

# **Pruritus Ani**

#### **What Causes Pruritus Ani?**

Many people have an itchy anus sometime or other. The skin around the anus is sensitive and difficult to keen clean

Itching is most commonly caused by seepage of mucus or faeces onto the anal skin. Haemorrhoids can cause mucous discharge, and are the most frequent cause of pruritus. Hair near the anus may aggravate the problem. Scratching leads to skin damage and infection, more irritation, and a persistent cycle develops.

Several other common complaints such as allergies, diabetes, inflammatory bowel disease, psoriasis and eczema may involve the skin around the anus causing pruritus. In children, threadworms may be the cause.

## **Symptoms**

Itch, a raw feeling and occasional bleeding (caused by scratching) are the common symptoms. The urge to scratch is sometimes uncontrollable. Stress, a change of living circumstances or a change in diet may make the condition worse. Diarrhoea necessitating frequent cleaning of the anus will irritate pruritus.

## Diagnosis

Don't be embarrassed about seeing a doctor. This condition is very common. Your doctor will want to examine your anus and an "internal" as well as an "external" examination will be necessary. Swabs or scrapings of the skin near the anus are sometimes taken for pathology examination. More complex bowel tests are usually not necessary.

## **Treatment**

The important thing to do is keep the anal skin clean and dry.

- · After a bowel motion, use only the softest toilet tissue to clean the anus. It is better to use a dabbing technique rather than rubbing across the anus.
- · Then use a warm moist tissue or cotton wool pad to absorb the mucus or residual stool off the skin, and dry carefully. You should also do this any time you feel renewed irritation or itching.
- Avoid rubbing or scratching the anal skin.
- Barrier creams such as those used for nappy-rash can be applied after cleansing. Do not use other ointments unless they are prescribed by your doctor.

- Steroid containing ointments may be prescribed by your doctor, but should be used sparingly for short periods only, as they may aggravate the problem long term.
- Keep bowel motions soft and regular with high fibre diet and plenty of fluid (at least 6-8 glasses of water a day).
- Treatment of underlying conditions, particularly haemorrhoids, can also help control pruritus. You should discuss this with your colorectal surgeon.

#### **Colorectal Surgical Society** of Australia and New Zealand (CSSANZ)

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objective is to support high quality research projects for colorectal surgeons in training and our members. Donations to the CSSANZ Foundation are fully tax deductible in Australia and can be sent to:

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