

Information about Haemorrhoids (Piles)



What are Haemorrhoids?

Haemorrhoids are often described as “varicose veins of the anus and rectum”, haemorrhoids are formed as supporting tissues stretch and allow the blood vessels to expand. When this stretching and pressure continues the vessels can protrude (bulge).

Internal haemorrhoids form within the anus and can cause painless bleeding or a protrusion (bulge) which occurs during bowel movements. They can also lead to pain, itch and mucous discharge.

External haemorrhoids form near the anus on the outside and may be covered by sensitive skin. If a blood clot forms in an external swelling this is called a thrombosed external haemorrhoid. This can cause sudden pain which gets worse during the first 48 hours. The pain generally lessens over the next few days. You may notice bleeding if the skin on top of the swelling opens.

What are the causes of Haemorrhoids?

The exact cause of haemorrhoids is unknown but factors which may contribute include:

- Aging
- Pregnancy
- Constipation or diarrhoea
- Straining on the toilet
- Spending long periods on the toilet e.g. reading

What are the symptoms of Haemorrhoids?

Any of the following may be a sign of haemorrhoids although they can be caused by other bowel conditions.

- Bleeding and, or protrusion of skin during bowel movements
- Itching and, or pain in the anal area
- Sensitive lump(s)
- Persistent (less than 2 weeks) severe pain is not a common symptom of haemorrhoids and requires investigation

What is the treatment for Haemorrhoids?

Self-care

In most cases, pain and swelling usually decrease in 2-7 days. The firm lump should recede within 2-4 weeks. Treatment includes:

- A high-fibre diet or taking an over-the-counter fibre supplement e.g. Fybogel.

More than 50% of haemorrhoids will resolve with fibre alone.

- Avoid straining when going to the toilet to reduce pressure on haemorrhoids and help prevent protrusion.
- Drink more water to help prevent hard stools.
- Regular warm baths for 10-20 minutes several times per day helps soothe the area.
- Your pharmacist may be able to advise on steroid or anaesthetic suppositories or cream to help with the symptoms.

Surgical treatment

Surgical treatment is rarely necessary and carries a risk of complications. These include bleeding after surgery 1 to 2% (1 to 2 patients out of 100) incontinence 1-5% (1 to 5 patients out of 100), narrowing of the anus 1% (1 out of 100 patients) persistent pain less than 5% (less than 5 out of 100 patients) and recurrence 5% (5 out of 100 patients).

Pain often settles as quickly with self-care.

What do I do now?

We do not routinely provide a hospital appointment.

After reading this leaflet if you think that you do not need to discuss surgical treatment at the moment, you do not need to take any further action. You can get advice from us directly in the future if self-care fails to improve symptoms or symptoms from haemorrhoids recur frequently.

If you wish to come to clinic to discuss the surgical treatment options, please book an appointment with us by telephoning us on the number provided in the covering letter.

