

ANAL AND PELVIC PAIN

Pain from the anal region can cause a lot of concern, as it is an unusual experience. The nature of the pain can often be a clue as to the underlying cause. See a **COLORECTAL SURGEON** to properly investigate and manage this condition.

TYPES AND COMMON CAUSES OF PAIN

- A knife-like pain when you pass a bowel motion which may last for 10–15 minutes afterwards is probably caused by an **anal fissure**. Some people describe it as like ‘passing glasses.’ In addition to the pain, you may notice some bright red blood on the toilet paper.
- A similar knife-like pain can be caused by the **herpes simplex virus**.
- A nagging, aching discomfort made worse by defecation could be due to **hemorrhoids**.
- Burning pain and itching in the skin around the anus might be a skin condition known as **pruritis ani**.
- A throbbing pain, worsening over 1-2 days and bad enough to disturb your sleep, is likely to be caused by an **anal abscess**.
- Sudden severe spasms of anal pain felt deep in the anal canal lasting seconds to minutes, with no pain between episodes is probably a condition called **proctalgia fugax**.
- A dull aching pain or discomfort of the anus, that lasts more than 20 minutes, and frequently hours to days, may be due to **levator ani syndrome**.
- Pain over the ‘tail-bone (coccyx)’ may be due to **coccygodynia**.
- A continuous aching pain in the anus in which all of the above causes have been excluded, suggests referred pain caused by a back problem (when a part of the spine presses on a nerve).

ANAL FISSURE, simply put, is a cut. It is in an area that requires constant use. Because the anal canal is richly innervated with sensory pain fibers, a fissure is often very painful.



Anal fistula Anal fissures Anal abscess **Anal Fissure**

A fissure is usually caused by a hard stool. This stretches and tears the opening. Anal fissures result in severe pain on defecation, with anal sphincter spasm, and further tearing. This often leads to the avoidance of defecation, establishing a vicious cycle of constipation and repeated anal fissuring.

Medical treatment includes avoidance of constipation by fiber supplement, laxatives, and stool softeners; and application of Nifedipine ointment to relax the sphincter muscles. If not healed by medical treatment then surgical treatment options include: Botox injection to relax sphincter muscles, cutting the sphincter muscles partially, and advancement flap.

HERPES SIMPLEX VIRUS INFECTION of the anal region can produce a pain similar to an anal fissure. Herpes can infect the anal area, either spread by the hands from a cold sore on the face or transmitted as a sexual infection. The soreness occurs in episodes, each lasting for a few days. Treatment may include topical application of 5% acyclovir (cold sore) ointment.

HEMORRHOIDS are a normal part of the anatomy that we are born with. We have two sets; internal and external. Symptomatic hemorrhoids are swollen (enlarged, dilated) veins inside and outside the anus. Hemorrhoids are usually caused by increased pressure, such as straining when constipated. Hemorrhoids may cause pain, bleeding, blood clots, and itching.



Hemorrhoid

Medical treatment includes avoidance of constipation by fiber supplement, laxatives, and stool softeners; and application of topical hemorrhoidal and steroid ointments. Surgical treatments include office based rubber banding and injection sclerotherapy, and operative room ligation and excision.

Sometimes development of a blood clot in the external hemorrhoids can give sharp throbbing pain which develops acutely. In such cases the best treatment is to get the thrombosed hemorrhoids excised which can be done in the office under local anesthesia.

ANAL PRURITIS (also known as “pruritis ani”) is persistent itching of the skin around the anus. This condition can cause intolerable discomfort. Regardless of cause, the problem is exacerbated by a self-escalating “itch-scratch-itch” cycle.

Causes include over cleaning, which can remove natural oils that protect the skin, increased moisture, food and drinks (mainly coffee), anorectal conditions such as hemorrhoids, rectal polyp, rectal prolapse, proctitis, incontinence, warts, yeast infection, pre cancerous and cancerous conditions of the anal canal.

Treatment includes avoiding soap, dietary restrictions, keeping area dry, avoid scratching, anti fungal and steroid creams.

ANAL ABSCESS results when an anal gland becomes infected. It causes severe pain in the region around the anus. There may also be discharge of pus or blood from the anus with an offensive odor. This collection can happen in the anatomical spaces around the anal canal.

Anal abscess is treated by making an opening in the skin near the anus to drain the pus from the infected cavity and thereby relieve the pressure. Often this can be done in the office using local anesthetic.

PROCTALGIA FUGAX is characterized by severe, episodic, anal pain. It commonly occurs at night time, causing waking from sleep. It is typically severe and lasts for a few seconds to minutes. It can be caused by a spasm or cramping of the anal sphincter muscles. It is a diagnosis of exclusion, and provided other conditions that cause anal pain are excluded, then the approach is generally simple reassurance and symptom control.

Treatment includes warm bath, sphincter spasm breaking medications (Diltiazem, Valium), and Botox injection.

LEVATOR ANI SYNDROME is a condition which more often affects women than men, and is thought to result from spasm of the upper most layer of the anal sphincter (puborectalis muscle). It typically causes a dull aching pain or discomfort of the anus that lasts more than 20 minutes and frequently hours to days. It is often exacerbated by sitting for long periods or lying down, and relieved by walking.

Examination of the anus is usually unremarkable with only palpable tenderness of the levator ani muscles, signifying puborectalis spasm. Anal manometry typically shows increased anal pressures.

The aim of treatment is to reduce anal canal or levator ani tension. Hot sitz baths have been shown to be of some use, on their own, as well as in combination with massage and muscle relaxants (diazepam). Digital massage of the muscle, electrogalvanic stimulation by a rectal probe, and biofeedback regimes utilizing pressure-measuring probes can be tried.

COCCYGYDYNIA refers to pain over the ‘tail-bone’ (coccyx). It is more common in women, and can result from the trauma occurs after a fall or childbirth. It may result from an abnormally large coccyx, or may result from a mobile coccyx. Occasionally it results in chronic arthritis, or bursitis, or the development of a bony spicule that can lead to more chronic pain.

Treatment includes analgesics medication that may help reduce pain and inflammation. Hot sitz baths and donut cushions for sitting, to reduce direct pressure on the coccyx, can often alleviate pain. If medical treatment does not work then steroid injection and amputation of coccyx can be performed.

Anal and pelvic pain can be annoying and affect your daily life and in worst cases can even cripple you. See a **COLORECTAL SURGEON** to discuss the management options.



Hemorrhoid Treatment

Siouxland's only Colorectal Surgeon, Gokul Subhas, MD, with UnityPoint Clinic, offers office based treatment options for conditions such as hemorrhoids and rectal bleeding.

Trained in the most advanced techniques, he also provides minimally invasive surgery, allowing for a faster recovery.

UnityPoint Clinic® - Colorectal and General Surgery

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 **UnityPoint Clinic**

Other conditions treated:

- Colonoscopy Screening
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- Abdominal Pain
- Irritable Bowel Disorder
- Fecal Incontinence
- Constipation & Diarrhea
- Anal Fissure
- Anal Abscess & Fistula
- Diverticular Disease
- Colon & Rectal Cancer
- Crohn's & Colitis
- Pilonidal Disease
- Perianal Warts