

East Mississippi Endoscopic Center

Anal fissure

An anal fissure is a small split or tear in the anal mucosa that may cause painful bowel movements and bleeding. There may be blood on the outside of the stool or on the toilet tissue following a bowel movement.

Most fissures heal on their own and do not require treatment. However, some fissures may require medical treatment.

The incidence of anal fissures decreases rapidly with age. In adults, fissures may be caused by constipation, the passing of large, hard stools, or by prolonged diarrhea. In older adults, anal fissures may be caused by decreased blood flow to the area.

Anal fissures are also common in women after childbirth and people with Crohn's disease.

Symptoms

- Pain while having a bowel movement
- Blood on the surface of stool (not mixed in with stool)
- Blood on toilet tissue or wipes
- A crack in the skin that is visible when the anus is stretched slightly (the fissure is almost always in the midline)
- Constipation, often with painful bowel movements

Treatment

- Stool softeners
- Dietary adjustment (addition of bulk -- substances that absorb water while in the intestinal tract)
- Cleansing more gently
- Petroleum jelly
- Sitz bath
- Anesthetic ointment, if pain interferes with normal bowel movement
- Topical muscle relaxants

These measures generally heal more than 90% of anal fissures.

For fissures that do not heal with these home treatments, injection of botulinum toxin (Botox) into the anal sphincter may be used to temporarily paralyze the anal sphincter muscle and promote healing. Another option for nonhealing fissures is a minor surgical procedure to relax the sphincter.

Complications

Occasionally, a fissure becomes chronic and will not heal. Chronic fissures may require minor surgery to relax the sphincter.

Prevention

To prevent fissures at any age:

- Keep the anal area dry
- Wipe with soft materials or a moistened cloth or cotton pad
- Promptly treat any constipation or diarrhea
- Avoid irritating the rectum