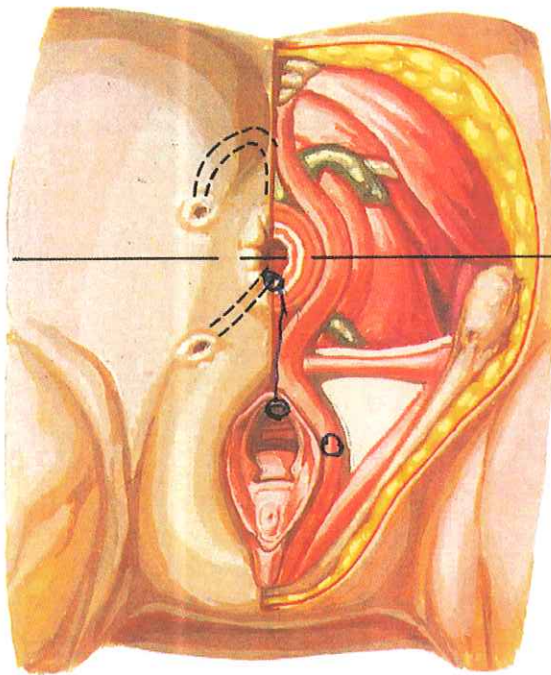
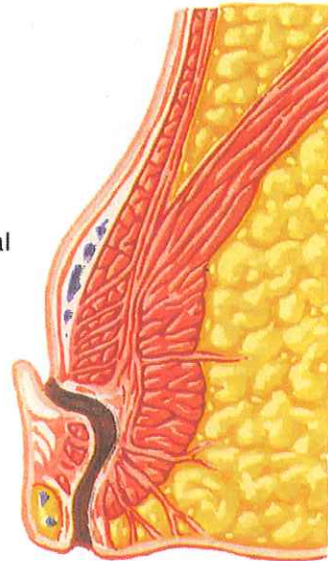


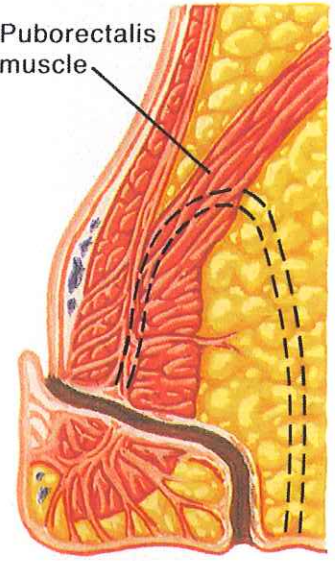
## Surgical Management of Fistula in Ano



Midanal line



Intersphincteric fistula



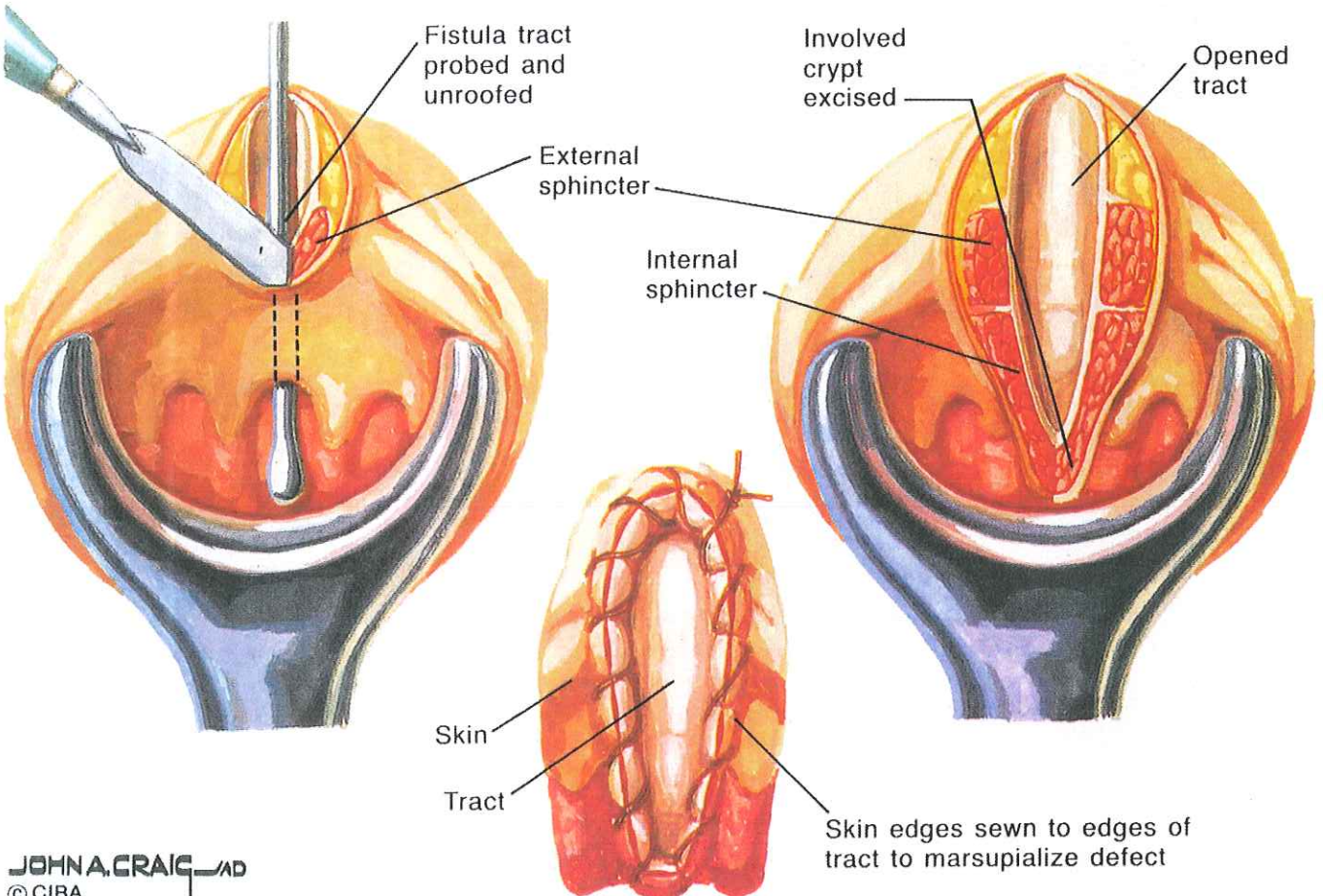
Transsphincteric fistula

### Goodsall's rule

Fistulas with external openings anterior to midanal line usually connected to internal opening by short, straight tract. Posterior external openings follow curved course to internal opening in posterior midline

Surgical management of intersphincteric and low (below puborectalis) transsphincteric fistulas involves unroofing tract. Only internal sphincterotomy in first case; internal sphincterotomy involving portion of external sphincter in latter case. Division of puborectalis muscle results in incontinence, so high fistulas not treated by sphincterotomy

### Fistulotomy technique



Fistula tract probed and unroofed

External sphincter

Involved crypt excised

Opened tract

Internal sphincter

Skin

Tract

Skin edges sewn to edges of tract to marsupialize defect