

Anal Fissure: Symptoms, Causes, and Treatment - Your guide to anal fissures at Kirurgen.dk

Have you ever experienced a sharp pain during a bowel movement or noticed a bit of blood on the paper that made you wonder? You are far from alone. An anal fissure, or a tear in the lining of the anus, is a common but often overlooked condition that can make daily life incredibly uncomfortable. But fear not, help is available!

At Kirurgen.dk, we understand how bothersome and embarrassing this topic can feel. That is why we have created this guide to demystify the **anal fissure**, provide you with knowledge about your options, and show you the way to relief.

What is an Anal Fissure? Definition of a Tear in the Anus

Imagine a small but deep wound in the delicate skin right at your anal opening. That is exactly what an anal fissure is. It is a **tear**, often the size of a paper cut, which typically occurs in the posterior (back) part of the opening.

Why does it hurt so much?

This is because the area is densely packed with nerve endings. When you have a bowel movement, the tear is stretched, and the pain can be intense-feeling like cutting glass-often lasting long after the visit to the toilet.

Causes of Anal Fissure: Why does the painful tear occur?

The most common cause is a combination of hard stools, constipation, and straining during bowel movements. However, diarrhoea or repeated loose stools can also irritate the area and lead to a **tear**. Think of it as an overworked area that eventually gives way under pressure.

Here are the typical culprits:

- Constipation: Hard and lumpy stools that require straining.
- **Diarrhoea**: Frequent, thin stools that irritate the mucous membrane.

- **Excessive straining:** Pushing too hard during bowel movements.
 - **Other factors:** In rarer cases, it may be due to inflammation or underlying diseases, but most often it is a mechanical issue.
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Anal Fissure Symptoms: How do I know if I have a tear?

The most characteristic signs are easy to recognise. These are the primary **anal fissure symptoms**:

- **Intense pain during and after bowel movements:** The pain can last from a few minutes to several hours.
- **Fresh, bright red blood on the toilet paper or in the toilet bowl:** Pay attention to the colour; darker blood may indicate other issues.
- **Itching and discomfort:** Especially if the fissure is chronic.
- **A visible skin tag or small lump:** In some cases, a **chronic anal fissure** can develop a small external skin tag (*sentinel pile*) or an internal polyp-like growth.

How is an Anal Fissure treated? - The Path to Relief

The vast majority of anal fissures can be treated without surgery, especially if detected early. The goal is to break the vicious cycle where pain leads to muscle spasms, which in turn worsens the tear.

Conservative Treatment (First Choice)

The focus is on making the stool soft and regular, as well as relieving pain and muscle spasms.

- **Diet and fluids:** Increase your fiber intake (eat plenty of fruit, vegetables, and whole grains) and drink plenty of water (Min. 1.5-2 litres daily).
- **Stool softeners:** Your doctor may recommend fiber supplements (e.g., Psyllium husks) or mild laxatives that make the stool easier to pass.
- **Pain-relieving and muscle-relaxing ointments:** Local anaesthesia (Lidocaine ointment) and ointments that relax the internal sphincter muscle, such as Nitroglycerin ointment (*Rectogesic®*) or Diltiazem cream. This promotes healing.

- **Warm baths:** A warm sitz bath can relieve pain and relax the muscles in the area.

Botulinum Toxin (Botox) Injection: An Effective Solution

If ointments do not provide sufficient effect, an injection of **Botulinum Toxin (Botox)** into the internal sphincter muscle can be a good solution. Botox temporarily relaxes the muscle, which reduces tension and gives the fissure peace to heal. The effect typically lasts for 3-6 months, which is often enough to achieve long-term healing.

Surgical Treatment: Lateral Internal Sphincterotomy (LIS)

Only a small minority of patients require surgery. This is typically considered if conservative treatment and Botox have not worked after several months, or if the fissure is very **chronic** and associated with a skin tag.

The most common operation is called a **Lateral Internal Sphincterotomy (LIS)**. Here, the surgeon makes a small incision in a part of the internal sphincter muscle. This permanently reduces muscle tension and gives the tear the best conditions to heal. The operation is very effective but involves a small risk of affecting bowel control (continence).

Why is it important to seek help?

Although an anal fissure is rarely dangerous, it can significantly reduce your quality of life. The constant pain and fear of toilet visits can lead to stress and isolation. Also, untreated anal tears can become chronic and harder to treat.

You do not have to suffer in silence! We are here to help you find the right anal fissure treatment, so you can return to a daily life without pain and discomfort.