USE OF LIGNOCAINE AND ITS EFFECT IN ACUTE ANAL FISSURE

ABSTRACT

INTRODUCTION:
An anal fissure is a distressing problem faced by the patients. It is one of the commonest cases presenting in surgical OPD. Every practitioner of general surgery would face innumerable patients with complaint during his/her surgical career. Anal fissure is considered one of the commonest causes of severe anal pain.

Aims And Objective: The aim of our study is to see the effect after giving lignocaine in acute anal fissure in terms of efficacy, effectiveness and complications. The primary endpoint of the study will be the incidence of chronic pain and immediate recurrence at the site of anal fissure repairs at 2 months. This Study also intends to throw light upon incidence and clinical presentation of acute anal fissure.

Materials and Method: This study consists of 100 patients who presented with acute anal fissure and treated with lignocaine 2% jelly local application.

Conclusion: Lignocaine is effective in pain relief in patient with acute anal fissure although it helps in delayed healing but dietary modification, stool softener will helps in achieving early results.

KEYWORDS:
Total 100 patients were enrolled in study. Most common age group affected were 31-40 followed by 20-30 which are most productive age group which may be attributed to working population leaving away from home, less water intake, less fibre in food all contributing to constipation leading to fissure.

2) **Sex Distribution:**

Male populations were having more incidence of fissure than female which may be due to more time away from home in hot climatic condition making them prone to constipation.

3) **Occupation:**

Incidence of fissure was more in hard worker like farmers, truck driver, daily wagers than moderate workers and mild workers owing to low water intake and less fibre in diet.

4) **Lignocaine and its effect:**

<table>
<thead>
<tr>
<th>Effect</th>
<th>1 Week</th>
<th>15 Days</th>
<th>1 Month</th>
<th>6 Month</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
<td>100%</td>
</tr>
<tr>
<td>Healing</td>
<td>30%</td>
<td>55%</td>
<td>80%</td>
<td>100%</td>
</tr>
</tbody>
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Pain was relieved in all patients at the end of 1st week while healing of fissure was noticed in 30% at the end of 1st week, 55% at 15th day, 80% at the end of 1 month and 100% at 6 month.

**CONCLUSION:**

Lignocaine is effective in pain relief in patient with acute anal fissure although it helps in delayed healing but dietary modification, stool softner will helps in achieving early results.

**REFERENCES:**

7. Marion Jonas, William Speake, John H. Scholefield, Diltiazem heals Glyceryl trim it rate resistant chronic anal fissures: a prospective study. Diseases of the colon and rectum. 2002; 45(8); pg. 1091-95