Anal Dilatation

Your consultant has recommended that you use anal dilators to treat the tightness within your anal muscle / anal canal.

A Clinical Nurse Specialist (CNS) trained in the use of anal dilation will teach you how to perform anal dilation safely. Patients who have undergone ileoanal pouch formation must not use anal dilators except under direct supervision and instruction of the surgeon who performed the surgery.

Anal dilators are for single patient use only and are available in various sizes (small to large). Most dilators are used at room temperature.

Your CNS will discuss with you which dilator size is most suitable for your needs.

Giving my consent (permission)

The staff caring for you will need to ask your permission and ensure that you are happy to carry out self anal dilatation at home. They will gain verbal consent that states that you have agreed to the treatment and that you understand the benefits, risks, and alternatives. If there is anything you don't understand or if you need more time to think about self-anal dilatation, please tell the staff caring for you.

Remember, it's your decision. You can change your mind at any time, and your wishes will be respected at all times. If you would like to read our consent policy, please tell a member of staff.

To use an anal dilator, you will need:

- Dilator of the appropriate size and type
- Water based lubricating gel
- Tissues / wet wipes
- Area of privacy and comfort (bedroom or bathroom)

Directions for use:

In most cases the dilator can be used at room temperature. Your CNS will provide you with any specific instructions should cooling or warming of the dilator be indicated.

Find a comfortable position

Many patients prefer to lie on their left side or sit on a bidet. However, any comfortable position is appropriate. Dilators can be used with either a full or empty bowel.

Lubricate the anus / bottom and the tip of the dilator

Proper lubrication will help prevent potential tearing or discomfort due to dryness. Do not use a petroleum – based lubricant because it will increase your risk of infection and be more difficult to wash off.

Insertion

The tip of the dilator should be positioned lightly and held at a right angle to the rectum. Exhale and gently ease the dilator into the anal canal. Breathing deeply and inching the dilator deeper with each exhalation will aid insertion.

Do not continue if you become tense - Practice controlled breathing and attempt to relax. Remove the dilator if there is any chance you might become hurt or injured.

If spasm occurs (tightening of the anus), sitting in warm water or warm bidet prior to insertion will help to relax the anal sphincter muscles and assist insertion.

The dilator is fully inserted once the cuff (the flat end) is in contact with the skin. Leave it in place for 30 -60 seconds. Remove it slowly. It is not advisable to try to stand or walk.

Wash and dry the dilator thoroughly. Hygiene is important to avoid risk of infection during the next use of the rectal dilator. Use a mild hypoallergenic soap and warm water. If necessary, leave for several hours in a disinfectant solution e.g. Milton.

Schedule for use of anal dilator

In cases of anal stenosis / tightness, twice daily use of the dilator is advisable. Treatment should be continued for several months.

We will provide you with specific instruction regarding this schedule.

Possible complications

- Rectal perforation – characterised by significant bleeding per rectum, acute / severe abdominal or back pain post dilation, development of fevers / feeling generally unwell
- If you experience any of these symptoms seek medical advice straight away or attend Accident and Emergency
- Whilst rectal perforation is uncommon the consequences can be life threatening and may include emergency surgery and stoma formation

Pain / discomfort to the anus at time of insertion

- Trauma to the anus
- Small amount of blood on the dilator

You will be reviewed either in the outpatient clinic or via a telephone consultation within a month of commencing anal dilation. A dilator of a different size may be recommended at this time.

Please do not hesitate to contact us sooner if you have any questions or concerns relating to your use of anal dilation.

Useful contacts

Department of GI Physiology - Good Hope Hospital
Clare Horrobin –Clinical Nurse Specialist – GI Physiology
Monday, Tuesday, and Thursday 8am to 4pm; Wednesday 7am to 2.30pm and Friday 7am to 12 noon. Direct line 0121 424 7427 (24hr answerphone)

Additional sources of information

Bladder and Bowel UK
www.bbuk.org.uk

Disabled Toilet Access
The RADAR National Key Scheme (NKS) was designed to address this problem. You can order a RADAR key from a number of organizations and retailers, including the Disability Rights UK
www.disabilityrightsuk.org

Accessibility



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