

Anal Pain

What causes anal pain?

People frequently assume that the major source of anal pain is hemorrhoids, in which swollen tissue sticks out of the anus. However, anal pain can result from:

- Fissure, created by stool tearing the anus, which is generally an acute, sharp pain. There may be associated muscle spasm, resulting in prolonged pain over hours
- Abscess, resulting from a bacterial infection, which may cause fever, night sweats and prolonged, constant pain.
- Fungal infection, which may create prolonged pain that is less severe than an abscess.
- Tumor, such as cancer, which may produce progressively worsening pain.
- Muscle spasm in the pelvis, which can produce a very sharp pain that often resolves quickly.
- Fistula, created by an abnormal tunnel between the rectum and the skin, which can be painful, particularly if it gets blocked by stool and an abscess forms in the tunnel behind the blockage.
- Anal ulcer, a kind of sore or raw area, which may be painful and can represent an infection.
- Rectal STD, such as gonorrhea, Chlamydia or herpes
- Skin problem, such as psoriasis or dermatitis, which may cause itching or burning

When does anal pain occur?

- During the act of defecation. This is usually a fissure or tear in the anus. The stool burns as it proceeds through the tight muscle of the anus. The pain generally resolves after the stool passes, but may continue due to muscle spasm.
- With wiping. This is often a skin problem or fungal infection.
- Constantly, regardless of the presence of stool or stooling. This is more likely an abscess or infection, sometimes a thrombosed (clotted) hemorrhoid, but can also be a tumor.
- Progressively over time. This can indicate a thrombosed hemorrhoid, infection or tumor.
- So severe that one can not sit. This can indicate an abscess, a muscle spasm or a tumor.

Where does it hurt?

- Anal pain that can be pinpointed to the front or back of the anus at the opening where stool comes through is usually a fissure. Anal pain that is associated with a hard bump the size of a pea in this location can also be due to a fissure.
- Pain that is associated with a swelling that is deep in the tissue of the skin is usually an abscess. The pain of an abscess usually emerges in days, and may be associated with a painful bump in the skin around the anus.

- A firm bump that emerges abruptly at the anal opening and is blue in color is generally a hemorrhoid that is thrombosed, meaning a clot has formed in the blood vessels. A soft tender spongy mass can also be hemorrhoids.
- A painful bump that emerges over months can be a cancer.
- Skin pain of the opening or around the opening can often be due to trauma, from a yeast infection or vigorous over-cleansing the anal skin.

When is anal pain serious?

Anal pain that does not resolve with the use of over the counter medications within 24-48 hours should be investigated by a physician. Anal pain that lasts more than two weeks can be serious. Chronic anal pain that progressively gets more severe is possibly a cancer.

What other symptoms should i notice?

- Is the skin around the anal opening warm or red at the center or on the sides?
- Is the anal opening swollen?
- Is the anus moist or dry?
- If there is a mass, it is blue, red or yellow? Is it soft or hard? Is it painful?
- If there is an ulcer (raw area), is it flat, red or with raised edges?
- Is it painful to pass a stool or merely just to sit?
- Does the pain begin after a bout of diarrhea and become worse or constant?
- Is the pain after a constipated stool?

What if there is bleeding and pain?

- The most common cause of painful defecation with bleeding is a fissure.
- Thrombosed hemorrhoids may also be associated with bleeding.
- The most common cause of bleeding with pain regardless of stooling is anal skin infection, such as yeast infection or poor anal care.
- Anal itching and burning is often a source of bleeding and pain. This is usually caused by moist drainage from the skin surrounding the anus.

What can be done to relieve anal pain?

- Maintain a high fiber diet, which can relieve anal pain in the majority of treatable conditions and drinking 8-10 glasses of water daily. Eating foods containing 25-30 grams of fiber daily can improve anal pain in most cases.
- Avoid trauma to the area. Do not use soap of any kind on the anus. Do not scrub or scratch the anus.
- Avoid moisture and creams, including Vaseline®. Applications of dry heat or dry cold can alleviate pain, but moisture will not help any anal condition. Use only medications prescribed by your physician.

When should i seek treatment from a colon and rectal surgeon for anal pain?

Early detection is the key. Any mass of the anus should be examined by a physician. Skin irritation and infection can be treated with oral medicine and/or creams, as can STDs. A mass can be treated with drainage if it is a blood clot or

an abscess. If pain is associated with a fistula it will require surgery. A painful hemorrhoid can be treated in several ways, often in the office. Fissures may respond to medical treatments or require an operation. In a large number of cases, cancerous tumors of the anus and rectum can be cured by early surgical removal or radiation and chemotherapy. Waiting is not an option.

What is a colon and rectal surgeon?

Colon and rectal surgeons are experts in the surgical and non-surgical treatment of diseases of the colon, rectum and anus. They have completed advanced surgical training in the treatment of these diseases as well as full general surgical training. Board-certified colon and rectal surgeons complete residencies in general surgery and colon and rectal surgery, and pass intensive examinations conducted by the American Board of Surgery and the American Board of Colon and Rectal Surgery. They are well-versed in the treatment of both benign and malignant diseases of the colon, rectum and anus and are able to perform routine screening examinations and surgically treat conditions if indicated to do so.