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Endoscopy

Gastrointestinal Medicine

Nutrition



The Centre for GI Health

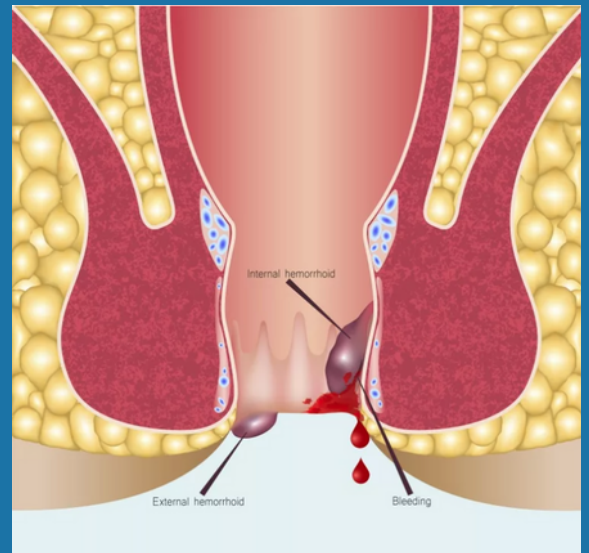
HAEMORRHOIDS

Haemorrhoids, sometimes called piles, are dilated, enlarged veins that develop within the anal canal and are present in up to 50% of adults.

Such as varicose veins may develop in the lower limbs, haemorrhoids may develop as an inherited tendency. They can also occur after repeated episodes of straining such as occurs with constipation, and during pregnancy. As haemorrhoids enlarge, their surface lining becomes fragile and may bleed producing bright blood, which is often passed separate from bowel material.

Haemorrhoids may be internal (common) or external and in the case of external haemorrhoids thrombosis can occur and is felt as a painful, sensitive lump.

When internal haemorrhoids become very large they may prolapse or protrude through the anal canal and their appearance is sometimes likened to a "bunch of grapes". This disconcerting occurrence can be dealt with surgically.



TREATMENT

Small haemorrhoids

May be managed by simply increasing the fibre intake of your diet so that straining no longer occurs. The application of an ointment such as Rectinol, Proctosedyl, Anusol or Soovit etc is often extremely helpful. These over-the-counter preparations are relatively inexpensive.

As haemorrhoids become larger...

and bleed, surgeons have a variety of techniques for dealing with them. These include the application of rubber bands that ligate (tie off) the vascular structure, injection sclerotherapy, or photocoagulation. These techniques are performed in the rooms without sedation or anaesthesia and are surprisingly painless.

As haemorrhoids become larger still...

and prolapse, surgical excision under anaesthesia may need to be performed. This requires hospitalisation.

Rectal bleeding always requires review from your local doctor. Never assume bleeding is from haemorrhoids as alternative diseases such as polyps, colitis or malignancy may be the true cause of blood loss.