

# Pre/Post Anal Surgery

( Some of these preparations described below may not be prescribed by your surgeon for or after surgery)



Before surgery the thinking is that we need to unburden the colon. We want to try for at least a day or two to not move your bowels past the area that we just operated on. We need to flush out either all or half of the colon free of stool. Therefore we ask that you have a light meal for breakfast and lunch. Drink lots of clear fluids with only small amounts

## **Foods Allowed on a Low Residue Diet:**

- refined grain products like white breads, cereals, and pastas (look for less than 2g of fibre per serving on label)
- white rice
- juices without pulp or seeds
- meats, fish, and eggs
- oil, margarine, butter, mayonnaise, and salad dressings
- fruit without peels or seeds and certain canned or well-cooked fruit (e.g., peeled apples, seedless peeled grapes, banana, cantaloupe, etc.)
- some soft, cooked vegetables (e.g., beets, beans, carrots, cucumber, eggplant, mushrooms, etc.)
- limit of 2 cups/day: milk, yogurt, puddings, cream based soups

Then the flush out occurs. We use purgatives like Pico-Salax to hold fluids inside the colon and wash things out from above.



Drink lots of fluids after you take the medicine, it will help with the flush out.

Dulcolax tablets are used to stimulate your bowels to empty.

We also recommend that if you think you are not clear that you wash out the rectum and left side of the colon with an enema available without prescription (**not** mineral oil; water or water based only). Sometimes, we forego the washout from above and just go instead with just enemas only. This is perfectly acceptable.

Cleansing enemas are water-based and meant to be held in the rectum for a short time to flush your rectum (the part of your colon immediately above the rectum) and perhaps the left colon, just above the rectum. Once injected, usually with you lying down with feet drawn up into a sitting position, they're retained for a few minutes until your body rids itself of the fluid, along with loose matter and impacted stool in your bowel.

Some of the most common cleansing enemas include:

**Water or saline.** The least irritating of all options, water or saline — salt water that mimics your body's sodium concentration — are used primarily for their ability to expand the colon and mechanically promote defecation.

**Epsom salt.** This is similar to a water or saline enema, but magnesium-rich [Epsom salt](#) is said to be more effective at relaxing bowel muscles and relieving constipation.

**Sodium phosphate.** This is a common over-the-counter enema that works by irritating your rectum, causing it to expand and release waste.



Keep these enema bottles afterwards washing them out with warm soapy water, as it's useful to gently wash out afterwards or help in the healing process, by injecting warmed aloe vera gel with a little bit of witch hazel into the rectum once or twice a day after surgery for about 1 to 2 months to allow maximum healing and comfort post surgery.

As you're undergoing anorectal surgery there is a very small risk that you may develop a blood clot in your legs or pelvis. You could develop swelling and pain in the legs or chest after surgery indicating a clot has developed where it shouldn't and perhaps travelled towards the heart) For routine ambulatory anorectal surgery in patients without an elevated risk for VTE, (Venous ThromboEmbolism = blood clots in the veins of your legs or pelvis) the American College of Chest Physicians evidence-based practice guidelines state that the use of early walking around alone is adequate for VTE prophylaxis.

We only get worried if you pass a lot of blood 🩸 dripping, or big blood clots, and even then only if it repeats several times or if you have chest pain, heart ❤️ feels like it's racing, shortness of breath or dizziness.

Infections are possible after all the area that we operate on is quite dirty with stool passing by the same day or perhaps if we're lucky the next day or the day after. Surprisingly there is a very low infection rate that requires surgery for abscess or fistula (this is where there is a abscess around the anus that begins either on the outside and progresses inward or begins on the inside and progresses outward). The way we decrease the risk for infection is to keep the area as clean as possible ca with running warm water with or without soap. They

should be done gently with flowing water in the shower or best done with some warm water in one of these portable wand sprays. This is an example:

<https://www.walmart.ca/en/ip/brondell-gospa-travel-bidet/6000104226271>

Additionally, starting about two days after surgery, at least once or twice a day a gentle warm irrigation of the area that we've operated on with a nasal aspirator using aloe vera mixed with some witch hazel. This can cleanse the area nicely and encourage reduced inflammation and healing.



Remember too, you can apply an ice cube right to the entrance of the anus 4 times a day for about 10 days to help reduce and prevent inflammation especially after bowel movements. This is especially if you've had surgery on the outside and occurs sometimes even with only internal surgery.





Another way we trying to prevent infection is by attempting to delay somewhat, by one or two days, the passage of stool through the recently operated area. This allows the operated area to recover. This is described above with a low residue diet for one or two days after surgery. Slowly normalize your diet thereafter, ensuring you take enough fibre like pears and prunes or take a fibre supplement. When you are taking solid food at least 1-3 times a day you should take the prescribed stool softeners.



The idea is to pass soft but formed stool easily rather than hard stool that needs to be pushed out, pulling on stitches and causing increased pain and burning discomfort. After about 2 weeks trying weaning off and taking less stool softeners, until you can stop all together, about 4-6 weeks after surgery.

Always eat a diet high in soluble fibre. Consider a supplement of fibre like inulin. It comes in easily chewable tablets taken during your biggest meals:



Good luck !!!

.... and do contact your surgeon or our office if you have any questions or concerns.