After Anorectal Surgery

Self-care to help your recovery

This handout gives instructions to follow after having anorectal surgery. If you have any questions, please call one of the numbers that are given on the last page of this handout.

Self-care

- If you go home on the same day as your surgery:
  - Rest in bed for as much of the day as you can.
  - Do not walk any more than you have to.
  - Keep your dressing (bandage) in place until the next morning or your first bowel movement. This will control any minor bleeding.
- After you remove the dressing, you may want to use gauze or a feminine pad to protect your clothes from any bleeding or drainage.
- After you pass stool, gently pat yourself dry or take a *sitz* bath (see page 2). Do **not** rub the area with toilet paper after bowel movements. You may want to use baby wipes for the first 1 to 2 weeks.
- If you have stitches, they will dissolve over time. They do not need to be removed.

What to Expect

- It is normal to have some pain, swelling, discharge, or a false urge to have a bowel movement for 1 to 2 weeks after surgery.
- If you have a *seton* (a yellow elastic band with silk threads), please leave it in place and do **not** move it.
- For 2 to 4 weeks after surgery, you may have bleeding when you pass stool. If bleeding is heavy and does not stop, call one of the numbers given on the last page of this handout **right away**.
- Swelling is common after this type of surgery and does not mean your hemorrhoids have come back.

Sitz Baths

A *sitz bath* is a way to soak your bottom in warm water. These baths:

- Help the blood circulate in your anal area.
- Help your *sphincter muscle* relax. This may help you feel more comfortable.
- Help you to clean yourself after a bowel movement.

You may start taking sitz baths the day after your surgery. To do this:

- Pour warm water (not hot) into a plastic sitz bath basin or fill your bathtub with a few inches of warm water. Make sure there is enough water to soak your bottom.

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- Do not add anything to the water.
- Sit in the bath. Do not sit in the bath for more than 10 to 15 minutes at a time.
- After the bath, pat your bottom dry. Be careful not to rub.

You may take as many sitz baths as you like each day after your surgery.

Medicines

Your doctor may advise you to use 1 or more of these medicines when you are discharged from the hospital. Take one or twice daily as recommended:

- **Dietary fiber supplement:** Metamucil, Konsyl, or Fiberall.
- **Stool softener** Colace or Docusate
- **Laxative:** Senna, Miralax or Milk of Magnesia
- **Pain medicine:** Take as prescribed by your doctor. Acetaminophen and NSAIDs (ibuprofen, naproxen) are preferable to narcotics for most patients

For Your Safety

Prescription narcotic pain medicine can affect your response time and your ability to think clearly. While you are taking prescription pain medicine, do **not**:

- Drive
- Use machinery
- Sign legal documents
- Drink alcohol
- Be responsible for the care of another person

Activity

- Starting the day following your surgery, go for a walk or do other exercise every day. Being active will help you get rid of gas, increase your strength, and help your bowels move.
- For 2 weeks after your surgery, avoid straining and do not lift anything that weighs more than 10 pounds. (A gallon of water weighs about 8 pounds.)

Returning to Work

The number of weeks you take off work depends on your health issues and what you do for a living. Talk with your doctor at your follow-up visit. Most people are able to return to work 1 to 3 weeks after this visit.

Diet

Your diet is very important after this surgery, since the food you eat affects your bowels. **It is very important to avoid becoming constipated.**

- Try to get into a routine of having a bowel movement every morning after breakfast. Drinking prune juice at bedtime will help you have a bowel movement in the morning.
- Eat a high-fiber diet that includes 20 to 30 grams of fiber a day. Some high-fiber foods are:
  - Bran and bran products
  - Cooked lentils, black beans, and garbanzo beans
  - Salads, especially spinach
  - Fresh fruits
  - Vegetables, especially cooked peas and broccoli
- Drink enough water daily to produce clear urine.
- Avoid milk products. They are very constipating.
- Avoid spicy foods. They can irritate your bowels.

Read the handout "*Constipation After Your Operation*" to learn more.

First Bowel Movement

If you do not have a bowel movement by the 3rd day after your surgery:

- Take 1 tablespoon of milk of magnesia.
- **12 hours after taking milk of magnesia:** If you still have not had a bowel movement, drink an 8-ounce bottle of Citrate of Magnesia.
- **12 hours after taking the Citrate of Magnesia:** If you still have not had a bowel movement, call one of the phone numbers on the last page of this handout **right away**.

Milk of magnesia and Citrate of Magnesia are over-the-counter products that you can buy at the drugstore. You do not need a prescription.

Important

- Do **not** take a suppository or do an enema.
- Do **not** place anything in your rectum for at least 1 month after surgery.

Infection

An infection is rare after anorectal surgery. If it occurs, it can start up to 2 weeks after your surgery. Call your provider immediately if you have any of the below symptoms:

- Constant pain that is getting stronger every day (instead of decreasing)
- A feeling of increasing fullness in your anorectal area
- Fever above 100.5°F (38°C)
- Chills
- Redness in your anorectal area
- Daily pus drainage, enough that you need to use more than 1 pad during the day (a small amount of pus drainage on a pad is normal)
- Having a hard time passing urine

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

- **Weekdays from 8 a.m. to 5 p.m.:** call the Surgical Specialties Center at 206.598.4477.
- **After hours and on weekends and holidays:** call 206.598.6190 and ask for the resident on call for Surgery to be paged.

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