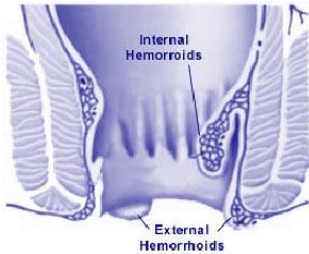# ALASKA
COLORECTAL SURGERY

HEMORRHOIDS

What are Hemorrhoids?

Hemorrhoids are enlarged veins in the anal area covered with the lining of the rectum or skin. They are similar to varicose veins in the leg. They may be located inside the anus (internal hemorrhoids) or outside the anus (External hemorrhoids). It is fairly common for people to have both internal and external hemorrhoids at the same time. There are usually three internal and three external hemorrhoids.

Why do people get hemorrhoids?

There is no easy answer to this question. While everyone has veins in this area, not everyone develops hemorrhoid problems. The enlargement of the veins may be due to constipation, prostate trouble in men, or chronic cough - all of which cause straining and increased pressure in the abdomen. They may be related in part to a diet without bulk fiber and roughage (such as bran, fresh fruit, and fresh vegetables). There may be a hereditary factor in some cases, or there may be no specific explanation at all. Some people develop hemorrhoids for as yet undiscovered reasons.

Are hemorrhoids caused by heavy lifting, prolonged sitting, or other work-related activities?

While these activities can sometimes make hemorrhoids more bothersome or noticeable, these activities do not cause hemorrhoids.
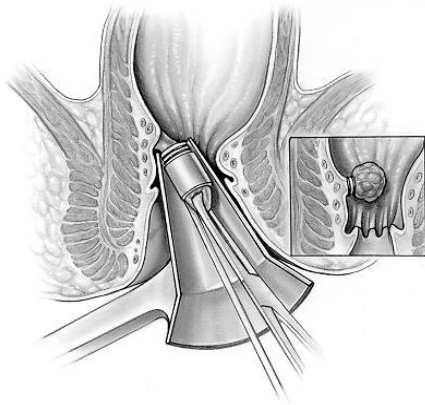
How do hemorrhoids bother people?

Hemorrhoids can be troublesome in several ways. Internal hemorrhoids may cause bleeding, and/or may fall out of the anal canal, requiring a person to push them back up inside after bowel movements. External hemorrhoids may become swollen and painful. While these are not usually serious or life-threatening problems, some require careful evaluation. Bleeding, in particular, can be caused by a hemorrhoid or

from another problem, higher up, such as inflammation of the bowel, a polyp, or cancer.

Should hemorrhoids always be treated?

Not necessarily. If symptoms are mild or infrequent, often no treatment is required. For more severe symptoms, the goals are relief of pain, and the restoration of normal function. Bleeding, whether painful or not, should always be evaluated and usually should be treated. A change in bowel habits should likewise be evaluated, because of the possibility of bowel disease or cancer.

What types of treatment are used?

This depends on the severity and location of the hemorrhoids. For mild or intermittent symptoms, sitz baths (soaking the affected area in warm water, with no additives, for 20 minutes, 2-4 times daily) and a special cream are usually all that is necessary. For external hemorrhoids, which develop painful clots (called "thrombosis"); removal of the external hemorrhoid in the office, using a Novocain-type anesthetic usually brings dramatic relief. Removal of the external hemorrhoid prevents the problem from recurring in the same place.

For people with internal hemorrhoids only, tiny rubber bands can be placed around the base of the hemorrhoids, causing them to shrink and fall off. This procedure is done in the office, and usually causes minimal discomfort. For those persons with larger, more severe hemorrhoids (usually external and internal hemorrhoids together), surgical removal of the hemorrhoids may be the simplest permanent solution. This is an outpatient procedure and does not require an overnight stay in the hospital.

What about other types of treatment for hemorrhoids?

Other therapies for hemorrhoids gain popularity for time to time, such as cautery (burning), cryotherapy (freezing), laser therapy and stretching the anus. These techniques have not had nearly the permanent long-term relief of hemorrhoids which rubber-banding or surgery offer, are often actually more painful, and are more complicated than necessary for simple hemorrhoid problems.

Will hemorrhoids come back after treatment?

For the external hemorrhoid removal and rubber band methods, recurrences occasionally happen, usually after several years, but can often be treated again with similar conservative techniques. After surgical removal of hemorrhoids, it is rare for hemorrhoids to ever come back.