

Your visit to the Perineal Clinic

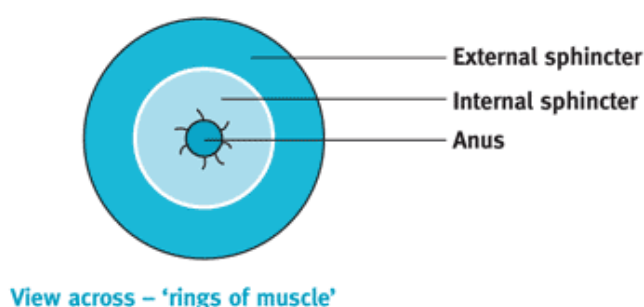
You have been referred to the Perineal Clinic. This leaflet explains what an anal sphincter tear is and what to expect during the clinic consultation.

What is the Perineal Clinic?

The Perineal Clinic is for those who have had a tear of the anal sphincter during the birth of their baby/babies. Referral to the clinic is made automatically after your birth. The purpose of the clinic is to identify and investigate any problems you may have or develop. We aim to see you around three months postpartum. The appointment time is one hour. You are welcome to bring your baby with you, although we cannot provide childcare facilities.

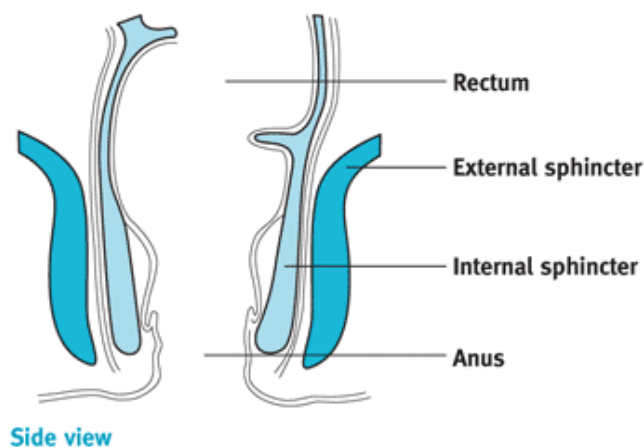
What is an anal sphincter tear?

During the delivery of your baby, tears from the vagina through the tissue towards the back passage (bottom) can occur. The muscles in the back passage can be damaged. This is called Obstetric Anal Sphincter Injury (OASI). The tear is repaired immediately after your birth.



What are anal sphincter muscles?

The anus is surrounded by two sphincter muscles that keep the back passage closed and stop you from involuntarily pooing (continence). The inner ring, called the internal anal sphincter, keeps the anus closed and automatically opens when you need to open your bowels (poo). The outer ring, called external anal sphincter, allows you to decide when to do this, as you can squeeze it together to stop yourself from pooing.



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Can anal sphincter injury cause a problem with bowel control?

Damage to the anal sphincter muscles is the most common cause of bowel control difficulties. Faecal incontinence is the inability to control the passage of bowel contents (poo). It may be in the form of a leak that you do not know is happening, or with extreme urgency to get to the toilet, with accidents if the toilet is not reached in time. There can also be an embarrassing inability to control the passage of wind (flatulence).

Is there anything I can do to strengthen the damaged muscles?

Yes. Anyone who has had a baby should exercise the pelvic floor muscles. These strengthen the pelvic floor muscles that have been affected by the tear.

The pelvic floor muscles are the firm supportive muscles that stretch from your pubic bone at the front of your pelvis to the base of your spine at the back. They help to hold your bladder, womb and bowel in place, and to close your bladder outlet and back passage.

When your pelvic floor muscles are well-toned, they stop leakage of urine from your bladder and wind or poo from the bowel. When you pass urine or poo, the pelvic floor muscles relax and afterwards they tighten to restore control. They actively squeeze when you laugh or cough to avoid leaking.

During the first five days, the area may feel numb and sore, and it will be difficult to exercise during this period but keep practising.

Referral to our Women's Health Physiotherapy Team is made automatically after your baby is born. They will aim to see you immediately after delivery and when your baby is around two months old.

What can I expect during the consultation?

During your visit to the Perineal Clinic, you will be offered:

- 1) An endo-anal ultrasound scan: A thin scan probe is placed just inside the back passage to see what the muscle looks like.
- 2) A consultation with a specialist obstetrician and gynaecologist.
 - No bowel preparation is required prior to the appointment.
 - Expect the entire consultation to last around one hour.
 - The doctor will take a history and review your current symptoms. This is to ensure proper understanding of your condition.
 - The tear you had at the time of delivery will be explained to you again, to ensure you understand what happened. If you were not given an information leaflet about the tear you had at the time of delivery, one may be given to you in clinic.
 - You will be offered an examination which may include:
 - An inspection of the wound, to assess its healing.
 - Digital examination of the pelvic floor muscles. This will entail some form of pressure on either side of the vagina. This is done to assess the tone of the muscles that support the bladder (waterworks) and the vagina. You may be asked to contract (pull up) your pelvic floor muscles during this part of the examination.
 - Digital examination of the back passage, to assess the strength of the anal sphincter (muscle that controls the back passage). This is to ensure it has healed well.
 - The doctor will then explain the findings to you and discuss various options for investigation and/or management with you.

What about future deliveries?

It is not known what happens to the anal sphincter muscles in the long-term, after this type of damage. After the assessment in Perineal Clinic, we will have a better idea of how successful the repair has been. If there are no symptoms and no damage evident, it may be possible for you to consider future vaginal births. If there are symptoms or evidence of persistent damage then we may recommend elective (planned) caesarean birth in any future pregnancies.

We hope you will find your visit to the clinic comfortable, informative and helpful.

Further information

The following websites provide useful information:

- <https://www.rcog.org.uk/en/patients/tears/>
- www.perineum.net
- www.yourpelvicfloor.org
- <https://www.csp.org.uk/public-patient>
- www.rcm.org.uk

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

S Hazbun, Consultant O&G, March 2021

Review due: September 2023

Next review due: September 2025