Management of complicated Anorectal Diseases

Colorectal Department of Taleghani hospital
Shahid Beheshti University of medical science
Tehran
Iran
A 28-year-old female presents to your clinic with rectal bleeding and extreme anal pain with bowel movements that lasts for hours afterward.

These symptoms have been present for 6 months since the birth of her first child.

She reports intermittent constipation, and the pain is partially relieved with hydrocortisone creams and sitz baths.

During physical exam, gentle exposure of the anal verge reveals an anteriorly located fissure.

Given the chronicity of her symptoms, she desires surgery. What is your next step
If you don’t think of these things, you will miss them

- Intersphincteric abscess
- Crohns ulcer
- Anal SCC
- Syphilis
Closed Sphincterotomy

Lateral Internal Sphincterotomy

Anal sphincter stretch

Combined fissurectomy and Botox injection
Fissurectomy and V–Y advancement flap

Four months after surgery

Table 1 - Short/long term follow-up outcomes.

<table>
<thead>
<tr>
<th>Symptoms</th>
<th>3rd month</th>
<th>6th month</th>
<th>12th month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain</td>
<td>13.3%</td>
<td>3.3%</td>
<td>0</td>
</tr>
<tr>
<td>Wound dehiscence</td>
<td>3.3%</td>
<td>3.3%</td>
<td>3.3%</td>
</tr>
<tr>
<td>Wound infection</td>
<td>3.3%</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Fecal incontinency</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Original Article

Evaluation of outcomes in fissurectomy and V–Y advancement flap for the treatment of chronic anal fissure

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