



Procedure Information Sheet

Introduction

Fistula is a channel connecting two cavities. Anal fistula is an abnormal channel connecting gut to the outer skin around the anus. The cause is unknown. Most patients had a history of anal abscess. People suffering from anal fistula need a surgery, namely fistulectomy as definitive treatment.

The Operation / Procedure

Patient will be under general anesthesia for this surgery. The surgeons cuts and scrapes the inflamed tissue around the fistula leaving an open wound packed with gauze soaked with disinfectant solution. Daily wound dressing is necessary until the wound heals spontaneously.

Before the Operation / Procedure

1. Discuss with doctor in charge about the operation management, nature of operation and possible risks. Read through and understood this information sheet and complete the consent form.
2. Patient may need physical check-up or examination such as blood tests, urine tests, chest x-ray or electrocardiogram etc.
3. Pre-operative anesthetic assessment about the anesthetic management, nature of anesthetic and possible risks and complete the anesthetic consent form.
4. If required, the body hair around the anus might be clipped.
5. Patients might need to have rectal enema before surgery.
6. You need to have shower and a hair wash.
7. Keep fast for 6-8 hours before operation to avoid risk of aspiration.
8. Follow doctor's advice for pre-medication.
9. Take off underwear and change to operation gown, socks and cap, remove denture, contact lens and jewellery (including hair pins, ear rings and ring etc.).
10. Empty bladder before transfer to Operating Theater.

After the Operation / Procedure

1. Patient who has undergone general anesthesia may have fatigue, nausea or vomiting. And if the symptoms persist or aggravates, please inform the nurse for assistance.
2. Resume diet when fully awake.
3. Please also inform and request the nurse for prescribed oral or parenteral analgesic if there is pain.
4. In general, the wound will not be closed or sutured. It will be packed with gauze fully soaked with disinfectant solution. Initially, some bloody discharge might be come out from the wound and daily wound dressing and sitz bath is required and as doctor order.
5. The patient can take shower as usual. But the area around the anus should be kept dry at all times.
6. Please follow instructions for medications prescribed.
7. Take enough water and balanced diet. Eat more high fiber foods such as oatmeal, bananas, vegetables, etc., in order to maintain a good bowel habit.
8. Please attend the doctor clinic for regular wound dressing and follow-up consultation at the specified time and date.

⌈ **Patient's Label** ⌋

Patient Name: _____

Hospital No: _____

Episode No: _____

⌋



Risk and Complications

1. Complications of general anesthesia
 - 1.1 Cardiovascular complications: myocardial infarction, myocardial ischemia, stroke, venous thrombosis, pulmonary embolism, etc.
 - 1.2 Respiratory complications: pulmonary atelectasis, pneumonia, asthma, chronic obstructive airway disease attack.
 - 1.3 Allergic reaction and shock might also occur.
2. Complications related with surgery
 - 2.1 1-2% of patients might have fecal incontinence.
 - 2.2 1-2% of patients appear fart out of control.
3. Recurrent of fistula.

Disclaimer

This leaflet only provides general information pertaining to this operation / procedure. While common risks and complications are described, the list is not exhaustive, and the degree of risk could also vary between patients. Please contact your doctor for detailed information and specific enquiry.

Reference

Champagne, B. J., Weiser, M., & Chen, W. (2019) Operative management of anorectal fistular. UpToDate. Retrieved on 8/6/2020 from <https://www.uptodate.com/contents/operative-management-of-anorectal-fistulas>

Patient's Label
 Patient Name: _____
 Hospital No: _____
 Episode No: _____

Patient's Signature: _____ Date: _____