



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, so you will go home the same day. You will be asleep during the procedure (general anaesthetic).

The operation is done by cutting the "roof" off the top of the tunnel. This changes it from a tunnel to a "trench". The trench becomes narrower as it heals, and ends up as a flat scar after a month or so. Sometimes several operations are needed.

If the tunnel is very deep you may need an operation involving threading a stitch (called a **Seton stitch**) through the tunnel and tying the ends. Further operations to tighten the stitch will be needed. Eventually the stitch will cut through to the surface of the skin and the tunnel will heal.

Sometimes the Seton stitch is put in to help to drain the area. In this case the stitch will not need tightening. The stitch will be removed in a further operation, or it may fall out. The time this will take depends on how deep the tunnel is, but can take several months.

What are the benefits of having surgery?

The main benefit is that any discomfort, bleeding or discharge caused by the fistula will improve. These problems will continue for some time after your operation, until the wound has healed.

Are there any alternatives to this operation?

The alternative is to not have the operation. In this case the problem would not improve.

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

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk



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 opening your bowels in order to help keep the area clean.

What happens before my procedure?

You will be seen in a pre-assessment clinic at some point before your procedure, to make sure you are fit for day surgery. At this appointment the nurse will go through your paperwork with you and you will be given information about your procedure.

You will be told about the consent form that you will be asked to sign to give the surgeon permission to carry out your procedure. This appointment is a good time to ask any questions you may have. Please write these down if that will help.

Depending on your general health and your age, we may need to carry out some tests. These will be discussed with you, and may include an electrocardiograph (heart tracing / ECG), screening swabs and blood tests.

If you are taking any medication, please bring it with you.

What arrangements do I need to make?

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

- You must be collected by a responsible adult, who must take you home in a car or taxi following your procedure.
- You must have a responsible adult at home with you for at least 24 hours after your procedure.
- You must have a telephone at home.

You **must not** drive, cycle, operate machinery or drink alcohol, for a minimum of 48 hours after your procedure.

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

What do I need to do before my procedure?

- 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 into 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 procedure.

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 needs to see you before the start of the list, so you may be waiting for your procedure for
 between two and four hours.
- Any drugs, medicines or inhalers you are using. Please take your necessary medication before attending; the pre-assessment nurse will advise you when you should take your medication.
- 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 am on the ward?

Please report to the reception area of the ward stated on your letter. Your details will be checked and you will be directed on 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 who will ask you to sign a consent form. If there is anything you are concerned about or do not understand, please ask your surgeon before you sign the form.

You will also be visited by your anaesthetist . 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, and then take you to the operating theatre.

What happens after my procedure?

You will return to the day ward and staff will make sure you are comfortable, and offer you refreshments. If you have any discomfort or sickness please let the staff know 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. You may get a phone call at home in the next day or two to check how your recovery is going. Very occasionally patients need to stay in overnight. If your doctor or nurse feels that this is necessary, they will explain to you the reasons for this.

Wound care

You need to keep the area as clean as possible. You need to have a quick bath or shower after you have opened your bowels. You can expect some discharge from the wound and may want to use some stick-on pads to protect your underwear.

Occasionally 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, especially 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 after your procedure. You will need to buy some painkillers such as paracetamol. Ask a pharmacist if you need advice about this.

- Take painkillers when the pain starts. Do not wait for it to get really bad.
- Take painkillers before you go to sleep so you are able to rest.
- If your pain is very bad, take the painkillers regularly so they keep your pain under control.
- Take painkillers when you wake up, so they are working before you get out of bed.
- Painkillers can cause constipation, so you should drink plenty of water, and eat some high fibre foods such as fruit, vegetables and cereals.
- Your discomfort will continue for some time depending on the size of your fistula and the type of surgery carried out.

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 doctor doing your procedure and ask for a sick certificate if you need one.

You can return to your usual activities once you are comfortable. If you have any questions please ask the pre-assessment nurse or the ward nurses.

Sex

You can return to your usual activities once you are comfortable. If you have any questions please ask the pre-assessment nurse or the ward nurses.

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 two weeks. Avoid strenuous activity for about two weeks after your operation.

Holidays

Flying too soon after a procedure can increase the chance of problems, and you may not be covered by your insurance, please discuss this with your insurance company.

If you have problems after your procedure you should contact us using the details you will have been given when leaving the hospital.

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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

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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 equality@uhl-tr.nhs.uk

