



## Anal Fissures

The rectum is the last six inches of the colon or large intestine. In the last inch of the rectum, there is a valve-like sphincter called the *anus*. The delicate inner lining of the anus is called the *anal mucosa*. An anal fissure is NOT a hemorrhoid. An anal fissure is a small tear in the delicate anal mucosa. Like a small paper cut on your hand that may bleed and cause pain, an anal fissure may cause pain when having a bowel movement. You may notice bright red blood on toilet paper after you wipe. If you have this condition, you are not alone. Anal fissures are quite common and do not discriminate on age or status. As gastroenterologists, this is something we see quite often.

### What Causes An Anal Fissure?

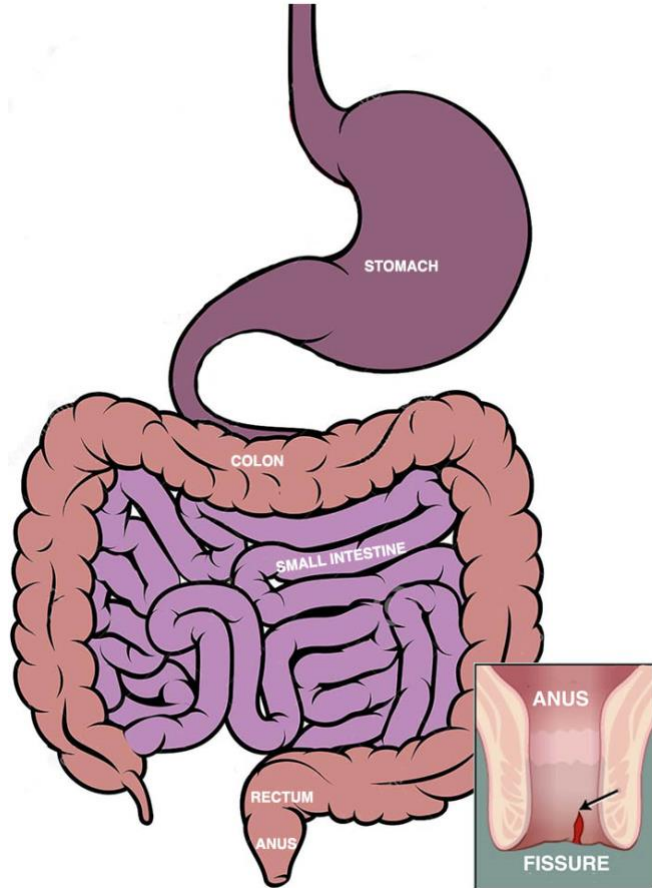
The most common cause is constipation and straining during a bowel movement that is larger than the anal opening. If the stool is hard and too large to pass through the anal opening, it may tear the anus as it is forced out. A softer stool can change its shape to fit through the anal opening. This tear is called an anal fissure.

### How Does Your Doctor Know?

Many people with anorectal symptoms are embarrassed and avoid seeing their doctor until the condition has become severe. That is a mistake. The sooner an anal fissure is diagnosed, the better. Early diagnosis increases the chance of more straightforward and successful treatment. An accurate diagnosis is the first step in successful treatment. Diagnosis is based on your doctor's experience, evaluation of your symptoms, a physical examination, and sometimes specialized testing. In some cases, a colonoscopy examination may be appropriate to exclude other important diagnoses such as hemorrhoids, colon polyps, anal or colorectal cancer, and different forms of colitis.

### Can An Anal Fissure Cause Anal Or Colorectal Cancer?

No. Although an anal fissure may be painful, it is not serious. Anal fissures do not lead to anal or colorectal cancer or other serious illnesses. However, if blood is mixed in with your stool, talk to your doctor to establish an accurate diagnosis.



## Treatment

The goal of treatment is to relieve your pain and to heal the torn lining. To speed up the healing process, your doctor may prescribe medicine. Acute anal fissures, which don't last longer than six weeks, are common and usually heal with medication and self-care. Chronic anal fissures -- those that last longer than six weeks -- may be more difficult to heal. In rare cases, surgery may be needed.

## Ten Tips To Treat An Anal Fissure

### 1. Avoid constipation

Include fiber-rich foods like fruits, vegetables, beans, and whole grains. Your goal should be to get 20 to 35 grams of fiber daily. You can gradually increase the amount of fiber you eat by having more:

- \* Wheat bran and Oat bran
- \* Whole grains, including brown rice, oatmeal, and whole-grain pasta
- \* Whole grain cereals and bread
- \* Peas and beans
- \* Citrus fruits

### 2. Stay hydrated

Drink plenty of caffeine-free fluids throughout the day. (Too much alcohol and caffeine can lead to dehydration.) Drink plenty of water – at least FOUR 8-ounce glasses every day. (If you have kidney, heart, or liver disease and must limit fluids, talk with your doctor before increasing the amount of liquids you drink.)

