

Patient leaflets from the BMJ Group

Anal tears

Anal tears can be painful, but they usually heal after some simple treatments. If they don't get better, you may need extra treatment. Anal tears are also called anal fissures.

We've brought together the best and most up-to-date research about anal tears to see which treatments work. You can use our information to talk to your doctor and decide which treatments are best for you.

What are anal tears?

Anal tears are small rips in the skin of your anus. The anus is the opening from which stools (faeces) come out. A tear here makes passing stools very painful.

Some people get anal tears if they pass hard, dry stools, or if they are constipated. Diarrhoea may also cause tears in some people.

It's unusual to have more than one tear at a time, or for the skin on the sides of the anus to tear. If this happens, your doctor may do some tests to see if you have another problem like an infection.

Anal tears often heal on their own. But some tears don't heal for six weeks or more. These are called chronic anal tears. Doctors think that some tears don't heal because the muscle that controls the anus tightens up (goes into spasm). The tightness stops blood getting to the anus. This prevents the tear from healing.

What are the symptoms?

If you've got an anal tear the main things you'll notice are pain and blood in your stools.

The pain you get can be sharp and intense. It may last for an hour or more after you've been to the toilet. You probably won't bleed very much. The blood will be bright red.

Sometimes a small lump or swelling appears at the end of the tear furthest from the anus. Because anal tears bleed and there's swelling around the tear, they're often mistaken for haemorrhoids (clusters of swollen blood vessels).

What treatments work?

There are some things you can do yourself that may help your anal tear to heal. But if you've got an anal tear that won't heal with simple treatments, your doctor may suggest some ointment or an injection. If these don't work, you may need a small operation.

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Things you can do for yourself

Eating lots of fibre may help. Fibre is food that isn't broken down by the body. It makes your stools more bulky and easier to pass. Foods high in fibre include wholegrain cereals, bread, and pasta.

Drinking plenty of water and other drinks can stop you getting constipated. It also makes your stools softer and easier to pass.

Having frequent warm baths helps ease the pain caused by the tear and helps to relax the anal muscle.

Ask your doctor whether you should try **laxatives** if you are constipated.

Medical treatments

Glyceryl trinitrate (GTN) ointment seems to heal anal tears in some people. GTN (brand name Rectogesic) helps to widen your blood vessels. This improves the blood flow to your anus. GTN comes as an ointment that you rub on your anus. You'll need a prescription from your doctor to get GTN ointment. GTN causes headaches in about a quarter of the people who take it.

Botox injections into the muscle of the anus may help to heal anal tears. But the research is not clear enough to be sure that it works. Botox (botulinum toxin) works by making the muscle in the anus weaker, so it's less likely to tighten up. You may get some pain and bleeding after Botox injections. About 6 in 100 people are unable to control wind for about two weeks after Botox injections. And about 4 in 100 are less able to control their bowels for a week.

Diltiazem and nifedipine are medicines called calcium channel blockers. They're usually used to treat high blood pressure. Diltiazem and nifedipine seem to work as well as GTN ointment for treating anal tears. These treatments are usually rubbed on the anus as an ointment, or they can be taken as tablets. You'll need a prescription from your doctor to get these drugs. They're unlikely to cause headaches in the same way that GTN can. And ointments are less likely to cause side effects than tablets. In one study, 1 in 3 people who took diltiazem tablets felt sick, vomited, or had headaches or a rash. But no one who used diltiazem ointment had these side effects.

Surgical treatments

There are two types of operation for anal tears. They are both simple operations and can be done with a local anaesthetic.

The most common is **surgery on the anal muscle**. It helps heal anal tears in about 9 in 10 people. This operation is called an internal anal sphincterotomy. It works better than treatment with GTN ointment or Botox injections. The surgeon makes a small cut in the anal muscle to weaken it, so it's less likely to tighten up.

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This surgery can have side effects. About 1 in 10 people lose full control over their bowels (incontinence). Many people have flatus incontinence. This means they can't fully control wind coming from their anus. But these problems usually go away fairly quickly.

Surgery with a skin patch seems to work well, but it isn't often used. It's still being studied. Doctors call this operation an anal advancement flap. The surgeon stitches healthy skin over the tear. More research is needed to see how well it works.

What will happen to me?

About 8 in 10 people with an anal tear get better with simple treatments such as taking warm baths and changing what they eat. This usually happens in about three weeks.

Chronic tears are less likely to heal with simple treatments. Most people who have chronic tears need treatments to help relax the muscle that controls their anus.

Surgery works for about 9 in 10 of the people who need it. But there hasn't been much research to show how many people get tears again afterwards.

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