Having treatment for your perianal abscess and your recovery

This leaflet explains what a perianal abscess is and what treatment may have been recommended for you. It explains the benefits, risks and alternatives available. If you have any questions, please speak to a doctor or nurse caring for you.
What is a perianal abscess?
An abscess is a painful, swollen area containing pus (a yellow/green liquid produced by infected tissue). A perianal abscess is an abscess found near your anus (the opening of your bottom/back passage).

What causes a perianal abscess?
An abscess can develop where a cyst (small lump) has been in place for some time, or an area where an infection has occurred. Often, a small gland just inside the anus becomes infected, and the abscess develops. Crohn’s disease can make these infections more likely.

The symptoms of an abscess
The main symptoms are pain and irritation around your anus, swelling and a pus discharge. Other symptoms may include a fever and feeling ill in general.

How are they treated?
Your abscess can be treated by draining the pus. This is done under a general anaesthetic in an operating theatre. The surgeon can check where the abscess is, drain it effectively and prevent it returning.

An opening is made in the skin to relieve the pressure, remove the infected tissue. The area is then cleaned.

Other options for treatment
Surgery is often the only way to treat the abscess and remove all the infected tissue. Some may drain by themselves and not need any surgery. Your surgeon will discuss the options with you.
Before surgery
You may have come into the Emergency Department (A&E) with your abscess, or through a clinic. You might be asked to come to a pre-assessment clinic before your surgery to check your health, ask you questions about your medical history and discuss the surgery with you in more detail. Your doctors may also do this on the ward. Please ask us questions if you are uncertain about anything.

The surgery does not take long and is often performed as a day case. This means that you can come to hospital, have your operation and leave on the same day.

Consent – asking for your consent
We want to involve you in decisions about your care and treatment. If you decide to go ahead, you will be asked to sign a consent form. This states that you agree to have the treatment and you understand what it involves.

If you would like more information about our consent process, please speak to a member of staff caring for you.

Are there any risks?
Your surgeon will discuss the risks with you before asking you to give your consent for the surgery. The specific risks for you will depend on where the abscess is. It may involve the anal sphincter muscles, which help you control your bowels and maintain your continence. If these muscles are damaged by the infection, you may have difficulty controlling your bowel movements (poo) or passing wind. This could be a temporary problem, or a longer-term one.
The abscess may also become a fistula, which is a connection, tunnel or several tunnels, between your bottom skin and anal canal/rectum.

The abscess or cyst may return, even after surgery. The other complications can be bleeding, problems with your wound (including delayed healing) and scars. Your surgeon will go through these risks with you.

You will have the operation under general anaesthetic. Please see our leaflet Having an anaesthetic for information about what this involves and the risks. The anaesthetist will discuss this with you.

After your surgery
It is important that you rest for the remainder of the day. You will need a friend or family member to travel home and stay with you for at least 24 hours after your surgery. You should have received the leaflet, Having surgery at Guy’s and St Thomas’ hospitals. If you have not, please ask for a copy.

If you need to stay in hospital after your surgery, your doctor or nurse will tell you when you will be able to leave hospital.

Will you have a dressing?
Yes, you will have a dressing over the wound after your surgery. Your surgeons and the nurses looking after you will be able to explain what dressings you need, how often these should be changed and, if you have stitches, when/if these need to be removed.
You may also have had a Seton stitch inserted. If the abscess is a fistula, instead of cutting it out, the surgeon will clean the area and insert a Seton stitch. This is to allow the abscess to fully drain, without causing damage to the anal sphincter muscles.

**What follow-up care will you have?**

We normally arrange for you to be seen by a specialist in the hospital about 6 weeks after your surgery. This is to check the wound, stitches and dressings. We will send you this appointment in the post when you are discharged from hospital.

If you have not heard about your follow-up appointment within 2 weeks of your operation, please telephone the GI Surgical Access Centre, **tel:** 020 7188 8875 (option 3) and ask for an appointment on the Tuesday morning clinic.

**Specific instructions for you**

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Will you have any pain?
As with all surgery, you should expect some discomfort. It can be quite painful for the first couple of days, and it may seem to get worse before it starts to feel more comfortable again, but the pain will ease. When you leave the ward or Day Surgical Unit we may give you:

- **painkillers to take home.** It is important that you take your prescribed painkillers regularly to keep you as comfortable as possible. However, the tablets are not compulsory and if you only have a little pain you may not need to take them. Always follow the instructions on the packet and never take more than the recommended dose.

- **a course of antibiotics** to prevent infection and reduce your pain. Always complete the prescribed course of any antibiotics. Please make sure that you have told the doctor if you are allergic to any antibiotics, and always ask if you are unsure about any of your medicines.

- **laxatives.** This medication will encourage bowel movement and help to keep your stool soft after the surgery. You may not need these - your surgeon will decide what is appropriate for you.

What you should expect when you go to the toilet
After this surgery, you should be able to go to the toilet and open your bowels normally when you get the urge to.
**Returning to work and normal activities**
This depends on how you feel and how active your job is. Do as much as you feel able to, but avoid any strenuous activity such as lifting, exercise or running during the first week or so. Build up to your normal level of activity gradually.

You should not go swimming until your wound has healed. However, you can have sex as soon as you feel comfortable. Do not ride a bicycle for 6-8 weeks after your surgery.

**Keeping your wound site clean**
It is important to keep the area of the operation clean. We recommend that you gently bathe your wound in a warm bath every day. This is a good time to change your dressings which might also help with your pain.

Do not use soap or put salt or any perfumed products in the water until your wound has healed, as they can irritate the wound site. Do not be alarmed if you notice blood in the bath, as this is quite normal and will reduce in time.

**Who to contact if you have a problem or question**
If you experience persistent bleeding from your wound, you can contact the ward or department where you were treated. Call the switchboard, tel: 020 7188 7188 and ask for the relevant ward. Out of hours, you should contact you GP or nearest Emergency Department.

If you feel generally unwell or experience a fever (high temperature), you should see your GP or nearest Emergency Department. Your follow-up appointment can also be brought forward if necessary.
Further sources of information

CORE is a charity offering information on digestive disorders and bowel problems, such as Crohn’s disease and inflammatory bowel syndrome (IBS).

tel: 020 7486 0341, email: info@corecharity.org.uk
web: www.corecharity.org.uk

Contact us

If you have any queries, please telephone the GI Surgical Access Centre, tel: 020 7188 8875 (option 3)

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit web: www.guysandstthomas.nhs.uk/leaflets

Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline, tel: 020 7188 8748, Monday to Friday, 9am-5pm, email: mymedicines@gstt.nhs.uk

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS),
tel: 020 7188 8801, email: pals@gstt.nhs.uk.
To make a complaint, contact the complaints department, tel: 020 7188 3514, email: complaints2@gstt.nhs.uk

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