

## What is the purpose of a seton placement?

Setons are used to treat anal fistulas. A **fistula** is an abnormal tunnel that connects two structures. An **anal fistula** is an abnormal tunnel that forms between the anus and the surrounding skin. The fistula's internal opening is in the anus and the external opening is typically on the skin around the anus or on the buttocks.

If the external opening of the fistula closes, the bacteria inside the fistula tunnel may multiply and form an abscess. An **abscess** is an infected pocket of fluid, which causes significant pain. Surgeons place a **seton** (a thin rubber drain that goes through the tunnel) to keep the fistula tract open, which then prevents abscess formation. Usually a second surgical procedure is required to close the fistula, after the seton procedure.

## What will happen during the procedure?

This is an outpatient procedure. The procedure takes about 1 hour.

1. After you receive anesthesia, you will be positioned to allow for examination of the anus and fistula.
2. Both openings of the fistula tract are identified.
3. A soft flexible strip of tubing (Seton) will be looped through the openings and will be secured to itself to form a continuous band. You may have one or more Setons, depending upon the size and location of your fistula. Some people have more than one fistula.

## How should I prepare?

You will be asked to use a Fleets enema on yourself the evening before or the morning of your procedure. Our nursing staff will provide you with additional instructions on diet and medications. There are special considerations for

people with diabetes and people who are on anticoagulant therapy (e.g. Coumadin).

### **What will my recovery time be?**

Many individuals are able to return to work and resume routine activities the day after their procedure. Some people require a week off from work if the surgery is more extensive. Generally, within 1-2 weeks, surgical discomfort is minimal.

### **What are my postoperative care instructions?**

#### **Diet:**

You can resume your normal diet once you have sufficiently recovered from anesthesia. You should drink lots of liquid. Water is best. Try to drink at least 6-8 glasses of liquid daily.

#### **Medications:**

It is very important to prevent constipation after surgery. You should take a stool softener, such as docusate sodium (Colace), twice a day for the first two weeks. Also take a fiber supplement such as Benefiber, Citrucel, or Metamucil, twice a day every day. Consult your pharmacist if you need help. If your stools become loose, you can stop taking the softeners.

You may receive a limited supply of narcotic pain medication (opioids). Do not drive, operate machinery, or drink alcohol when taking narcotic pain medication. Within a few days, your pain should be sufficiently controlled with medications such as ibuprofen or acetaminophen.

#### **Dressing:**

You can remove your surgical dressing the day after your procedure. If it becomes soiled or falls off before then, just leave it off. It is normal to see some bloody drainage on the dressing. Bleeding should not be heavy or

continuous. You will want to wear a gauze pad or sanitary napkin in your underwear to collect drainage after surgery.

### **Hygiene:**

Keep the surgical area clean by taking Sitz baths (or tub baths) several times per day. These are helpful for cleaning after each bowel movement. Frequent showering is an alternative to baths, although many patients find baths soothing after surgery.

- Equipment for Sitz baths can be purchased at many pharmacies or medical/surgical supply stores.
  - Use warm (not hot) water for cleansing.
  - Pat the area dry or use a hairdryer to evaporate any residual moisture.
  - If you use a hairdryer, use the cool or warm setting, to avoid potential heat injury to the skin.
- Sitting on a pillow or ice pack may also provide relief. Do not apply ice directly to the skin, use a towel or pillow case as a buffer. We do not encourage sitting on an inflatable ring (“doughnut”) as this leads to unopposed downward pressure in the anal area.
- You should gently rotate the Seton, every other day or so, to prevent it from getting crusted with bodily fluids.
- Occasionally, the Seton may become displaced and fall out. If this occurs, it is not an emergency. Please call our office the next business day so that we may evaluate whether it needs to be replaced.

### **What symptoms should I expect?**

- It is normal to have pain for up to 1-2 weeks. Thereafter, you may notice discomfort with prolonged sitting and certain activities. Pain should not be constant or worsening.
- Placement of Setons may stimulate mucus production so the volume of drainage you are having may increase at first. The volume of drainage should lessen as healing occurs.

- It is normal to have some intermittent spotting of blood, particularly within the first 1-2 days.

## **When should I call for help?**

### **Contact us if:**

- Temperature is greater than 101°F or you have shaking chills
- You have persistent nausea or vomiting
- You have unrelieved/progressively worsening pain
- You have persistent bleeding
- You are unable to pass urine

## **What is the contact information?**

- During business hours (M-F 8:00am-4:30pm) call: 734-936-5738
- During non-business hours (Evenings/Weekends/Holidays) call the paging operator at (734) 936-6267 and ask for the “General Surgery Maize” doctor on-call.

## **When will I receive follow up care?**

An appointment to be seen in our clinic should be scheduled within 2-4 weeks of your procedure. If you have not received an appointment, please call us.

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