

A Clinical Study of Etiology and Management of Fistula- In-Ano in a Tertiary Care Hospital

Srinivas Alagandula

Dr. Srinivas Alagandula, Assistant Professor, Department of General Surgery, Prathima Institute of Medical Sciences, Naganoor, Karimnagar, Telangana State. Email: psriramkumar@yahoo.com

Abstract

Aim: The objective of the present study was to find the etiology and management of fistula-in-ano in a tertiary care hospital. **Methods:** This prospective cross-sectional study was done in the Department of General Surgery Prathima Institute of Medical Sciences, Naganoor, Karimnagar. Clinical examination including per rectal and proctoscopic was done in required patients. All the patients were processed by routine investigations, ECG, Chest, X-Ray, etc done prior to surgery. Fistulogram was done in selected cases. Patients were treated with fistulectomy or fistulotomy for fistulae and followed up for a period of 3 months to 1 year. **Results:** Out of the 50 patients n=35 (70%) were male and n=15 (30%) were female patients. The low socioeconomic group of patients were n=20 (40%) and middle and upper socioeconomic classes were having n=15 (30%) patients each. In this series 70% of patients were, discharging wound was the presenting the complaint. 20% of patients with pain and swelling around the anal region, past history of peri anal abscess obtained from 80% of cases from this fact we note that discharging wound and pain, and past history of peri anal abscess are the commonest mode of presentation in the majority of patients. In the study of fistula in ano, n=37 (74%) of patients underwent Fistulectomy, another n=10 (20%) of patients Fistulotomy and another n=3(6%) of patients Fistulectomy with lateral sphincterotomy. **Conclusion:** Simple low-lying anal fistulas are common with male preponderance. Both fistulotomy and fistulectomy treatments provided good outcomes. However, fistulotomy has advantage of being done in shorter operative times, less post-operative pain and quicker wound healing.