

Having a perianal abscess drained

Department of General Surgery

Information for Patients

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What is a perianal abscess?

An abscess is a painful collection of pus that is caused by a bacterial infection. When bacteria enter your body, your immune system sends infection-fighting white blood cells to the affected area. As the white blood cells attack the bacteria, some nearby tissue dies, creating a hole which then fills with pus to form an abscess. The pus contains a mixture of dead tissue, white blood cells and bacteria.

A perianal abscess is a collection of pus found near the anus or rectum. The rectum is part of the lower intestine that stores poo (faeces) and the anus is the opening in your bottom that lets poo out of your body.

What causes a perianal abscess?

A perianal abscess can be caused by an infection of a small gland just inside the anus. Most abscesses develop in people who are healthy, and there is no obvious reason why it has happened. However, conditions that may increase your risk are:

- inflammatory bowel disease
- diabetes
- conditions or treatments causing a low immune system (such as HIV, steroid treatment or chemotherapy)

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What are the symptoms of a perianal abscess?

Signs of a perianal abscess can include:

- constant pain in the bottom. This is not always related to going to the toilet (opening your bowels).
- swelling close to the anus.
- pus coming from the skin or anus.
- a high temperature and feeling generally unwell.

How is an abscess treated?

If the infection is caught very early antibiotics may work. However most perianal abscesses will need an operation to drain the pus. This is usually done under a general anaesthetic (you will be asleep). This is usually seen written as an '**incision and drainage of perianal abscess**' or may be seen abbreviated to '**I+D of a perianal abscess**'.

What happens if I need surgery?

During the procedure, the surgeon will make a cut (incision) in the abscess to allow the pus to drain out. A small piece of skin may be removed to create a wider opening. The abscess will be left open (the skin is not stitched) so if any more pus is produced it can drain away easily. If the abscess is deep, a dressing (pack) may be placed inside the wound so the skin is kept open to allow the deeper tissues to heal first, which will help stop the abscess reforming.

Depending on the size of the space where the abscess was (cavity), the wound may take several weeks to fully heal up. The procedure will leave a scar.

If a perianal abscess is not drained it may continue to grow, resulting in more pain and a larger cavity, with the risk of developing a spreading infection.

A member of the surgical team will talk to you before the operation and you can ask any questions before signing a consent form.

Are there risks of any complications?

The risks of serious complications are very low but the following can happen:

- **Bleeding** - some minor bleeding is expected as the wound is open. Bleeding that needs treatment to stop it is rare.
- **Infection** - antibiotics are not usually needed once the abscess is drained, however if the skin surrounding the wound starts to become red or hot, you should have the wound checked by your GP or at a walk in center.

- **Damage to the sphincter muscle** - the sphincter muscles help you control when you open your bowels (poo). Rarely, these muscles can be damaged by infection or surgery. This means you may leak mucus or may find it difficult to hold on to wind. This problem is usually temporary and will settle down in time.
- **Will it happen again?** - sometimes perianal abscesses can come back. If the wound does not fully heal up or continues to leak fluid, you may have a condition called a fistula-in-ano. This is where an abnormal connection has formed between the lining of the anal canal and your skin. If you are worried about how your wound is healing, please see your GP. If necessary they may refer you to a hospital outpatient clinic.
- **Scarring** - there will be a scar resulting from healing of the wound.

Going home after surgery

You are normally able to go home on the same day as your surgery, unless you live alone or you need antibiotics given into a vein (intravenously), or there is another medical reason to keep you in hospital.

- **Dressings** - you will need to have regular follow-up in the community by your practice nurse or district nurse (depending on local arrangements). If you have a pack in your wound, this will need to be changed frequently until your nurses are happy the wound is healing. We will talk to you about these arrangements before you go home. It can be very difficult to get dressings to stick on wounds that are close to the anus. A piece of clean gauze tucked between the buttocks and a pad or panty liner will help soak up any moisture or fluid. You will be given several days supply of dressings and then the community service will take over providing these.
- **Wound bleeding and discharge** - it is common to see some bleeding after drainage of a perianal abscess because wounds are left to heal on their own and are not stitched. You might notice small amounts of blood when wiping, drying or when changing dressings. It is also common to get some fluid discharge when open wounds are healing. Wearing a small pad will protect your underwear. Small amounts are fine, but if the bleeding or discharge increases and is painful you should contact your doctor.
- **Washing** - most people are able to bath and shower normally. In the early stages after surgery, sitting in a warm bath with a tablespoon of salt in the bathwater (sitz bath) can be very soothing, particularly before any dressing changes. You should avoid perfumed soaps when washing. We suggest dabbing the area dry with a towel or using a hairdryer on cool setting.
- **Medication** - you will be given painkillers on the ward and to go home with if needed. We will discuss your medications with you before you go home.

- **Diet** - it is important to eat and drink normally once you have gone home. You should have a balanced diet with plenty of fluids to keep your bowel movements soft. You should not miss meals to avoid having your bowels open.
- **Bowels** - it is important to keep your bowels moving after anal surgery and to avoid straining. You can do this by keeping your poo soft but also your doctor may recommend a softener to take after you have gone home. This should help reduce discomfort when going to the toilet and should be taken until it feels comfortable.
- **Driving** - you must wait at least 24 hours before driving after your operation if you have had a general anaesthetic. You must be comfortable, able to fully control your vehicle and comfortably perform an emergency stop before you drive.
- **Work** - you can return to work when you feel ready. This might depend on your particular abscess, the job you do and the need to have your dressings changed. Most patients feel uncomfortable after anal surgery for a few days. Heavy lifting, bending and sitting for long periods may be difficult. Your surgeon can talk to you about how much time you should have off work. You can self-certificate for one week but if you need longer than this the hospital will provide you with a fit-note if needed.

Will I need a follow-up appointment?

Most abscesses heal without further problems and you will not usually need to be seen in hospital again. If we think you do need to be seen again, we will arrange an appointment for you.

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