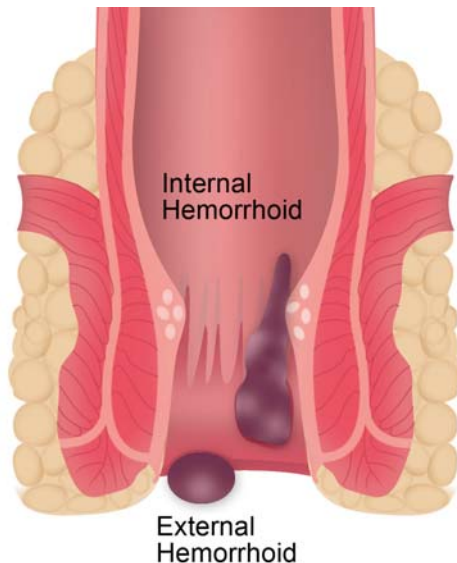




Introduction

Haemorrhoids, also known as piles, are enlarged and swollen blood vessels in or around the lower rectum and back passage (anus). When the pressure of these blood vessels is increased, they swell, and form small lumps, called haemorrhoids.

Haemorrhoids can cause mild discomfort, or sometimes, pain which is more severe and persistent. It is estimated that about 50% of people develop haemorrhoids at some point in their life. The condition is not serious, and can usually be successfully treated.



Symptoms

Common symptoms of haemorrhoids include:

- Itching around the anus
- Bleeding from the anus after going to the toilet
- Discomfort or ache around the anus and lower bowel (rectum)
- Pain during and immediately after a bowel motion
- Visible swelling around the anus
- A feeling that your bowels have not been completely emptied

Haemorrhoids vary in size, and can occur internally (inside) or externally (outside) the anus. Internal haemorrhoids develop in the back passage, about 2-

4cm above the opening of the anus. External haemorrhoids are less common, and develop on the outside edge of the anus.

Internal haemorrhoids

Internal haemorrhoids can be classified into grades, from 1 to 4. Small haemorrhoids (grade 1) are common, develop on the inside lining of the back passage, and cannot be seen or felt from outside the anus. Grade 2 haemorrhoids are larger, and are sometimes pushed out (prolapse) from the anus when you go to the toilet. However, afterwards, they return inside.

If you have grade 3 haemorrhoids, you may be able to feel one or more small lumps hanging from your anus. You will be able to push them back inside using your finger. Grade 4 haemorrhoids can become quite large, and permanently protrude from the anus. They cannot be pushed back inside.

Protruding haemorrhoids can cause itching and discomfort, and there may be a mucus discharge from the irritated mucous membrane. Sometimes, haemorrhoids can become inflamed and swollen, but are rarely very painful, unless associated with an actual splitting of the anus. However, if haemorrhoids are causing you pain and discomfort, you should see your GP.

External haemorrhoids

External haemorrhoids, also known as perianal haematoma, are small lumps that develop on the outside edge of the anus. They often do not cause symptoms, but if a blood clot forms inside them (thrombosed external haemorrhoid) it can cause a lot of pain and require immediate treatment.

Causes

The main cause of haemorrhoids is constipation. If you have constipation over a prolonged period of time, and have to strain to pass stools, it can damage the lining of your anal canal. The increased pressure in the blood vessels of your anus, causes them to swell, resulting in the formation of haemorrhoids.

If you are overweight or do a lot of heavy lifting you are more prone to haemorrhoids. Sitting on cold, hard surfaces, standing for long periods of time, and doing sedentary work, does not cause haemorrhoids.

Diagnosis

Most people with haemorrhoids recognise the characteristic symptoms. Ask your pharmacist for advice, and if you are in doubt, see your GP.

If you have any unexplained bleeding from your rectum or anus, then you should get it checked by your GP.

Your GP will probably feel inside your anus with a gloved hand, and also look inside with a metal instrument called a proctoscope.

Treatment

Haemorrhoids will usually settle down in a few days without any treatment. However, there are a number of treatments available which will reduce itching and discomfort if these symptoms are troublesome. Cold compresses may also be helpful to relieve symptoms.

Creams, ointments and suppositories

If your symptoms are mild, over-the-counter creams and medicines can be used to treat them. Creams, ointments and suppositories are available without a prescription, and will help ease any discomfort. A product that contains an anaesthetic may be more effective. However, they should only be used for 5-7 days at a time. If used for longer, they may irritate the sensitive skin around your anus. Your pharmacist should be able to advise you.

If there is a lot of inflammation around your haemorrhoids, your GP may prescribe a steroid treatment. This will reduce the inflammation and any swelling. It may also help to ease any itching and pain that you have. However, steroids should not be used for longer than 7 days at a time.

Painful, prolapsed haemorrhoids are rare, but if you have them, applying an ice pack for 15-30 minutes can help. Strong painkillers can also be used. Haemorrhoids that develop during pregnancy will usually disappear following birth. They can be treated using the same methods described above.

Banding

If your haemorrhoids do not clear up using creams, ointments or suppositories, banding may be recommended. Banding is a procedure that is carried out by a surgeon, usually in an outpatient clinic, and involves placing a tight rubber band around the base of the haemorrhoid, in order to cut off its blood supply. After a few days, the haemorrhoid dies and falls off, and the area at the base heals leaving some scar tissue.

Banding can also be used to treat internal haemorrhoids. It is usually painless because the base of the haemorrhoid is located above the opening of the anus where the gut lining is less sensitive. Up to three haemorrhoids can be treated at one time using banding. In about 80% of cases, haemorrhoids are cured using this method. In 20% of cases, they reoccur. However, if haemorrhoids do come back, you can have the treatment again. Occasionally, banding does not work.

Haemorrhoidectomy

Large, internal haemorrhoids can be removed using an operation known as a haemorrhoidectomy. This is usually done under general anaesthesia and involves tying a string (ligature) around the base of the haemorrhoid to control bleeding and cutting off the outer part. This leaves raw areas of bowel lining that, after 3-4 weeks, become covered with the normal inner-surface membrane (epithelium). During the post-operative period, stools are kept soft by using water-retaining agents, such as methyl cellulose. Haemorrhoidectomies are usually successful.

Prevention

There is no guaranteed way of preventing haemorrhoids, but a high fibre diet will help keep your stools soft, reducing your risk of becoming constipated. This will ensure that you avoid straining to pass a stool, which is the primary cause of haemorrhoids.

General recommendations include:

- Eating plenty of fresh fruit and vegetables - at least five portions a day
- Cutting down on fat (particularly animal fat), sugary food, and refined and processed food
- Eating plenty of pulses such as peas, beans, and lentils
- Eating plenty of wholegrain foods such as, wholemeal bread, pasta and breakfast cereals
- Drinking plenty of fluid - you should drink 1-2 litres (6-8 glasses) of water every day in order to keep your faeces soft

Seeking Specialist Help

Should your condition require specialist attention your GP doctor may make an appointment with Raffles Hospital. Alternatively please visit our Family Medical Centre at Raffles Hospital for a consultation.

Appointments

24 Hour Hotline: **6311 1222**

Fax: **6311 2136**

Email: **specialist@raffleshospital.com**

Website: **www.raffleshospital.com**

