Removal of Haemorrhoids
Information for outpatient treatment
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 with 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 worse by being constipated 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.

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 completely cut off by the anal sphincter muscle.
What causes them?

There most common causes of haemorrhoids include constipation, straining, pregnancy and childbirth, obesity and vomiting.

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

What treatments are available?

There are a number of ways of treating haemorrhoids. Your doctor has recommended that you have a type of treatment which is carried out in the outpatient department. Depending on the type of haemorrhoid that you have, the doctor will recommend either:

- Banding – a tight (latex-free) elastic band is put around the base of the haemorrhoid. This cuts off the blood supply and causes the haemorrhoid to fall off within about seven days.

- Injecting a substance called phenol 5%, which will cause the haemorrhoid to shrivel up.

These recommended treatments are non-surgical and neither procedure requires you to have any anaesthetic.

Please inform the doctor or nurse if you have an allergy to either latex rubber or to nuts, as phenol contains almond oil.
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 (a narrow tube with a light) will be inserted into your rectum 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 haemorrhoid using a special device. The band will then be put onto the haemorrhoid. Two or three double bands are applied to each haemorrhoid.

• If you are having the injection, then a special solution will be injected into the base of each haemorrhoid.

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

Side effects and complications

**Pain and discomfort**

You may experience some mild to moderate pain for a few days after the treatment. We recommend that you take painkillers (paracetamol or anti-inflammatory drugs 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 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 for between 5 to 10 days after treatment with banding, and can be seen in any feaces 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.

In rare cases an infection and/or ulceration may develop.

**Injections**

Injections using phenol 5% in very rare cases may cause:

- an infection and abscess – if you develop symptoms of an infection, such as inflammation, a high temperature or tenderness, you will need to see your GP.

**You may feel a little light-headed and faint following the procedure. For this reason we will ask you to remain in the department for 20-30 minutes afterwards, for this to settle down.**

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**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 which contains a decent amount of dietary fibre. Do not spend a long time on the lavatory or straining to pass a stool, as this can cause pressure and make haemorrhoids worse.

Drink plenty of fluids, as this will help to keep your stools soft. A normally 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.
Signs to look out for

If you develop any of the following symptoms you will need to seek medical help from your GP or NHS 111:

• a high temperature above 37.5°C
• the area around your anus becoming hot, inflamed and red
• any yellow pus coming from the area.

Further information

Further information or advice can be sought from your GP or from:

**NHS 111**
Dial 111 from a landline or mobile (freephone).
If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALSJR@ouh.nhs.uk**