

Application of High Intensity Laser in the Treatment of Chronic Anal Fissure

Denisenko NV¹, Gain Yu M² and Denisenko Valeriy L^{3*}

¹Vitebsk State Medical University, Belarus

²Belarusian Academy of Postgraduate Education, Belarus

³Vitebsk Regional Clinical Specialized Center, Belarus

***Corresponding Author:** Denisenko Valeriy L, Vitebsk Regional Clinical Specialized Center, Belarus.

Received: March 16, 2023; **Published:** March 20, 2023

Introduction

Anal fissure (Interpretation of the disease according to ICD-10) is one of the most common diseases of the rectum. It accounts for 10 to 15% of all coloproctological diseases (20 to 23 people per 1000 adults). Most often, the disease is diagnosed at the age of 30 to 50 years, causing its social significance. The incidence among men and women does not differ. Both foreign and domestic literature describes modern methods of treating chronic anal fissure [1,2]. Sobrado Júnior (2019) CW Marti L (2020) D'Orazio (2020) conducted a study of patients with chronic anal fissure who underwent excision of chronic anal fissure with defect closure using anoplasty. All patients underwent fissurectomy and anoplasty with V advancement of the skin flap lying in the gynecological position under spinal or general anesthesia [4].

Boland PA (2020) used lateral sphincterotomy in 40 patients and fissure excision was performed in 30. Four patients in the lateral sphincterotomy group experienced fecal retention, while 12 patients in the fissure excision group developed fecal incontinence. The authors in the present study concluded that lateral sphincterotomy is a better treatment option for chronic anal fissure than fissure excision. Postoperative complications with lateral sphincterotomy were less than with crack excision. But relapses were higher in the lateral sphincterotomy group, while there were no recurrences in the fissure excision group [3]. The world is constantly searching for new methods of chronic anal fissure.

Purpose of the Study

To evaluate the effectiveness of the laser in the treatment of chronic anal fissure.

Materials and Methods

In ME "Vitebsk Regional Clinical Specialized Center" for the period from 2018 to 2020, 149 patients (56 men, 93 women) with chronic anal fissure were operated on. The operation was performed under local anesthesia. After sphincter devulsion, chronic anal fissure was excised using a 10 W laser and a long wave of 1560 nm with a dosed side sphincterotomy. The use of laser in the treatment of chronic anal fissure allowed to reduce pain in the early postoperative period (narcotic analgesics are not prescribed) and to achieve rapid rehabilitation of patients both in hospitals and in outpatient setting. The mean hospital stay was 5.1 ± 2 to/days. Relapses of the disease were detected in 7 patients.

Conclusion

The use of a laser with dosed lateral sphincterotomy in the treatment of chronic anal fissure is an effective method for treating this pathology.

Bibliography

1. J Beaty and M Shashidharan. "Anal Fissure". *Clinics in Colon and Rectal Surgery* 29 (2016): 30-37.
2. D Stewart., *et al.* "Clinical practice guideline for the management of anal fissures". *Diseases of the Colon and Rectum* 60.1 (2017): 7-14.
3. PA Boland., *et al.* "Management options for chronic anal fissure: a systematic review of randomised controlled trials". *The International Journal of Colorectal Disease* 35.10 (2020): 1807-1815.
4. CW Sobrado Júnior., *et al.* "Anoplasty with skin tag flap for the treatment of chronic anal fissure". *Revista do Colégio Brasileiro de Cirurgiões* 46 (2019): e20192181.

Volume 10 Issue 2 February 2023

©All rights reserved by Denisenko Valeriy L., *et al.*