

Perirectal Abscess and Fistulectomy in Children

A Guide for Patients & Parents

What is a perirectal abscess?

This is an infection that appears as a tender red lump under the skin near the anus. This lump can grow large and become painful. This type of abscess happens most often in babies and children under a year of age. It may drain fluid (pus) on its own and then heal and disappear. An abscess that does not drain by itself may need to be drained in the office by the pediatric surgeon. This may be all that is needed to help the abscess heal permanently. If the surgeon drains the abscess, we suggest that your care at home include warm baths after each bowel movement. This will clean and soothe the area while it is healing. The physician may prescribe antibiotics for your child.

Will the abscess return?

The abscess will return if a fistula, or tube-like connection, forms between the inside of the anus and the skin. Once a fistula forms, bacteria from the intestine becomes trapped within the fistula and causes the infection to return. This is called a perirectal fistula. If your child has a perirectal fistula, the pediatric surgeon will recommend an operation called a fistulectomy. A fistulectomy removes the fistula permanently.

What is a fistulectomy?

During this operation, the fistula is removed through a small incision into the side of the anus with the abscess. This incision is left open to heal on its own and not closed with stitches. The fistulectomy is done as an outpatient basis and takes less than one hour. Your child will not need to stay overnight in the hospital and can go home from the recovery room as soon as he or she is awake and able to drink liquids.

How do I take care of my child at home after the operation?

Pain: Prescription pain medication is not routinely required after this operation. Children usually only need Tylenol® or Motrin® once they are at home. Follow the dosage directions on the label.

Dressings: After the operation, there may be a small dressing to remove from the anal incision. The surgeon will tell you when to remove the dressing, if one is present. If the dressing falls out on its own before that time, it will not need to be replaced. The incision will close by itself in one to two weeks. While the area is healing no infection will occur in the incision, even though your child has bowel movements. You can keep the area clean by giving your child a bath after every bowel movement.

Bathing: Your child may bathe immediately after surgery.

Activity: There are no specific activity restrictions following surgery.

Antibiotics: Your child does not need to be on antibiotics after the operation. The incision will heal on its own and will not become infected.

Do I see the surgeon again after the operation?

If all is going well, a visit to our office may not be required. Our pediatric nurse practitioner will call you to check on your child's recovery. In some cases, even after a successful operation and careful care at home, it is possible for an abscess or fistula to come back in a different area. If this happens, you will need to return the office for a visit with the pediatric surgeon.

When do I call your office?

Call our office at (415) 476-2538 if:

- You have any concerns you have about your child's recovery
- Your child has a temperature of 101 degrees or higher
- There is severe pain and tenderness at the incision

This information is for educational purposes only and is not intended to replace the advice of your physician or health care provider. We encourage you to discuss with your physician any questions and concerns you may have.