

Anal Dilation Instructions (Children)

Why does my child need anal dilation?

Anal dilation may be done before or after anorectal operations. It is a safe procedure that helps stretch (dilate) the size of the anus. Anal dilation is important after surgery to help prevent the body from forming scar tissue and narrowing the anal opening.

What do I need to do my baby's dilation?

You will need to order an 8-piece set of Hegar dilators. You can order these from an online retailer such as Walmart or Amazon. Hegar dilators come in metal or plastic. We prefer the metal dilators because they are easier to use at home. The dilators are double ended and can be listed as "**Hegar dilators**", "**gynecology instruments**" or "**double ended uterine instruments**". A set of Hegar dilators costs approximately \$17-30 dollars. You will need to order a complete set of 8 as your child will use several different sizes.

This is what the dilators look like:



What other supplies do I need at home to perform the dilations?

•	Oilator: Size
---	---------------

- Water soluble lubricant (e.g., Surgilube® or KY Jelly®, or other generic water soluble gels
- Pad, towel, or diaper

How do I do the dilation?

- 1. Put a clean diaper or cloth under your child's bottom.
- 2. Put them in a frog leg position similar to the position to change their diaper.
- 3. Hold their feet and ankles in one hand over their stomach so you have a clear view of the anus. An older child can be placed on their side.
- 4. Lubricate the tip of the dilator with surgilube or KY Jelly.
- 5. Find the correct size dilator. Hold the dilator like you would a pencil. Gently push the dilator about 1 to 1.5 inches into the anus and hold in place for a count of 30 seconds.
- 6. If this goes easily, then lubricate the next size dilator (if you have been told to do so) and repeat the dilation.
- 7. As the dilator passes you may feel a slight "popping" feeling.

How often do I do the anal dilations?

- The surgeon will do the first dilation in the clinic or in the hospital usually around 2 weeks after surgery. The frequency of dilations is determined by the surgeon.
- You will be instructed on how to do a dilation, when to do a dilation, and how often it needs to be done. The surgeon or PA/NP/RN will demonstrate for you how to do home dilations.
- You will need to hold the dilator in place for about 30 seconds, once or twice daily depending on the what your child needs.
- If you are performing twice daily dilations, try to do one in the a.m. and one in the p.m. Usually we increase the dilator size each week.

• You will have a clinic visit scheduled to monitor progress of dilations.

• Once the final size has been reached and passes easily, we will start tapering

(lowering) the frequency of dilations.

When should I do the dilation?

Choose a time of day that is easiest for you. Most parents find it easier to do

the dilation when there is another person available to help. If you are doing

dilations more than one time per day, do one in the morning and one in the

evening.

What will my child feel?

Your child may feel a small amount of discomfort during the dilation. Most

children grunt or push against the dilator and may stool during the dilation.

Once the dilation is done, your child should not be in any further discomfort.

We recognize this a scary experience for you and your child but it is necessary

to prevent further surgical issues.

What can I expect after the dilation?

Your child should stool easily after dilation. You may see a small amount of

blood at the time of the dilation or with the next stool. This is expected for the

first few days when starting dilations or after increasing the size of the dilator.

If the bleeding does not stop contact the office.

When do I stop doing dilations?

You will continue dilations until the rectum has completely healed and has

reached a desired size. The surgeons will determine when your child has

reached the desired size. Dilations are slowly weaned off with the following

schedule:

• 1 time a day for a month/week

• Every other day for a month/week

Pediatric Surgery

- 2 times a week for a month/week
- 1 time a week for a month/week
- 1 time a month for 3 months

When should I call the Pediatric Surgery office?

- If you meet resistance and are unable to pass the dilator.
- If your baby seems to be in pain or has persistent rectal bleeding.
- If your baby has more than one or two stools after dilation or if they pass a large amount of blood (more than a quarter sized spot in the diaper).

What is the contact information?

- If you have any questions, problems or concerns call the Pediatric Surgery clinic at (734) 764-4151 from 8:00am-4:30 pm Monday-Friday
- If you have urgent issues or if it's after 4:30 pm or on the weekends call (734) 936-4000 (hospital paging) and ask the operator to "page the Pediatric Surgeon on call".

Disclaimer: This document contains information and/or instructional materials developed by Michigan Medicine for the typical patient with your condition. It may include links to online content that was not created by Michigan Medicine and for which Michigan Medicine does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

Author: Laurie Wild PNP Reviewers: Jennifer Chamberlain R.N., Peter Ehrlich M.D, Marcus Jarboe M.D, Matthew Ralls, M.D, Karen Speck M.D,

Patient Education by <u>Michigan Medicine</u> is licensed under a <u>Creative Commons Attribution-NonCommercial-ShareAlike 3.0 Unported License</u>. Last Revised 10/2018