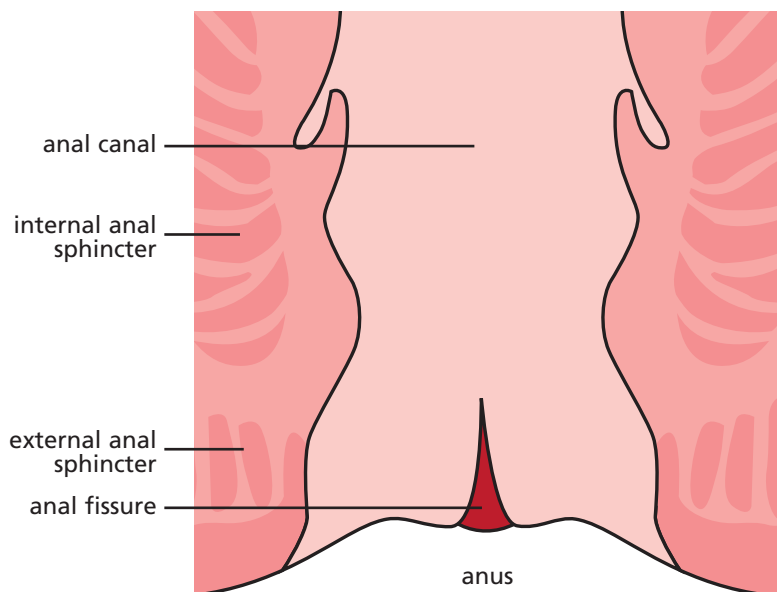




Anal fissure

This information sheet from Great Ormond Street Hospital (GOSH) explains the causes, symptoms and treatment of anal fissures and where to get help.

Anal fissures are tiny tears in the skin around the anus and can be painful. They usually develop as a side effect of constipation. Constipation is the condition where a person passes faeces (poo) less frequently than usual and the poo is harder, drier and painful to pass.



What causes anal fissures?

They usually develop when a person is constipated. The sphincter (ring of muscle) around the anus stretches to let the hard dry poo pass and the tissue around the anus may tear as a result.

What are the signs and symptoms of anal fissures?

Anal fissures are usually small but can be painful as the tissue around the anus is supplied with lots of nerve endings. The tears can bleed bright red blood which will show on toilet tissue but soon stops. After passing poo, they start to heal but can re-open the next time a person poos. They usually heal completely in a week or two but only once the poo has softened.

How are anal fissures diagnosed?

Initially, the doctor will diagnose constipation from the child's history. They may look at the child's anus to see if any anal fissures are visible. Occasionally, the doctors may suggest your child has an examination under anaesthetic or EUA to check that the anus more closely and confirm that it is otherwise normal.

How are anal fissures treated?

Treatment aims to reduce the constipation so that poo is easier to pass and the tissues around the anus are less likely to tear. This may involve a change in diet to include higher fibre foods, medicines such as Movicol® to soften the poo and help it pass so it is less painful to pass.



As well as reducing constipation, there are various options for making the anal fissures less painful until they heal. A warm bath can soothe the area for a while but it should be patted dry rather than rubbed. Creams or ointments can be soothing, but certain ones containing steroids or anaesthetics should only be used for a few days at a time.

What happens next?

People who have developed anal fissures once are likely to develop them again. The key to preventing anal fissures is to avoid becoming constipated. Talk to your doctor about a balanced diet containing plenty of fibre and drink plenty of fluids.

**If you have any questions, please telephone
020 7405 9200 and ask for the ward from
which your child was discharged**

Compiled by the Department of Specialist Neonatal and Paediatric Surgery
in collaboration with the Child and Family Information Group
Great Ormond Street Hospital for Children NHS Trust, Great Ormond Street, London WC1N 3JH
www.gosh.nhs.uk