

## Characteristics and Clinical Management of Female Patients with Fissure in Ano in Al-Kadhimiya City, Baghdad

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### Abstract

<b>Background</b>	Fissure in ano is a common painful anal problem in female patients.
<b>Objective</b>	To study the sociodemographic variables of female patients with fissure in ano, and to identify the characteristic of anal fissure and their treatment among those patients in Al-Imamian Al-Kadhimiyan Medical City and two private hospitals.
<b>Methods</b>	This is a prospective study that was carried out from May 2008 to May 2011. Two hundred fifty female patients with fissure in ano were interviewed regarding their age, marital state, address, level of education, clinical presentation and the subsequent management.
<b>Result</b>	The commonest age of presentation in females was between 21-30 years. 78% of them were living at the peripheral areas of north of Baghdad, and 79.6% were of low level of education (primary school or below). The prevalence was found more in women with high parity especially when their child delivery was supervised by a midwife in their location. All patients have presented with anal pain, 55% were associated with bleeding per rectum and 64.2% with constipation. The location of fissures was 51.6% anterior, 48% posterior, 0.4% lateral in position. Less than half of patients underwent a surgical treatment. 77% of them were treated by lateral dilatation under anesthesia and 23% by lateral sphincterotomy.
<b>Conclusion</b>	Factors which had an impact on the clinical course and management of fissure in ano in female patients were found to be the social status, the level of education and the parity, therefore to prevent this illness, a cooperation between the health services and the family health center and the government is necessary in order to overcome such a common problem.
<b>Keywords</b>	Fissure in ano, Female

### Introduction

**F**issure in ano is a tear in the anoderm distal to the dentate line. The pathophysiology of the anal fissure is thought to be related to a trauma from either the passage of a hard stool or a prolonged diarrhea. A tear in the anoderm causes spasm of the internal anal sphincter which results in pain, increased tearing, and decreased blood supply to the anoderm. This cycle of pain, spasm, and ischemia contributes to development of a poorly

healing wound that becomes a chronic fissure. The vast majority of anal fissures occur in the posterior midline, 10-15% occurs in the anterior midline and less than 1% of fissures occur off midline<sup>(1)</sup>.

The posterior anal canal is the most poorly perfused part of the anal canal. The delicate blood supply is further compromised, thus rendering the posterior midline of the anal canal relatively ischemic. The fissure is just a tear in the anal mucosa and is defined as an acute anal