

What are hemorrhoids ?

Hemorrhoids are merely swollen veins. The affected tissue may, at times, extend outside the body; this is called prolapse, and it's a sign of an advanced stage of hemorrhoids.

Causes and risk factors for hemorrhoids:

- Straining to move your bowels (constipation)
- Pregnancy, due to the strain of carrying the baby and giving birth
- Sitting too long on the toilet
- Increased risk as you get older
- Increased risk if your parents had them
- Standing too much
- Being overweight
- Lifting too much
- Food habits (spicy food, red meat, non-fibrous substance)

How can you get rid of them?

Until recently, there were only two major methods of hemorrhoids removal. Your doctor would either remove the affected tissue with a knife during a hemorrhoidectomy, or tighten tiny rubber bands around the affected area to cut off its blood supply during a Rubber Band Ligation.

A new technique called Minimally Invasive Procedure for Hemorrhoids (MIPH) is far more convenient and far less painful than these traditional hemorrhoid procedures.

Hemorrhoid symptoms may include itching, pain, swelling, cracking, bleeding, or sensitive lumps.

Why Minimally Invasive Procedure for Hemorrhoids (MIPH) ?

MIPH puts things back where they belong.

MIPH essentially "lifts up" the hemorrhoidal tissue and places it back where it belongs-in the original, normal anatomical position.

Who performs MIPH?

The procedure is done in an operating room or surgeon.

Short procedure

MIPH is usually performed in 30 to 45 minutes. It may be performed under local, regional, or general anesthesia. You're able to return home shortly after the procedure.

Minimal pain

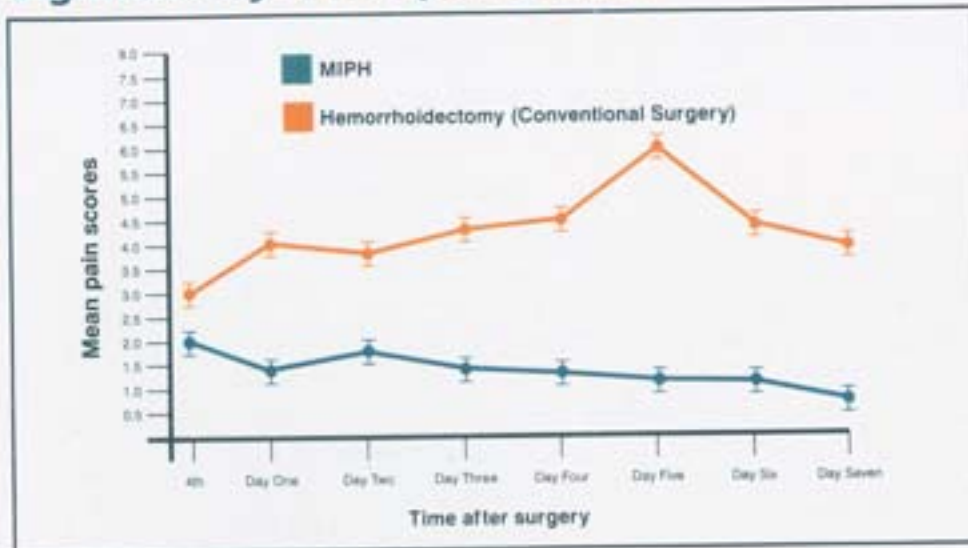
MIPH results in less pain than traditional procedures because it is performed in a section of the anus that has few nerve endings. Traditional procedures are performed in a section that has many sensitive nerves. In other words MIPH is performed at less sensitive part of the body.

Fast recovery

Patients who undergo MIPH return to normal activity in a significantly shorter time than patients undergoing conventional surgery.

The complication rates of MIPH are comparable to those of conventional hemorrhoidectomy.

Significantly lower pain scores



Reference: Roswell M, Bello M, Hemingway DM. Circumferential mucosectomy (stapled hemorrhoidectomy): randomized, controlled trial. *Lancet*. 2000;355:779-781.

