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A Comprehensive Retrospective Study on the Role of Various Management Modalities for Fistula-in-Ano with Analysis of Follow-up Outcomes

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Abstract: <u>Background</u>: Fistula-in-ano is a common anorectal disorder characterized by an abnormal communication between the anal canal or rectum and the perineal skin. It significantly impacts patients' quality of life. <u>Aim</u>: To evaluate and compare different surgical management modalities for fistula-in-ano with respect to perioperative outcomes, postoperative complications, wound healing, and recurrence. <u>Methods</u>: A retrospective descriptive study conducted in a tertiary care hospital. <u>Results</u>: A total of 138 patients were included. Fistulectomy was the most commonly performed procedure. MRI fistulogram emerged as the most useful diagnostic modality. <u>Conclusion</u>: Individualized surgical planning, radiological evaluation, and optimization of comorbidities are essential for favorable outcomes.

Keywords: fistula-in-ano, surgical management, perioperative outcomes, MRI fistulogram, recurrence rate

1. Introduction

Fistula-in-ano is defined as an abnormal tract connecting the anal canal or rectum to the perineal skin. It remains a challenging surgical condition due to its varied anatomy and risk to continence.

2. Materials and Methods

This retrospective descriptive study was conducted from 1st April 2025 to 31st October 2025 in a tertiary care hospital. A total of 138 patients meeting inclusion criteria were analyzed.

3. Results

Most patients were males (68%). The most common fistula type was intersphincteric (57%). MRI fistulogram was used in 93% of cases. Fistulectomy (52%) was the most common surgery performed.

4. Discussion

MRI fistulogram provided superior anatomical delineation. Comorbidities such as diabetes and anemia significantly affected wound healing and hospital stay.

5. Conclusion

Fistulectomy remains an effective surgical modality in selected cases. Optimization of comorbidities and appropriate imaging are crucial for successful outcomes.

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