

STINKY OR PAINFUL ANAL SAC PROBLEMS:**What can be done about it?****Overview—“I don’t understand what the anal sacs are; please help me understand the normal, the abnormal and the treatments.”**

Dogs and cats have a part of their anatomy that is a hold-over from ancestors and others on the evolutionary tree that creates a strong scent. In the wild, these “anal sac/scent glands” are thought to help animals mark territory boundaries and ward off enemies (think skunks!) The apparatus is made up of two solid glands on either side of the rectum that creates an oily, smelly substance that gets collected in two balloon-like sacs back by the anal sphincter muscle that communicates to the outside through a duct (i.e. small tube).

Whether and how these anal sac glands are useful to domestic dogs and cats is debatable. What is not debatable is that some dogs and cats at some point in their lives have “issues” with their anal sac glands. Normally, the oily secretion from the gland is a thick liquid material that is pushed through the duct when a dog/cat postures to defecate. Both the flexing of the anal sphincter muscle and the firm compression of stool passing the sacs makes the anal sacs empty their contents onto the stool or ground during defecation.

Most dogs and cats manage this anal sac emptying without our (nose!) knowing when they are outside or in their litterbox passing stool and minding their business. A small group of pets have one of two problems with their sacs—1) random/frequent emptying in less than ideal circumstances or 2) impaction of the duct/gland that leads to discomfort or infection/abscesses. Excessive bum licking and boot scooting become common.

An uncommon scenario is one of perianal pruritis; this simply means “itchy bum”. Some animals tell us that their bum it itchy by licking and scooting, but the anal sacs are not routinely enlarged, inflamed or otherwise problematic. Because it is very hard for a pet to tell us about the difference between their bum bothering them from anal sac issues versus itchy skin around the anus, sometimes we need to remove the anal sacs as a trial to see if it helps. In the patients with itchy skin around the anus, removing the anal sacs will not help.

“Why is this procedure being recommended for my pet?”

Surgically removing the anal sacs/glands will eliminate the problems mentioned above. If the problems are recurring frequently, the risk:benefits analysis supports surgical removal as a reasonable next step.

“What options do I have to treat my pet’s condition?”

The ideal management of anal sac problems is to use the natural anatomy and physiology of the pet to promote normal and appropriate emptying during defecation. Large, well formed stool is needed to naturally express the sacs as a dog/cat defecates. Insoluble fiber is the “ingredient” in food that will create large/bulky, well formed stool. Ironically, many pet food manufacturers have reduced fiber in a

marketing attempt promoting “less to clean up”. Bad idea, in my humble opinion. Fiber is good...for us, for them. If you want to think about your pet as a descendent of wild animals, well, carnivores/omnivores in the wild have a very high fiber diet (prey hair/fur, bone bits, plant material, insect skeletons, etc.)

We can do fiber with a lower “ick” factor with our pets using wheat/oat bran (or other insoluble fiber ingredients, but bran is low cost, readily available in the grocery store, simple enough to administer, and works very well. Some “diet” pet foods have ramped up their insoluble fiber ingredients too, so check labels if you’d like to try that route.) The bran is simply sprinkled on food in the dish when serving (or added in bulk to a kibble storage container once its use is confirmed to be helping). From ½ tsp for little animals to 1-2Tbsp for large animals per meal, check with your primary care veterinarian for further guidance.

Routine manual emptying of the anal sacs by a veterinary medical professional is another option for management. All too often, this becomes a cyclical, self-perpetuating routine and a very uncomfortable experience for your pet. The sacs are expressed, some degree of inflammation/swelling develops after the treatment, ducts are compressed from this minor swelling, natural emptying is made more difficult, small stool character continues, no natural emptying happens, sacs fill up to the point of discomfort and bum licking or boot scooting, and on it goes. No one is happy.

We can surgically remove the anal sacs, glands (that produce the stinky substance), and ducts on both sides of the anus (there are two sacs/glands/ducts). It is a common, straightforward procedure, but technically difficult. Serious complications are rare; common complications are minor.

“What postoperative complications do I need to know and understand when considering this surgery?”

Your pet will be having surgery in a very uncomfortable location; recovery for 1-2wks will need pain medication and adjustments to dietary fiber.

Since the incisions are near the anus, bacterial contamination of the surgery site is common. Luckily, the area has a good blood supply and serious infections are rare. Occasionally, an incision will become superficially infected and need more attention with topical antiseptics for 1-2wks. Rarely, an infection of the incision will go deeper and result in an incision opening up (“dehiscing”; sounds like, dee-hissing); if this happens, further surgical treatment might be needed.

The muscles and nerves that control the anal sphincter are in the surgical zone and can be injured temporarily or permanently. If enough damage happens, a patient will be unable to “pinch” the anus closed enough to hold back stool. Incontinence, in the form of occasional dropping of balls of stool, is the result. We expect some degree of this type of incontinence for 1-2wks after surgery; it is very uncommon, though possible, long-term.

“Are there situations when the surgical outcome is not what we hoped it would be?”

As mentioned above, if the anal sacs were removed to treat persistent signs of an itchy bum, it is possible in a small number of patients for the itchiness to continue. Further diagnosis for this perianal pruritis may be needed.

“How is my pet’s life and lifestyle likely to change after this procedure?”

After full healing, there will be only positive changes to your pet’s lifestyle; the challenges of anal sac problems will be eliminated.

If the rare complication of incontinence persists long after surgery, it often can be well managed with dietary trials (high fiber vs. low fiber), longer time outside after defecating (so terminal stool balls drop off before coming inside) and patience with the occasional need for clean up (often after sleeping or lying down).

“Are there things I can do to prepare myself, my home and/or my pet for this procedure?”

Dropping stool or bloody discharge from the incision are common for the first 1-2wks; plan for this with housing logistics, bedding, confinement, etc.

The addition of fiber to the food (in the form of wheat or oat bran) will make defecation easier. It is ironically easier to pass large, well formed, bulky stool (less pushing so less painful); and this type of stool breaks off easily during defecation (does not collect/accumulate near the anus making hygiene troublesome.) Have this bran on hand for meals over first 3wks postoperatively; it can be found in the grocery store baking section (Bob’s Red Mill is a common brand name; there are others).

Outpatient surgery and anesthesia can be uncomfortable, painful, disorienting, and frustrating experiences for animals; watching your pet work through the early postoperative period and recover from anesthesia and pain medications can be worrisome, scary and frustrating for pet owners. The vast majority of the time this period of difficulty is brief, and *your pet is actually more comfortable and secure at home with you*. Sometimes it doesn’t feel like that at two in the morning when your pet is anxious and not consolable, and you are unsure of what to do. You always have the option of transporting your pet to a 24-hour veterinary facility postoperatively. If you do not want to have your pet home in the first few days postoperatively, please advise your primary care veterinary staff. They will provide contact information for a local 24-hour veterinary facility and help get an estimate for the ongoing care.

It is important that you have proper expectations about this procedure; your experience and you pet’s outcome will benefit greatly. Please discuss this information with your veterinarian when working through the decision-making process regarding **anal sac removal**.

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