball and / or Maxi pad™ with cornstarch. Baby Goldbond™ powder works well.
- Use baby wipes or plain lotion on toilet paper after passing a stool or to clean up.

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.