



ANORECTAL ABSCESS



BASIC INFORMATION

DESCRIPTION

An abscess (collection of pus due to infection) that develops in the area around the anus and rectum. They may occur on the edge of the anal opening or deep in the rectum. They are more common in men, and are also common in people with digestion problems.

FREQUENT SIGNS AND SYMPTOMS

- Swelling around the rectum.
- Redness around the rectum.
- Dull or throbbing pain around the rectum.
- Difficulty or pain with bowel movement.
- Unable to sit comfortably.
- Fever.
- Bleeding or discharge if abscess ruptures.

CAUSES

Bacterial infection. It may occur in the glands in the rectum that produce mucus. Bacteria in the stool can also infect a scratch or cut in the skin or in the rectum.

RISK INCREASES WITH

- Food such as eggshell or fish bone, or swallowed object such as a paper clip. They can cut the skin as they pass in a stool.
- Constipation.
- Hemorrhoids or an injection to treat them.
- Use of enemas. Enema tips can damage skin.
- Foreign objects in the rectum.
- Anal sex.
- Diseases of the bowel.
- Weak immune system due to illness or drugs.

PREVENTIVE MEASURES

Cannot always be prevented. Avoid risk factors where possible.

EXPECTED OUTCOMES

With treatment, complete healing in six months, if there are no complications.

POSSIBLE COMPLICATIONS

- An extra opening (fistula) may develop between the anus and the outside of the body.

- Abscess may return if the cause is not corrected.
- Incontinence of stool (unable to control bowel movements).



DIAGNOSIS & TREATMENT

GENERAL MEASURES

- Your health care provider can diagnose the abscess with a physical exam of the affected area. Medical tests are usually not needed, but may include an X-ray or internal exam of the rectum with a special instrument.
- Treatment most often involves outpatient surgery to open and drain the abscess. For an abscess deeper in the rectum, the patient may need to be hospitalized and put to sleep for surgery.
- Follow your health care provider's instructions for changing bandages and other care after surgery. Keep that area of the body clean.
- Sitz baths every 2 to 4 hours after surgery. Sit in a bathtub with 6 to 8 inches of warm water for 20 minutes.
- Use warm compress as needed for pain.
- Have a bowel movement when you need to, even though you may anticipate pain.

MEDICATIONS

Drugs may be prescribed for pain, infection, and to help prevent constipation.

ACTIVITY

Move legs often as you recover from surgery. Return to normal activities as soon as possible after surgery.

DIET

An increase in fiber in the diet may help lower the risk of constipation. Drink plenty of fluids.



NOTIFY OUR OFFICE IF

- You or a family member has symptoms of anorectal abscess.
- New or unexplained symptoms develop after surgery.