

# Outpatient haemorrhoid (piles) treatment

This leaflet outlines outpatient treatment options for haemorrhoids.

#### What are haemorrhoids?

Haemorrhoids, also known as 'piles' are enlarged blood vessels in or around the anus (entrance to your back passage or 'rectum'). They can be internal or external.

- Internal haemorrhoids are inside the back passage, where the rectum joins the anus. They are covered by the mucus producing lining of the rectum. They do not often cause pain but can prolapse (get pushed out) and cause a wet feeling because of the mucus being produced. They are made worst by constipation and straining to produce a bowel motion.
- External haemorrhoids are on the outside of the anus and are covered by skin. They can be itchy and painful and the extra loose skin can produce irritating skin tags. These skin tags very rarely require treatment.

If a blood clot develops in either type of haemorrhoid, they can become quite painful. Haemorrhoids can also become 'strangulated', which is when the blood supply gets cut off by the anal sphincter muscle.

### What causes them?

Haemorrhoids are very common throughout the population. Constipation, straining, heavy lifting, pregnancy and child birth, and obesity are all risk factors.

Your doctor will have diagnosed your haemorrhoids after carrying out a physical examination of your back passage and asking you about your medical history.

#### What treatments are available?

There are a number of ways of treating haemorrhoids. Most do not require surgery. Your doctor has recommended that you have a type of treatment that is carried out in the Outpatients Department. Depending on the type of haemorrhoid that you have, the doctor may have recommend either:

- **Banding** a tight elastic band is put around the base of the haemorrhoid. This cuts off the blood supply and causes the haemorrhoid to shrink.
- **Injecting** a substance called phenol 5% is injected into the base of the haemorrhoid, which causes it to shrivel up and shrink.

Both recommended treatments are non-surgical and you won't need any anaesthetic. The area treated within the back passage does not have the sensitive nerves that cause severe pain.

# Important points to tell your doctor before treatment

Please inform the doctor or nurse if you have any allergy, but specifically to latex or nuts, as phenol contains almond oil.

Compassionate	Aspirational	Resourceful	Excellent
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Please inform the doctor or nurse if you take any anticoagulation medications to thin the blood.

### What does the treatment involve?

Treatment will be carried out with you lying on your left side with your knees pulled up to your chest, or as far as you can in this position. A proctoscope (narrow tube with a light) will be inserted into your anus at the start of the procedure. This allows the doctor to see the haemorrhoids easily and clearly.

If your haemorrhoids are being treated with banding, gentle suction will be applied to the base of the haemorrhoid using a special device. The band will then be put over the haemorrhoid. One to two bands are applied to each haemorrhoid.

If you are having the injections, then a special solution (phenol) will be injected into the base of each haemorrhoid.

Neither procedure takes very long; about 5 to 10 minutes is the usual length of time.

Please note that it may not be possible to treat all of the haemorrhoids on one occasion and your doctor may suggest you return for further assessment and treatment at a later date.

## Side effects and complications

- Pain and discomfort: You may experience some mild to moderate discomfort for a few days after the treatment. Some patients feel a pressure sensation of wanting to pass a motion for a few days after the procedure. We recommend that you take simple painkillers (paracetamol or an anti-inflammatory such as ibuprofen) for a few days afterwards. If your pain becomes severe the day after the procedure, you should seek advice from NHS 111, your GP or go to the Emergency Department (A&E) at your local hospital.
- Other complications are generally rare, but you need to be aware of them and must seek
  help from your GP or go to the Emergency Department if they become severe. Less than 3 in
  every 100 people will need to have further treatment or need to stay in hospital because of
  these complications:
  - Bleeding: Mild blood loss may occur immediately or at a later stage up to 10 to 14 days
    after treatment with banding, and can be seen in any stools (poo) passed. If there is a
    large amount of blood or heavy bleeding, you will need to seek urgent medical help.
    Either contact your GP or go to the Emergency Department at your local hospital.
  - o In rare cases an infection and / or ulceration may develop.
  - Infections: In very rare cases injections using phenol may cause infection and / or an abscess – if you develop symptoms of infection, such as inflammation, a high temperature, severe pain, or discharge of pus, you will need to seek medical attention.
  - In rare situations, some people feel a short period of temporary little light headedness and faintness following the procedure. For this reason, we will ask you to remain in the department for 20 to 30 minutes afterwards for this to resolve.

### **Aftercare**

- Keep your anal area clean by washing at least twice a day with warm water. This will also help to promote healing.
- Prevent constipation by following a good diet with a decent amount of dietary fibre. Do not spend a long time on the lavatory or strain to pass stool, as this can cause pressure and make the haemorrhoids worse. Your doctor may recommend you take a laxative to help with this.
- Drink plenty of fluids as this will help keep your stool soft. A normal healthy person should drink approximately two litres of water per day.
- It is important that you continue to maintain these good habits to help prevent the haemorrhoids from coming back.
- If you are on anticoagulation medications that thin the blood, your doctor will advise you on when to restart these medications.

If you require further follow up this will be explained to you and you will be contacted by our administrative team with regards to appointment dates and times.

### Contact us

Surgical Assessment Unit (SAU) 0118 322 7541 General Outpatients Department 0118 322 8245

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

Department of General Surgery, August 2022

Next review due: August 2024