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# Having surgery to repair an anal fistula

Department of Surgery

Information for Patients

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## What is an anal fistula?

An anal fistula is a small “tunnel” that develops between the end of the bowel and the skin near the anus (where poo leaves the body). The first sign of an anal fistula is often an abscess near the back passage.

## How is an anal fistula repaired?

Anal fistula surgery is usually done as a day case. You will go home the same day. You will usually be asleep during the procedure (general anaesthetic), unless this is not allowed due to other health conditions.

## Types of operation

1. **Lay open of anal fistula**

The surgeon cuts the “roof” off the top of the tunnel. This changes it from a tunnel to a “trench”. The trench becomes narrower as it heals. You will have a flat scar overtime.

2. **Seton insertion**

If the tunnel is very deep or long, or includes muscles you use to poo, you may need an operation which uses a threading a stitch (a **Seton**). A piece of surgical thread is placed in the fistula. This will leave a loop through the back passage. This allows for drainage and stops an abscess from forming.

Over a few operations with Seton changes, the tunnel becomes shorter. Finally, the seton can be removed and the fistula treated by laying it open.

## What are the benefits of having surgery?

The main benefits are to stop

- an abscess forming
- the need for antibiotics or
- emergency surgery to drain the abscess.

Surgery can also improve any discomfort, bleeding or discharge, making it easier to manage.

## Are there any other options to this operation?

There are other options. These include laser ablation and fistula glues/plugs.

You can also choose to avoid surgery and manage with just pads/plasters to stop staining on underwear. It will not heal on its own.

## Are there any possible risks?

As with any operation, there are some possible risks. These include:

- Difficulty in controlling passing wind. This will improve with time.
- Infection. You should have a bath or shower after a poo to help keep the area clean.
- There are risks linked to having a general anaesthetic. The surgeon will explain these risks to you. If you have several health conditions, you may also need to see an anaesthetist. This is a doctor who gives the anaesthetic and looks after you during the operation. They will explain how the anaesthetic may affect you.

## What happens before my operation?

- A surgeon will see you in the clinic. They will talk to you about the operation.
- You will then sign a consent form.
- You will be added to a waiting list.
- You will then be seen in a pre-assessment clinic before your surgery. This is to make sure you are fit for day surgery. At this appointment the nurse will go through your paperwork with you. They will give you information about preparing for the surgery.
- Depending on your general health and your age, we may need to do some tests. We will explain them to you. They may include heart tracing / ECG (an electrocardiograph), screening swabs and blood tests.
- If you are taking any medication, please keep these with you (both for clinic and pre-assessment)

## What arrangements do I need to make for day surgery?

Before you can have your surgery as a day case, you need to plan the following things:

- A responsible adult must collect you. They must take you home in a car or taxi.
- A responsible adult must stay with you for at least 24 hours after your surgery.
- You must have a phone at home.

You **must not** drive, cycle, operate machinery or drink alcohol, for at least 48 hours after your procedure.

**Important: driving after an anaesthetic is a criminal offence. It will affect your insurance cover.**

## What do I need to do before my surgery?

- Read your admission letter carefully.
- Do not eat or drink anything from the time stated in your letter.
- Do not wear contact lenses.
- Do not wear any jewellery, except for a wedding ring.
- Do not wear nail polish, false nails or make-up.
- Do not bring any valuables with you to hospital. University Hospitals of Leicester NHS Trust cannot accept responsibility for loss or damage to personal belongings.
- Do have a bath or shower before you come into hospital.
- Do wear comfortable clothing and footwear to go home in.

**Expect to wait on the unit before your surgery.**

## What do I need to bring with me on the day?

- Your appointment letter. The time you are given to arrive is not the time of your procedure. The surgeon, anaesthetist and nurses need to see you before the start of the list. You may be waiting for between 2 and 4 hours.
- Any medicines or inhalers you are using. Please take your medicines before attending. The pre-assessment nurse will have told you when you should take your medication, or if any need to stop any before your operation.
- A contact number for your lift home.
- A dressing gown and slippers if you have them.
- Something to do while you are waiting, such as a book or magazine to read.

