



Anal Haematoma at 7 O'clock: An Original Image

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Introduction

Anal hematoma is a collection of blood that has leaked from blood vessels in the anus. It involves the accumulation of blood clots in the anus. A perianal hematoma is a very painful ailment that usually starts when a person strains at their faeces. The rupture of a blood artery under the anal skin is what causes the haemorrhage. Upon inspection, the skin at the anus's edge has a blue-black protrusion. An accumulation of blood in the perianal region brought on by an intensely thrombosed external haemorrhoid or burst vein is known as a perianal haematoma. Constipation is the main reason for the majority of illnesses that appear in the anal area. When straining during bowel movements, people with constipation problems might have conditions including haemorrhoids, anal fissures, and haematomas. Anal haematomas are thought to be among the most benign anal disorders, despite the fact that they can produce excruciating agony. It is a condition that can be treated as simply as possible, despite the severity of its symptoms. When straining during bowel movements becomes a habit, constipated people may acquire illnesses including haemorrhoids, anal fissures,

and haematomas as a result of their severe straining. Anal haematomas are thought to be the most benign anal diseases, despite their extremely painful nature. Despite the fact that some of its symptoms can appear severe, this illness can be treated in the simplest way. Constipation puts pressure on the anus when a person strains during a bowel movement. Sadly, the little blood vessels in the anus may sustain damage as a result of this pressure. Blood therefore seeps into the soft tissue that lies between a blood artery and the skin when it breaks or splits. Depending on how much blood flowed, the size of the next blood clot may change. Hematomas seldom grow to the size of an apple, yet they can occasionally be as big as a chickpea. Typical symptoms include sudden onset of intense pain in the anus, soreness and swelling in the anal area, and discolouration or bruising around the anus. Inability to move or sit comfortably, the feeling of a bulk or lump in the anal region. Most of the time, the perianal haemorrhage goes away in a few days and the patient just needs oral painkillers. Under anaesthesia, the haemorrhage might be removed and drained if the pain becomes excruciating.



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Case

A 56-year-old male patient with pain and swelling at anal region also feeling of mass at anal region for the past 1- 2 months and formation of pea like swelling at ana region not healed and increasing day by day so patient came to MGACH AND RC SA-LOD (H), WARDHA. An old medical record case of No K/C/O-HTN /DM /TB/ASTHMA. A recent RBS fasting 98mg/dl and Post meal-132mg/dl. HbA1c -5.6% ECG is Normal sinus rhythm.

Local Exam: Per rectal examination done, Grade I spasm (+), Anal Haematoma at 7'o clock position found. No active bleeding, No pus discharge, chronic fissure in Ano at 6'o clock position.

Treatment: Excision of Haematoma under Local Anaesthesia.

Differential diagnosis: Haemorrhoids, Anal fissure, Perianal abscess, Rectal varices, Trauma, Coagulation disorders, Neoplasms Thrombosed external haemorrhoid, Inflammatory bowel disease (IBD), Skin conditions (e.g., pyoderma gangrenosum).



Figure 1: Before treatment (excision) anal haematoma at 7 o clock position.



Figure 2: After excision completely excision of haematoma.

Disclosure regarding patients' consent: Patient's consent was obtained for collecting information and producing images with maintenance of privacy and confidentiality for use in research/academic purposes.