



Anal Sac Disease

Prepared for Your Pet Animal

Anal sac disorders are the most common problem of the anal area in small animals, especially dogs. Anal sac disease has been classified as follows:

- **Impaction** usually involves both sacs and is indicated by a sac that is distended, mildly painful when touched, and not readily expressed. The impacted contents are thick and pasty and dark brown or grayish brown.
- **Anal sacculitis** is associated with moderate or severe pain when touched; the sacs contain a thinner-than-normal, yellowish or blood-tinged pus-like fluid.
- **Anal sac abscess** usually involves only one sac and is characterized by marked distension of the sac with pus, inflammation of surrounding tissues, redness of the overlying skin, and fever.
- **Rupture**—Abscessed anal sacs may rupture through the adjacent skin, producing a draining tract.

These probably represent a continuum, in that impacted anal sacs tend to become inflamed and infected, and the infection may lead to abscessation and, finally, to rupture.

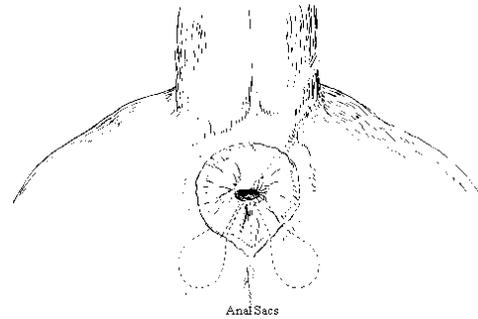
All breeds of dogs can be affected. Anal sac disease is uncommon in cats and usually involves only impaction.

Causes

The specific cause of anal sac disease is poorly understood. It is believed to be associated with conditions that promote inadequate emptying of the sacs, which should normally occur during defecation when feces of normal consistency are forced through a normally functioning anus. Abnormal retention of anal sac secretions leads to the impaction-inflammation-infection cycle.

Location

The anal sacs are paired and lie on each side of the anus in between two layers of muscle. Each sac opens into the opening of the anus at about the 4 and 8 o'clock position. The average size of the glands should be about 1-2 cm in diameter.



Signs

- The most frequent clinical signs of anal sac disease are related to anal discomfort and include scooting, difficulty defecating, and licking and biting the anal area, or base of the tail.
- Chewing and licking may result in areas of self-inflicted skin inflammation.
- Tail chasing, malodorous drainage around the anus, and change in temperament may be noted.

Diagnosis

The diagnosis of anal sac disease is based on the clinical signs and examination of the anal sacs. The anal sacs are examined by palpation with a gloved index finger inserted in the rectum and a thumb compressed against the skin slightly below and just outside the anus.

Treatment

- Anal sac impaction and sacculitis—Manual evacuation of the sac contents to re-establish drainage may be all that is required in many animals.
- Follow-up examination and expression of the anal sacs again in 1-2 weeks is advisable.
- A high-fiber diet *may* help to prevent recurrence.
- Recurrence of impaction or sacculitis—Irrigation with antibacterial solution using a small needle and instillation of an antibiotic into the sac may be helpful, along with expression of the sacs every 3-4 days.
- Bacterial culture of the sac contents for animals with troublesome recurrences may be useful.
- Abscesses—Drain, irrigate with antibacterial solution, and treat with systemic antibiotics.
- Treat recurrent anal sacculitis or abscess by surgical excision of the sacs. Surgery is delayed until the severe inflammation associated with abscessation has been treated.