Specific anal fistulas: About 18 cases

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Aims: We explain the clinical, histological, therapeutic and scalable of this disease.

Patients and Methods: We report observation records of 18 cases fistulas collected to the Gastroenterology service CHU Mohammed VI during a period extending from June 2008 to June 2011. through which, we explain the clinical, histological, therapeutic and scalable of this disease.

Results: These 18 patients of 13 men and 5 women (sex ratio = 2.6), the average age was 32 years old, clinical symptomatology was dominated by proctalgia with purulent anal discharge. Clinical examination had found a closet polyfistuleux in 10 cases, a single bank edematous fistula in 3 cases, an anal leakage in 5 cases with inguinal lymph nodes in 2 cases. The diagnosis was confirmed mainly by the histological study of biopsies of lesions, the etiology was dominated by Crohn’s disease in 7 cases, followed by tuberculosis anoperineal in 6 cases including 2 cases of HIV infection, 3 cases of adenocarcinoma mucinous, one case of squamous cell carcinoma, one case of squamous cell carcinoma and one case of HIV retroviral infection in isolation. Medical and surgical treatments were mixed; antibacillaire treatment in patients with tuberculosis, immunosuppressive therapy with antibiotic therapy in cases of Crohn anoperineal, retroviral treatment in patients with HIV, an abdominoperineal resection in 3 cases, radio and chemotherapy in one case, a palliative treatment in the other case.

Conclusion: The specific anal fistula is a rare disease of multiple etiologies, dominated by Crohn's disease and tuberculosis perineal; which justify the importance of a systematic histological study.