

# Haemorrhoids

## Information for Patients



### CAUSES

There is a network of small veins (blood vessels) in the lining of the back passage (anus and lower rectum). It is thought that these veins become wider and swollen with blood if the pressure in and around them is increased. The veins and the overlying tissue may then form into one or more small swellings called haemorrhoids.

About half the people in the UK develop one or more haemorrhoids at some stage. Many

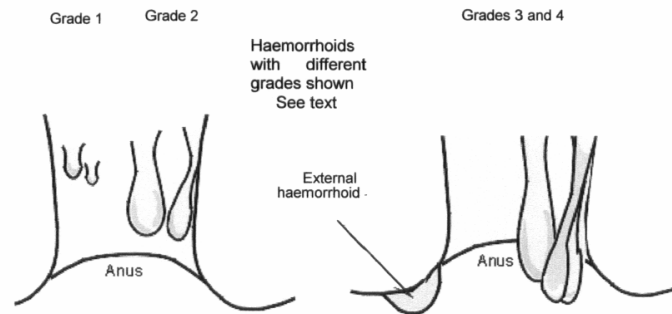
develop for no apparent reason but certain situations increase the risk of them developing:

- A common reason for haemorrhoids to develop is because of constipation, passing large stools, and straining at the toilet. These increase the pressure around the veins in the back passage.
- Haemorrhoids are common during pregnancy due to pressure effects of the baby and the hormone effects on the veins.

### SYMPTOMS

#### Internal haemorrhoids

These form in the back passage approx 2-4cm above the rim (opening) of the anus. Their severity and size are classified into grades 1 to 4.



Grade 1 haemorrhoids are small swellings on the inside lining of the back passage. They cannot be seen or felt from outside the anus. Grade 1 haemorrhoids are common. In some people they enlarge further to grade 2 or more.

Grade 2 haemorrhoids are larger. They can be partly pushed out (prolapse) from the anus when you go to the toilet but quickly 'spring back' inside again.

Grade 3 haemorrhoids hang out (prolapse) from the anus. You may feel one or more as small soft lumps that hang from the anus. However, you can push them back inside the anus with a finger.

Grade 4 haemorrhoids permanently hang out from within the anus.

Small haemorrhoids are usually painless. The most common symptom is bleeding when going to the toilet. Larger haemorrhoids may cause a mucus discharge, some pain, irritation and itch. The discharge may irritate the skin around the anus. You may have a sense of fullness in the anus.

#### External haemorrhoids

External haemorrhoid (perianal haematoma) is a small lump that develops on the outside of the anus. Many do not cause symptoms. Sometimes if a blood clot forms in the haemorrhoid, it can suddenly become painful and may require urgent evacuation of the clot to relieve the pain. The pain gradually goes away over 7 to 10 days. It then gradually shrinks to become a small skin tag.

## TREATMENT

Avoid constipation and straining at the toilet.

Ointments and creams are available over the counter. They do not 'cure' haemorrhoids but they ease symptoms such as discomfort and itch. Your doctor may also prescribe you a steroid based cream to reduce inflammation.

Injection (sclerotherapy) of haemorrhoids is an effective short term treatment for bleeding in first and early second degree piles.

Banding is a common treatment for 2<sup>nd</sup> and 3<sup>rd</sup> degree haemorrhoids. It is also an office procedure. A rubber band is placed at the base of the haemorrhoid using a device. This cuts off the blood supply to the haemorrhoid which then 'dies' after a few days. The complication rates are higher.

Operations which may be required for more advanced piles are haemorrhoidectomy, stapled haemorrhoidopexy or haemorrhoid artery ligation (HALO).

## YOUR CONSULTATION

Your surgeon will ask you specific questions related to your symptoms before examining your abdomen. A short scope is inserted through the anus whilst you lie on your left side. This can be uncomfortable but not painful.

If haemorrhoids are confirmed and they are suitable for sclerotherapy, you will be offered

this treatment. You do not require an anaesthetic. The injection consists of a hardening agent (phenol in almond oil) that triggers the creation of scar tissue in the base of the piles. Injections can be uncomfortable but not painful as there are few nerve endings at the base of the haemorrhoids. It may cause spotting for a day or two but soon passes. You can go to work straight away after the injection. You will usually have a review in about 6 weeks following the procedure to see whether the injection has worked.

## COMPLICATIONS AND RISKS

Any surgical procedure has an element of risk attached to it and occasionally things do not turn out as well as expected. Fortunately with sclerotherapy the risks are small and the outcomes usually very good.



The haemorrhoids may continue to bleed or continue to drop down. Infection can occur but this is rare.

More rarely, the needle used for injection can accidentally go through the bowel wall. This can potentially be very dangerous and an operation may be required to repair the damage.

## WHERE TO GET ADVICE



If you have any concerns during the post-op period

you can get advice or help from one these sources.

- Contact your own doctor or nurse
- Contact one of the surgical team  
Tel:10726 885104
- Out of Hours Service – contact the emergency number provided by your surgery
- Your local Emergency Department

Excessive pain, particularly associated with a temperature, should prompt you to seek advice.

## TRAINING OF STUDENTS

We are a teaching and training practice. Sometimes medical students or doctors in training may wish to observe or participate in procedures or operations. They will always be supervised by a senior doctor and will only participate with your approval.



If you do not wish to be seen by trainees or students you are perfectly entitled to withhold your consent.

**If, after reading this information leaflet you have any further queries, please do not hesitate to contact the surgical team.  
Tel:01726 885104**

