You will be given painkillers and laxatives to take regularly for the first week, and you will find that frequent baths or showers help a lot. It is also common to have swelling of the skin in-between the wounds where the piles have been removed, that can last for four to six weeks after the operation. Haemorrhoidectomy relieves the symptoms of piles in 80-90 per cent of people who have the operation. Occasionally people have skin tags or staining on their underwear after haemorrhoidectomy. If someone continues to strain when passing stool for years after a haemorrhoidectomy they can grow new piles. Only a very small proportion of people with piles need haemorrhoidectomy.

What else can cause bleeding from your anus?

Although piles are the commonest cause of bleeding from your anus, there are other possible causes including anal fissure, inflammatory bowel disease, bowel polyps and bowel cancer. Bowel cancer is the most important of these but is very rare in patients under fifty. Nevertheless if you have bleeding from your bottom that continues for more than six weeks you should see a specialist doctor or nurse who can examine the lining of your bowel to check for any sign of cancer or other conditions that cause bleeding. People who have bowel cancer and who are diagnosed while the cancer is still small have a very good chance of being cured.

Patient information sheet

Piles

The Whittington Hospital NHS Trust Magdala Avenue London N19 5NF

> Phone: 020 7272 3070 www.whittington.nhs.uk SUR/Piles/1

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Piles are swollen spongy vascular cushions just inside the anus. They are the commonest cause of bleeding from the anus. Apart from bleeding they can also cause itching and pain, and sometimes swell up outside the anus which can be very painful. Bleeding from piles is usually fresh, so is bright red, not purple. The blood is noticed on the toilet paper and in the pan.

It is very uncommon for people with piles to need an operation, and if so this is done to control bleeding and/or pain.

Piles treatments:

1) High fibre and water diet. Eating a lot of fruit and veg and drinking plenty of water makes your stool softer. If your stool is soft (like porridge) not hard (like sausages, or pellets) then piles usually settle down and stop causing pain and bleeding. More than 90 per cent of people with piles can treat themselves successfully by improving their diet in this way.

2) Piles creams and ointments. You can buy many different types of piles creams, ointments and suppositories from the chemist without a prescription. Most of these work by drying up the surface of the pile and reducing the swelling. They work best if used with the dietary changes described above.

3) Injection treatment. If your piles cause bleeding or pain that persists even after you have improved your diet, and if the piles do not come down outside your anus, then they may be helped by injection treatment. This is usually done in a hospital outpatient clinic by a specialist surgeon or nurse. The injection is done through a small tube inserted into your anus.

It takes about a minute to do. Some people get a little bleeding or aching afterwards but this usually settles the same day. The injection is not felt as something sharp since it is done up inside your bowel. The liquid injected is called oily phenol, and it works by shrinking the piles. Some people need up to three injections. The injections take four to six weeks to have their full effect. When tested, injections produce similar results to a good high fibre diet in reducing the symptoms of piles. 4) Banding. If your piles are quite big, but usually stay inside your bottom, then they may be suitable for banding treatment. This is usually done by a specialist surgeon or nurse in the hospital outpatient clinic. A tight rubber band is applied through a small tube that is put into your anus. The band grips the upper part of the pile and makes it dry up and drop off a few days later. When it drops off you may notice some fresh bleeding; if this causes you concern, then contact the hospital at once. Occasionally banding is done under general anaesthetic as a day case to give a better result. Normally there is no more than mild discomfort after this procedure.

5) Operation: haemorrhoidectomy. If your piles come down outside your bottom a lot and cause you a lot of pain and/or bleeding then you may wish to consider having them removed by a haemorrhoidectomy. This operation is done as a day case under general anaesthetic, and involves cutting the piles off. Because of this, it can be quite painful for the first few times you open your bowels after the operation.