Chris Craig Colorectal Surgery
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Post Operative Fistula-in-Ano (Partially laid open and Seton)

Name	
Date of operation	

You have had an operation for a fistula in ano. The fistula (tunnel between the rectum and the skin) has had a seton inserted to prevent ongoing infection and to assist drainage. There will be continuing discharge and this is expected. The best way to achieve this is to apply a "flossing" technique (exactly like when you floss your teeth). Using both hands, move the seton backwards and forwards. There may be some bleeding – this should not worry you. Plus, the first few times you do this is may be uncomfortable but it will get easier. You should aim to floss twice a day and over a period of time should apply more pressure. As you continue to floss, the seton may start to cut through the tissues – you may notice that the seton is getting longer on the outside. It may be that eventually, the seton lies just beneath the skin.

Part of the fistula has also been laid open and you have a shallow wound. A small pack has been placed in the wound – please leave this in place for 48 hours after the operation. You may then have a bath or shower and remove the pack. You should then commence "finger treatment". Whilst in the shower / bath, gently rub the raw open wound with your finger. This helps to dislodge any debris and prevents premature closure of the skin before the base of the wound has healed. Although this may be uncomfortable for the first few times, it will get easier and help the wound to heal far quicker. A small dressing may then be placed over the wound to protect your clothing.

You have been given an antibiotic (metronidazole) for 5 days. You should not drink alcohol during this time. A fistula in ano is not an easy or quick condition to treat. You will be seen every 3-4 months to see how the fistula is progressing. If the seton comes undone or falls out, please telephone my secretary on 0161 447 6761 and an appointment will be made for you to be seen in out patients.

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