

Post-operative Care after Examination Under Anaesthesia (EUA) and Anorectal Surgery

This leaflet explains about returning to your everyday activities after your EUA and anorectal surgery. If you have any further questions, please speak to a doctor or nurse caring for you.

What is an Examination Under Anaesthetic (EUA)?

The anus and rectum (anorectum) make up the exit of your bowel, or the “back passage”. An EUA is a procedure to assess this area carried out under General Anaesthetic (GA), which means that you will be asleep for the procedure. It is performed for a range of anorectal conditions. Below is a list of such common conditions. Your surgeon will give you an idea of what to expect before your operation.

Haemorrhoids: Haemorrhoids are veins inside the back passage which act as cushions and can help with bowel control. However, when they become enlarged, they can cause bleeding, discomfort, itching and mucous leakage. Treatments for these include ligation, which ties off the blood supply to the haemorrhoids, or haemorrhoidectomy, which involves surgical removal.

Anal fissure: Anal fissures are splits in the skin lining the anal canal, which can be very painful and heal poorly due to spasm of the anal sphincter muscle. These may be treated with Diltiazem cream, Botox injections or less commonly a sphincterotomy, which involves cutting a few fibres of the anal sphincter muscle. The aim is to help with muscle relaxation of the area and aid healing.

Anal fistula: An anal fistula is an abnormal tunnel connection between the inside of the anal canal and the skin around the anus. This can be due to infection in the anal glands in the anal sphincter muscles, or Crohn's Disease. Symptoms include persistent pus discharge, discomfort and recurrent abscesses or infection around the anus. Surgery may involve laying open the tunnel to encourage it to heal as a flat scar, otherwise known as “lay open of fistula” or “fistulotomy”. For more complex fistulas, you may require a “seton” which is a surgical thread left inside the fistula to prevent the skin from healing over which can result in further abscesses. It may remain for several months or longer. If you have a seton, you will usually require a further procedure to treat the fistula and remove it later.

Anal skin tag or polyp: Skin tags and polyps can occur around the anorectal region, similar to other areas of the body. These can be excised if they are causing discomfort or

bleeding, sometimes at the same time as a Botox injection. Following removal, it is important to avoid straining on the toilet to prevent them re-occurring.

When can I leave hospital?

You can go home the same day as your operation unless otherwise notified. You will need a responsible adult to take you home from hospital and stay with you for 24 hours after the procedure whilst you recover from the GA. Do not drive, operate machinery or sign important documents for 24 hours after surgery. If you are required to stay overnight in hospital for any reason, your surgeon will inform you.

Looking after my wound

You may have a wound depending on the procedure performed. It is important to keep the area clean, dry and wear loose-fitting underwear. You can use water via a shower head or bath to clean the area daily after opening your bowels. You may use baby wipes for convenience; however, you should avoid any perfumed soaps, creams or ointments unless prescribed by your surgeon. You may notice some bleeding or clear discharge from the back passage for around two to four weeks after surgery. This is expected and should settle down.

You may have gauze or sponge dressings around or inside the back passage. These are often applied to help settle bleeding or absorb discharge and will usually fall out within 24 hours. If you have received specific instructions about further dressing changes, you should call your local GP practice as soon as possible after surgery to arrange a nurse appointment for this. Most stitches that are used around the anal area are dissolvable. If you have fistula surgery, you may have a seton which should not be removed. Your surgeon will let you know if this is the case.

Will I be in pain?

After surgery, it is common to experience some pain for up to two weeks, particularly if you have a wound or have had treatment of haemorrhoids. This can be typically managed with painkillers and laxatives to avoid constipation which will be provided to you on discharge and it is important to take these regularly initially to prevent pain. Your surgeon may also provide you with a course of antibiotics to take at home depending on your surgery type.

Any lifestyle advice?

It is important to avoid constipation and straining after anorectal surgery, as this helps with wound healing and preventing pain. You should stay well hydrated and consume dietary fibre. Good sources of fibre include fruit, vegetables, whole grains and flaxseed. You will likely be provided laxatives on discharge, which can also be purchased over the counter at the pharmacy. If you are an active smoker, stopping will greatly increase your chances of successful wound healing.

When can I get back to normal activities?

Depending on your pain and extent of surgery, you will likely need one to two weeks of rest. It is advisable to abstain from strenuous exercise (include cycling), driving and sexual activity until the pain resolves. You should avoid swimming until your wound has healed. Activities such as light walking can be carried out as usual and are encouraged to help prevent blood clots after surgery. We can provide a sick note for your recovery period if needed. Your surgeon will let you know if a longer recovery time is expected.

Will I have a follow-up appointment?

Your discharge letter will include information regarding any follow-up appointment, if required. The exact date and time of your appointment will be provided later, either by post or telephone.

What should I do if I have a problem?

After leaving the Surgical Treatment Centre, you may call us on **020 8266 6394** until 8pm on the day of your surgery.

From 8pm, until 8am the following day, please contact **020 8725 3707** to speak to a member of the Recovery Nursing Team at St George's Hospital, who will be able to advise you.

If you are very worried and the problem is urgent, you should call 111 or go to your nearest A&E. If your query is non-urgent, please contact your GP practice.

Useful sources of information

<https://www.nhs.uk/conditions/anal-fistula/treatment/>

<https://www.nhs.uk/conditions/piles-haemorrhoids/>

<http://www.nhs.uk/conditions/anal-fissure/treatment/>

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Was this information helpful? Yes / No

Please let us know, contact patient.information@stgeorges.nhs.uk and include the leaflet title.

Thank you.

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you advice and information when you have comments or concerns about

our services or care. You can contact the PALS team on the advisory telephone line Monday, Tuesday, Thursday and Friday from 2pm to 5pm.

A Walk-in service is available:

Monday, Tuesday and Thursday between 10am and 4pm

Friday between 10am and 2pm.

The Walk-in and Advisory telephone services are closed on Wednesdays.

Please contact PALS in advance to check if there are any changes to opening times.

PALS is based within the hospital in the ground floor main corridor between Grosvenor and Lanesborough wings.

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS UK

The NHS provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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