

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. Please speak to your doctor or nurse if you have any questions.

What is a perianal abscess?

An abscess is a painful swollen area containing pus, which is a yellowish/green liquid produced by infected tissue. A perianal abscess is an abscess found near your anus (the opening of your bottom/back passage).

What are the causes of a perianal abscess?

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

What are the symptoms of a 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 from the infected cavity. This is performed under a general anaesthetic in the 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 and clean the area.

Are there any alternative treatments?

Surgery is often the only way to treat the abscess and remove all the infected tissue. However, some may spontaneously drain by themselves and not need any surgery. Your surgeon will discuss the options with you.

Before the operation

You may have come into the emergency (A&E) department with your abscess, or through a clinic. You maybe asked to attend a pre-assessment clinic before your operation 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.

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 operation. 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 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, or 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 operation

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 information leaflet, **Surgical Admissions Lounges and Day Surgery Units at Guy's and St Thomas' hospitals**, if not please ask for a copy.

If you need to stay in hospital following your operation, you will receive the leaflet, **Preparing for your stay at Guy's and St Thomas'**, which provides advice on how to prepare for an overnight stay in hospital. In this situation, your doctor or nurse will tell you when you will be able to leave hospital.

Will I 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 require, 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 will be cleaned and insert a 'seton stitch'. This is to enable the abscess to fully drain, without causing damage to the anal sphincter muscles.

What follow-up care will I receive?

We normally arrange for you to be seen by a specialist in the hospital six weeks after your operation. 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 two weeks of your operation, please telephone the GI Surgical Access Centre on **020 7188 8875 (option 3)** and ask for an appointment in Fiona Hibberts' Tuesday morning clinic.

Specific instructions for me:

Will I 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 like it gets worse before it starts to feel more comfortable again, but the pain will ease. When you leave the ward or DSU we may give you:

- **Painkillers.** We may give you some painkillers to take home with you. 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 have little pain you may not need to take them. Always follow the instructions on the packet and never take more than the recommended dose.
- **Antibiotics.** We may give you a course of antibiotics to take 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 operation. However, you may not need these; your surgeon will decide what is appropriate for you.

What should I expect when I go to the toilet?

You should be able to go to the toilet and open your bowels normally after this operation, when you get the urge to do so.

When can I return 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 six to eight 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, if you can link this in with removal of the dressings and replacing new ones. This may 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 these 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 should I contact if I have a problem or any questions or concerns?

If you experience persistent bleeding from your wound, you can contact the ward or department where you were treated by calling the switchboard on **020 7188 7188** and asking for the relevant ward. Out of hours, you should contact your GP or local emergency department (A&E).

If you feel generally unwell or experience a fever (temperature), you should see your GP or local A&E department. Your follow-up appointment can also be brought forward if necessary.

Further information

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

t: 020 7486 0341

e: info@corecharity.org.uk

w: www.corecharity.org.uk

Contact us

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.

t: 020 7188 8748 9am to 5pm, Monday to Friday

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints)

e: complaints2@gstt.nhs.uk

Language and Accessible Support Services

If you need an interpreter or information about your care in a different language or format, please get in touch:

t: 020 7188 8815

e: languagesupport@gstt.nhs.uk

NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.
t: 111

NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.
w: www.nhs.uk

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