

What are Minor Ano-Rectal Surgical Procedures?

Minor Ano-Rectal Surgery refers to surgical interventions on the back passage (anus and rectum) lasting less than 30 minutes and performed as day-cases. Typical examples are: excision of anal skin tags, incision and drainage of a perianal abscess, surgical removal of perineal/anal warts, excision biopsy of anal or perineal lesions, as well as other procedures described elsewhere such as haemorrhoid operations, lateral sphincterotomy and anal fistula surgery.

How Long Will I Be In Hospital?

As this is a day case procedure you will be expected to go home on the day of your surgery. Some patients with significant co-existing medical conditions or whose surgery takes place late in the day might be kept in overnight, but this is exceptional.

Before The Operation

Prior to admission you will need to have a pre-operative assessment. This is an assessment of your health to make sure you are fully prepared for your treatment and discharge. The pre-operative assessment nurses will help you with any worries or concerns that you have and will give you advice on any preparation needed for your surgery.

If you are undergoing a general anaesthetic you will be given specific instructions about when to stop eating and drinking, please follow these carefully, otherwise this may pose an anaesthetic risk and may mean we will have to cancel your surgery. You should bath or shower before coming to hospital.

On admission a member of the nursing staff will welcome you. The nurses will look after you and answer any questions you may have. You will be asked to change into a theatre gown. Prior to surgery you may need to have an enema (a liquid medication given into the back passage to empty the bowel).

The surgeon and anaesthetist will visit you and answer any questions that you have.

A nurse will go with you to the anaesthetic room and stay with you until you are asleep. A cuff will be put on your arm, some leads placed on your chest, and a clip attached to your finger. This will allow the anaesthetist to check your heart rate, blood pressure and oxygen levels during the operation. A needle will be put into the back of your hand to give you the drugs to send you to sleep.

After The Operation

Your blood pressure, pulse and wounds will be monitored closely over the first few hours. You will normally be able to start drinking shortly after the procedure, and can start eating as soon as you are hungry. You will normally be able to get out of bed a few hours after surgery, although the nurses will assist you the first time.

Some pain is to be expected, and can be quite significant. The nurses will give you painkillers and monitor your pain. If a dissolvable anal plug has been used this will be

Enquiries: 07500870587 or 01519295181 enquiries@wirralsurgeon.co.uk www.wirralsurgeon.co.uk

Information on Minor Ano-Rectal Surgical Procedures



passed on your first bowel movement. A small amount of bleeding is also to be expected. The nurses will monitor the wound site and if necessary provide pads to protect your clothes from marking.

If your operation is planned as a day case you can go home as soon as the effect of the anaesthetic has worn off. A general anaesthetic can temporarily affect your coordination and reasoning skills so you will need a responsible adult to take you home and stay with you for the first 24 hours. During this time it is also important that you do not operate machinery, drive or make important decisions. Before your discharge the nurse will advise you about your post-operative care and will give you a supply of painkillers and laxatives. Your GP will be notified of your treatment.

If a hospital follow-up appointment is required you will be notified of this prior to discharge and an appointment card given to you.

What Activities Will I Be Able To Do After My Surgery?

You can return to normal physical and sexual activities when you feel comfortable; this normally takes 1-3 weeks but sometimes longer.

It is generally advised that patients do not undertake any strenuous physical activities for 2 weeks after surgery. After this period the intensity of physical exercises should be increased gradually. If you develop local discomfort or pain you should stop what you are doing and rest.

It is not recommended that you go swimming in a public pool until the wounds have healed completely.

How Much Pain Can I Expect?

At times the pain may be significant, so taking regular painkillers will help. Warm baths may also help reduce the discomfort. You may experience discomfort for up to six weeks after the operation.

Bowel Action And Personal Hygiene

It is important to maintain a regular bowel movement that should be well formed but soft. Continue to take laxatives for two weeks after your surgery. Eating a high fibre diet and increasing your fluid intake will also help. You will normally open your bowels within two to three days of your operation although this may be uncomfortable at first. You may notice blood loss after each bowel movement but this will gradually reduce over the next few weeks.

It is important to keep the operation site clean. If possible, wash after each bowel action for three to four weeks after the operation. Bathing once or twice a day is also soothing and may reduce discomfort. The cut area may take a month or more to heal properly and during this time there may be a slight discharge. Wearing a small pad inside your pants will protect your clothes from any staining.

Enquiries: 07500870587 or 01519295181 enquiries@wirralsurgeon.co.uk

www.wirralsurgeon.co.uk



Driving

You must not drive for at least 24 hours after surgery. Before driving you should ensure that you are able to perform an emergency stop, have the strength and capability to control the car, and be able to respond quickly to any situation that may occur. Many patients are able to drive within 48 hours after surgery and most within 1-2 weeks.

Return To Work

You can return to work as soon as you feel well enough. This could depend on type of work that you do. Typically you will need one to three weeks off work. You might need longer to recover if your job involves a loft of physical activity or sitting for prolonged periods of time.

Significant, Unavoidable And Frequently Occurring Risks After Minor Ano-Rectal Surgery

Minor ano-rectal surgical procedures are generally very safe operations with few risks, but, as with any surgical procedure, complications do occasionally occur; less than 1% patients need to have a second anaesthetic to attend to a complication. Immediately after the operation, a few patients find it difficult to pass urine and a catheter may be required to empty the bladder. If you suffer from urinary symptoms due to a large prostate you might be at increased risk of urinary problems after surgery. Around 5% of patients experience more bleeding than usual and this may need readmission to hospital for observation or, rarely, another operation. Infection is very rare.

It is extremely common to experience some pain after ano-rectal surgery. This can be made worse by avoiding opening your bowels or constipation. We will provide several painkilling medications, and laxatives to help soften your bowel motions.

In the period following your operation you should contact us on 07968228831 or your GP if you notice any of the following problems:

- increasing pain, redness, swelling or discharge
- severe bleeding
- constipation for more than three days despite using a laxative
- difficulty in passing urine
- high temperature over 38°C or chills
- nausea or vomiting.

Enquiries: 07500870587 or 01519295181 enquiries@wirralsurgeon.co.uk

www.wirralsurgeon.co.uk