

## Quick Tips - Surgery

Cheri Nielsen, DVM, MS, DACVS

### Anal Sacculectomy

Anal sacculitis, anal sac impaction, and anal sac abscessation are common problems in dogs (particularly smaller breeds) and are occasionally seen in cats. Medical therapy with manual expression, lavage, topical antibiotics/steroids, and high-fiber diet is often effective. Surgical intervention is indicated when medical therapy fails or in animals with recurrent disease. In unilaterally affected patients, both sacs should be removed due to the risk of recurrence in the contralateral sac if left intact. If the sac has ruptured or disease is severe, surgery should be delayed until the acute inflammation has resolved. This minimizes the risk of anal sphincter damage and the likelihood of leaving secretory epithelial fragments. Open and closed surgical techniques have been described, but there is a significant increase in post-operative complications with the open technique. In small dogs, the closed technique is greatly facilitated by passing a 6Fr Foley catheter into the anal sac and inflating the balloon with saline to aid in identification of the sac during dissection. In contrast to other methods of distending the anal sac, this is effective even in cases of previous rupture. Short-term complications include drainage, scooting, and seroma formation. Long-term complications include continued licking of the surgery site, fecal incontinence, fistulation, and stricture. Fistulation following anal sacculectomy usually indicates the presence of residual anal sac epithelium. Surgical excision is required to prevent further recurrence.

*I hope you found this information helpful,*



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