## What will happen when I’m on the ward?

- Please report to the reception area of the ward stated in your letter. Your details will be checked.
- You will be sent to the ward or to the waiting room where a nurse will collect you.
- The nurse will talk to you about your procedure and ask you a few questions.
- You will meet one of the surgical team. They will go through the consent form with you (if not already done), or confirm a consent form you signed before.
- If there is anything you are concerned about or do not understand, please ask your surgeon now.
- Your anaesthetist will see you. This is the doctor who will look after you while you are
- asleep.
- The nurse will tell you when to change into your theatre gown. They will then take you to the operating theatre.

## What happens after my operation?

You will return to the day ward. Staff will make sure you are comfortable. They will offer you refreshments.

If you have any discomfort or sickness please tell the staff so that they can help you. You will recover on the ward until your nurse is happy that you are well enough to go home. You will need to eat and drink before you can go home.

Sometimes patients need to stay overnight. If your doctor or nurse feels that this needs to happen, they will explain why.

## What happens when I go home?

### Wound care

You need to keep the area as clean as possible. After a poo, wash the area with a shower head/ bidet or quick bath. This will keep it clean but also be more comfortable than toilet paper.

There will be some discharge from the wound. You may want to use some stick-on pads to protect your underwear.

Sometimes the wound dressing will need changing by a district nurse. The nurse on the ward will arrange this for you before you go home.

Once you are at home you should contact the nurse at your GP surgery if you are concerned about your wound, mainly if:

- it becomes more (rather than less) painful
- it begins to look red or swollen
- it feels hot
- It begins to smell

### Pain

You may have some pain. You can take simple painkillers such as paracetamol regularly for a few days.

You may also be discharged with stronger painkillers such as codeine to take as needed. You may also be sent home with a laxative to stop constipation.

- Take painkillers when the pain starts. Do not wait for it to get really bad.
- Take painkillers before you go to sleep, so you can rest.
- Take painkillers when you wake up, so they work before you get out of bed.
- Painkillers can cause constipation. Drink plenty of water. Eat some high fibre foods such as fruit, vegetables, and cereals. Take a laxative if needed.
- Your discomfort will continue for some time. It depends on the size of your fistula and the type of surgery.

### Driving

You must not drive for 48 hours after a general anaesthetic. You will not be covered by your car insurance.

Do not drive until you can keep control of your car in an emergency. You should contact your insurance company if you are not sure.

### Work

The amount of time you need to be off work depends on your job and the type of surgery you have had. Please discuss this with the surgeon doing your surgery. Ask for a Sick note if you need one.

You can return to your usual activities once you are comfortable. If you have any questions, please talk to your surgical team.

### Sex

You can return to your usual activities once you are comfortable. If you have any questions, please ask your surgical team.

### Physical activity

Do not do too much too soon. It is usual to feel some aches and pains for a few days, perhaps up to 2 weeks. Avoid strenuous activity for about 2 weeks after your operation.

### Holidays

Flying too soon after surgery can raise the chance of problems. Talk to your surgical team and your insurance company.

If you have problems after your surgery, contact us using the details we will have given you when leaving the hospital.

## More information

More information about anal fistula can be found on the NHS website:
https://www.nhs.uk/conditions/anal-fistula/

## Contact numbers

**Contact the hospital where you are booked to have the procedure:**

| | |
|---|---|
| Leicester General Hospital (Monday to Friday 9am to 6pm) (Day Case 1) | **0116 258 4192** |
| (Day Case 2) | **0116 258 8130** |
| Glenfield Hospital (Ward 24) | **0116 250 2490** |
| Leicester Royal Infirmary (ASU) | **0116 258 5164** |
| Loughborough Hospital Day Surgery Unit (Monday to Friday 8am to 6pm) | **01509 564406** |
| Hinckley & District Hospital Day Surgery Unit (Monday to Friday 8am to 5.30pm) | **01455 441845** |
| Hinckley Pre-assessment | **01455 441847** |
| Melton Hospital Day Surgery Unit (Monday to Friday 8am to 5.30pm): | **01664 854904** |

**Outside these hours**

| | |
|---|---|
| Contact Surgical Admissions Unit (SAU) | **0116 258 5332** |

Health information and support is available at www.nhs.uk or call 111 for non-emergency medical advice

Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals.

To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

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If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net

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