

## Rectal Fistulotomy

### WHAT YOU NEED TO KNOW:

**What do I need to know about a rectal fistulotomy?** A rectal fistulotomy is surgery to heal a fistula near your anus. A rectal fistula is a tunnel-like wound that forms next to your anus. It spreads from inside your rectum to the skin surface near your anus. A rectal fistulotomy is used to open and drain the fistula. The wound heals by filling in with scar tissue. Your surgeon may also drain an abscess during your surgery.

### How do I prepare for surgery?

- Your surgeon will tell you how to prepare. He or she may tell you not to eat or drink anything after midnight on the day of surgery. Arrange to have someone drive you home after you are discharged from the hospital.
- You may need to take an antibiotic before surgery to prevent a bacterial infection.
- You may need lab tests or an ultrasound before your surgery. An ultrasound is a machine that uses sound waves to take pictures of your rectum and anus. This will help your surgeon see inside your rectum. Your surgeon may need to look inside your rectum with a scope to find your fistula. This scope is a long, bendable tube with a camera on the end. If this is painful, you may be given this exam during surgery when you are asleep. Ask your surgeon for more information about these and other tests you may need.
- Tell your surgeon if you have any other medical conditions, such as bleeding problems or cancer. Tell him or her if you had any anal or rectal surgeries.
- Your bowel may need to be emptied and cleaned out before the surgery. Healthcare providers will give you a liquid medicine called an enema. This will be put into your rectum to help empty your bowel.
- An anesthesiologist may talk to you before your surgery. This healthcare provider may give you medicine through your IV to make you sleepy before your surgery and to keep you asleep during your surgery. You may instead get medicine through an injection in your spine. This will make you numb from the waist down. Tell healthcare providers if you or anyone in your family has had problems with anesthesia.

### What will happen during surgery?

- You will be placed on your stomach or on your back with your feet in stirrups. Your surgeon will use a finger to guide a probe into your fistula. He or she may also need to inject contrast liquid into the fistula to help find the opening in your rectum. Your surgeon will insert a tool to hold the fistula open. This will help the probe move through it more easily.
- Your surgeon will use the probe as a guide to cut along the length of the fistula. He or she will use a tool to scrape out any tissue buildup from your fistula. He or she may also need to cut open and drain any abscesses (pockets of pus). The skin around the fistula will be held open with stitches, surgical glue, or heat (cauterization). This allows the fistula to heal from the inside

out. Your stitches will dissolve and will not need to be removed.

- Your surgeon may inject numbing medicine into your incision area. This will help ease pain and stop the bleeding when you wake up. He or she may also place a thread-like material called a seton inside your fistula. Setons allow fluid to drain out of the fistula as the area heals. Your healthcare provider may pack the area inside your rectum with gauze to help absorb any fluid or blood. He or she may also cover the wound on your anus with a bandage.

**What should I expect after surgery?** You will be taken to a recovery area where healthcare providers will watch you until you are alert. You may be able to go home if you have enough fluids in your body. You may need to stay in the hospital overnight if you have severe pain or need fluids.

- **Medicines** may be given to prevent or treat pain or a bacterial infection. You may also need medicine to prevent constipation. This medicine will make it easier to have bowel movements.
- **A sitz bath** may be used before you go home. A sitz bath is a pan that holds warm water and fits in the toilet bowl. Sitz baths help keep your wound clean and may ease your pain.
- **You will be able to drink liquids and eat certain foods** when your stomach function returns after surgery. You may be given ice chips at first. Then you will get liquids such as water, broth, juice, and clear soft drinks. When you can eat soft foods easily, you may slowly begin to eat solid foods.

**What are the risks of a rectal fistulotomy?** You may have severe pain after your surgery. You may lose bowel movement or gas control if the sphincter in your anus is cut. You may develop a skin infection or bleeding after surgery. Rarely, you may not be able to urinate as easily as before. You may also get a urinary tract infection. Your rectal fistula may come back, even after surgery. You may need more than one surgery to help heal the fistula. You may have chronic (long-term) drainage. Your healing may be delayed if you have Crohn disease.

#### **CARE AGREEMENT:**

You have the right to help plan your care. Learn about your health condition and how it may be treated. Discuss treatment options with your healthcare providers to decide what care you want to receive. You always have the right to refuse treatment. The above information is an educational aid only. It is not intended as medical advice for individual conditions or treatments. Talk to your doctor, nurse or pharmacist before following any medical regimen to see if it is safe and effective for you.

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