3. Exercise every day. Build up slowly. Even a daily walk can be helpful.

4. Take a fiber supplement, such as Benefiber or Metamucil, daily if needed. Read and follow all instructions on the label. Take a stool softener such as Miralax. You must drink plenty of water daily for these to be effective.

### 5. Try our "fiber mix" combination

Many of our patients suffering from constipation and anal fissures have benefited by taking a unique and effective fiber mix combination that we have recommended for many years. This fiber mix is simply a combination of the two over-the-counter fiber supplements and the stool softener mentioned above - in the correct proportions combined with a minimum of 4 glasses of water daily. (See below)

## FiberMix

**1 cup of orange Metamucil - not plain psyllium  
2 cups of Benefiber (or less expensive generic)  
1 cup of Miralax (or less expensive generic)**

**Mix thoroughly and store in a clean dry container**

**Take 2 heaping TBSP of this mixture in 8 oz of water around the same time every day. I add an ounce of orange juice to mine.)**

**Be sure to drink a minimum of 32 ounces of water every day for this to be effective.**

**Robert Fusco MD**

6. Don't ignore the urge to use the toilet. Putting off bowel movements can lead to constipation; stools may become more challenging to pass, causing pain and tearing. We see this most often in young women who don't wish to use a public restroom for a bowel movement and delay until they are at home.
7. If possible, schedule a time each day for a bowel movement. A daily routine may help. Do not strain when having a bowel movement. Take your time, but do not sit on the toilet too long, which can increase pressure in the anal canal.
8. Support your feet with a small step stool while sitting on the toilet. This helps flex your hips and positions your pelvis in a squatting posture. A helpful device is the Squatty Potty™, which is available online.
9. Try a Sitz Bath. Sit in 3 to 4 inches of warm water (sitz bath) 3 times daily and after bowel movements. The warm water helps the area heal and eases discomfort. Do not add anything to the water.
10. Use an extra soft toilet tissue to clean after a bowel movement. Instead of toilet paper, use unscented baby wipes or medicated pads, such as Preparation H or Tucks, to clean after a bowel movement. These products do not irritate the anus.

## Medications for Treating Anal Fissures

Most patients whom we see with this problem have severe pain and benefit from prescription medication.

1. Recticare is an over-the-counter, non-prescription cream that contains the numbing medication lidocaine, which can temporarily reduce anal pain. This is similar to the Novocain your dentist might use. Recticare is a cream applied topically. There are no needles. Analgesics like Advil and Aleve are ok for short-term use. Narcotic analgesics should be avoided as they often lead to constipation, worsening the fissure.
2. Nitroglycerine ointment: Your doctor may prescribe this medication to help raise blood flow to the anal canal and sphincter, which allows fissures to get better faster. Some side effects may include headaches, dizziness, and low blood pressure. Nitroglycerine ointment should not be used within 24 hours of taking erectile dysfunction medicines like sildenafil (Viagra), tadalafil (Cialis), or vardenafil (Levitra). We have a local pharmacy premix a compound of low-dose nitroglycerine cream with lidocaine, a numbing agent to help reduce pain.
3. Calcium channel blockers. When Nitroglycerine ointment is contraindicated, a different class of drugs called calcium channel blockers may be prescribed. These are blood pressure-lowering medications. Some of the topical ones can treat anal fissures, too. Side effects may include headaches.



## Surgery For Anal Fissures

You probably won't need surgery for anal fissures unless other forms of treatment haven't worked. The surgery called a lateral internal sphincterotomy (LIS), involves making a small cut in the anal sphincter muscle. It can reduce pain and pressure, allowing the fissure to heal. However, surgery comes with possible risks, including permanent fecal incontinence, and does not guarantee a satisfactory outcome. If surgery is your only option, be sure to consult with a Colorectal Surgeon specialist.

## Preventing A Recurrence.

Anal fissures have a high recurrence rate. All it takes is one especially hard bowel movement, and the anal tissue may rip open again, and you are "back to square one ." You can reduce the risk of recurrence by maintaining lifelong healthy bowel habits.

## Be Patient

Don't get discouraged. Healing of an anal fissure is a slow process and may take several months. Be patient and stick with the program. Try to avoid surgery.

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The Center for Digestive Health & Nutrition is a private medical practice comprised of experienced Gastroenterologists, Nurse Practitioners, and staff members dedicated to preventing and treating digestive disorders. Our physicians have been serving the needs of those in Western Pennsylvania and surrounding areas since 1977, having cared for tens of thousands of individuals with digestive problems. Our mission is to deliver high-quality gastroenterology services efficiently and cost-consciously. We realize the very sensitive nature of GI illness and understand the necessity to provide our services in an environment that stresses patient privacy and confidentiality and where patient satisfaction is the goal. Appointments can be conveniently scheduled online via our website above. Learn more about digestive issues on Instagram @thedigestivetract

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