

Post-Operative Instructions For Anorectal Surgery

Stanford University Section of Colon and Rectal Surgery

Mark L. Welton, M.D.

Andrew A. Shelton, M.D.

Most anorectal surgical procedures are done in same-day surgery. A few more extensive procedures require hospitalization for one to three days. Your ability to tolerate the pain postoperatively and your doctor's concern about your wounds determine the time of discharge.

After Discharge

Medicines

You will take home

1. A prescription for pain medication with instructions. If you need additional medication, call your doctor during normal business hours. (After hours, if the doctor on call does not know you personally, he or she may not renew narcotic pain medication by telephone.)
2. Bulk-forming stool softeners (for example, Konsyl®, Metamucil®, or Citrucel®) to be taken in a glass of water two or three times a day.
3. Anal ointment, such as Americaine®, Tronothane®, or Xylocaine®.or ElaMax-5®. Apply these ointments to the anal area with your finger; then cover with cotton or gauze.

Bowel Function

Bowel movements after anorectal surgery are usually associated with moderate to severe discomfort. Constipation and diarrhea make the pain much worse and must be avoided. The trauma to the anal wounds caused by hard bowel movements will slow down the healing process.

Constipation

You should be sure to have a bowel movement at least every other day. If two days pass without one, take an ounce of milk of magnesia; if there is no result, repeat this dose in six hours. You can also use a tap water enema.

Diarrhea

Diarrhea, usually caused by overuse of laxatives, is also a concern if you have more than three watery bowel movements during a 24-hour period. If diarrhea occurs, stop taking milk of magnesia or other laxatives. Continue the bulk-forming agents. If the diarrhea persists, call your physician.

Bathing

After bowel movements, use a wet wash cloth, toilet paper, cotton, or perianal pads (Tucks, Preparation H pads) to clean yourself. If possible, take a sitz bath or tub bath immediately. Baths should last at least 10 to 15 minutes with the water as warm as you can comfortably tolerate. Try to take at least three baths (or showers with a hand-held sprayer) a day.

Discharge/Infection

Some bloody discharge after bowel movements is normal for at least two to four weeks after rectal surgery. If you have profuse, continuing bleeding, call your doctor immediately. Postoperative infection around the rectal opening is surprisingly uncommon despite the obvious contamination by stool. This is probably because of the excellent blood supply to the area.

Urination

If you have trouble urinating, do so while sitting in a warm tub of water, or run the water faucet while sitting on the toilet. If the problem is severe or persistent, your doctor may prescribe oral bladder stimulants.

Diet

Eat a high-fiber general diet, including plenty of fruits and vegetables. Try to drink at least six to eight glasses of water or juice per day to help keep the stool soft.

Activity

On discharge there are generally no restrictions on walking, climbing stairs, or riding in a car. After some procedures you will be asked to avoid strenuous activity or heavy lifting for 7 to 14 days.

Causes for Concern

If any of the following occur, please call the Surgery Clinic at **650-725-9772**

Problems with the incision(s), including increasing pain, swelling, redness, or drainage

- Severe constipation (no bowel movement for three days)
- Diarrhea (more than three watery stools within 24 hours)
- Difficulty urinating
- Fever greater than 101 degrees
- Severe bleeding
- Nausea or vomiting
- Chills

If your doctor is not available, a doctor on call is available 24 hours a day, every day of the year. After hours, the Stanford page operator at **650-723-6661** and they will locate the doctor on call. In an emergency, try to contact us for advice before you go to the hospital. A telephone call may save you a lot of time, discomfort, and expense.