

Hemorrhoid treatment doesn't always involve surgery

October 7 2010



Whole grains are a good source of fiber

(PhysOrg.com) -- University of Cincinnati experts say unexplained pain or rectal bleeding during bowel movements could be an indication of hemorrhoids, sexually transmitted diseases, infection or even certain cancers.

"I'm having some issues 'down there' ... I think I have hemorrhoids. Anyone ever had this problem?"

It's not a topic that often comes up in casual conversation, but it is a question that shouldn't be ignored. UC Health experts say unexplained pain or rectal bleeding during bowel movements could be an indication of hemorrhoids, sexually transmitted diseases, infection or even certain cancers.



"The bottom line is that these symptoms should never be ignored," says Martha Ferguson, MD, a UC assistant professor of surgery and UC Health colorectal surgeon.

"Many times people come to me complaining of 'hemorrhoids,' when in reality there is something —a fissure, a polyp, even a <u>cancer</u>—causing the symptoms. It's important that people seek medical advice when these warning signs, such as bleeding or a change in bowel habits, develop. Colon and rectal cancers that are caught in the early stages are often curable with surgery."

Hemorrhoids are normal blood vessels within the anus or lower rectum that have become enlarged due to excess pressure. When these blood vessels stretch and become thin, they can bleed. Left untreated, hemorrhoids can protrude out of the anus to cause irritation, bleeding and other complications.

Excessive anal vessel pressure can be caused by a variety of factors, including pregnancy, strenuous physical exertion, extra body weight and strain from sitting—whether it's on the toilet or in a desk chair.

All people have hemorrhoids to a certain degree, says Ferguson, which—in addition to the anal sphincter muscles—help control gas and stool during straining. It's when they become engorged and bulge, internally or externally, that they cause discomfort and complications.

Low-grade hemorrhoids can be treated with dietary changes and fiber supplements. Advanced-grade hemorrhoids, however, may require an outpatient procedure or surgical intervention.

UC Health colorectal surgeons offer a full spectrum of treatment options for hemorrhoids, from relatively painless outpatient procedures done with local numbing agents to more complex surgical interventions.



Outpatient treatments include:

-- Rubber band ligation: During this procedure, the surgeon uses a viewing instrument (anoscope) to secure a piece of the hemorrhoid. The piece is tied off at its base with rubber bands, cutting off the blood flow to the hemorrhoid. In about a week, the banded piece of hemorrhoid dies and the overall tumor shrinks in size. The technique is typically used for larger internal hemorrhoids that do not improve with dietary changes.

-- Infrared photocoagulation: This technique uses a pulsed beam of light to seal off the blood supply feeding the hemorrhoid. Over a period of time, the hemorrhoid tissue—which no longer has a blood supply—shrinks and dies. This procedure is most often used for smallto medium-sized hemorrhoids.

Both procedures are relatively painless and are performed without anesthesia.

"There is a stigma attached to medical issues associated with this part of the body that, unfortunately, causes many people to delay seeking treatment. No one should have to suffer through painful irritation because they are embarrassed," adds Ferguson.

Provided by University of Cincinnati

Citation: Hemorrhoid treatment doesn't always involve surgery (2010, October 7) retrieved 3 February 2024 from <u>https://medicalxpress.com/news/2010-10-hemorrhoid-treatment-doesnt-involve-surgery.html</u>

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