In a head-to-head clinical trial,* hemorrhoid patients received either conventional surgery or MIPH.

Patients having MIPH:

- Experienced significantly less post-procedure pain.
- Experienced less post-procedure bleeding, itching, incontinence, and constipation compared to conventional surgery.

* Data presented at the 2003 American Society for Colon and Rectal Surgeons

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As with any surgical procedure, MIPH may present risks. You should talk to your doctor about these risks and discuss which procedure is appropriate for you.

Talking about your medical condition

Even though you may feel embarrassed about discussing your hemorrhoid symptoms with your doctor, it's important as it is the first step in finding relief.

Symptoms

What you should do

Swelling
Itching
Burning

These are the most common symptoms of hemorrhoids, but don't underestimate the importance of discussing them with your doctor.

Talk about any over-the-counter medications you're using and whether or not they help reduce symptoms.

Aching after
passing stools

This pain indicates an increased sensitivity of the swollen veins. Be sure to mention it.

Symptoms

What you should do

Bright red blood on toilet tissue or in the toilet after passing stools

Bleeding could be due to multiple reasons. It's important you see your doctor to determine the cause.

Prolapse (Lump or mass that you can feel)

Sometimes, a hemorrhoid inside your body may stretch until it bulges outside of the anus. That's a prolapsed hemorrhoid. It may go back into your body on its own or when gently pushed. Either way, you should discuss surgical options with your doctor.

Comparison of treatments

1st degree hemorrhoid symptoms:

Itching, swelling, discomfort

Treatment options	Pros	Cons
Over-the-counter topical medications such as creams, suppositories, or wipes	Convenient to carry anywhere; affordable; over treatment; immediate symptom relief	Messy; unpleasant to apply; no permanent effect; relief is limited for more advanced cases
Sitz bath	Provides some relief on contact; affordable; you have some control over treatment	Time-consuming; not portable; relief is temporary
Dietary	Inexpensive	Inconvenient; requires large change in social and family environments; long-term success varies
Sclerotherapy Involves an injection of a solution into mucous tissue inside the anus	Simple, relatively painless	Long-term success rate is sparsely reported; used only when bleeding is the main symptom
Infrared coagulation Involves the destruction of hemorrhoids using infrared light	Removes hemorrhoids rather than just treating it; can be performed in a doctor's office	May require several visits

2nd degree hemorrhoid symptoms:

Extreme swelling, burning, itching, prolapse that goes back inside on its own

Treatment options

Pros

Cons

Sclectotherapy

Involves an injection of a solution into the mucous tissue inside the anus

Simple, relatively painless

Long-term success rate is sparsely reported; used only when bleeding is the main symptom

Rubber Band Ligation

Involves placing small surgical bands tightly around a hemorrhoid, which cuts off the blood supply. Eventually, the hemorrhoid dies due to lack of blood flow, falls off, and is eliminated from the body

Removes hemorrhoids rather than just treating it; can be performed in a doctor's office with little preparation

May require several visits

Minimally Invasive Procedure for Hemorrhoids (MIPH), performed by a surgeon in an operating room

Involves stapling the hemorrhoid back into its proper place

Places hemorrhoids back into anal cavity rather than just treating it or cutting it off; 30-to 45-minute procedure; recovery is much less painful than with surgery that requires cutting; involves a section of the anus that has few pain receptors; return to normal activity in significantly shorter time than patients undergoing conventional hemorrhoidectomy; can be performed under local, regional, or general anesthesia

Although rare, there are risks that accompany MIPH. If too much muscle tissue is drawn into the device, it can result in damage to the rectal wall. Also, the internal muscles of the sphincter may be stretched, resulting in short-or long term incontinence.

Comparison of treatments

3rd degree hemorrhoid symptoms:

Extreme swelling, burning, itching, bleeding, prolapse that can be pushed back inside

Treatment options

Pros

Cons

Rubber Band Ligation

Removes hemorrhoids rather than just treating it; can be performed in a doctor's office with little preparation

May require several visits

Hemorrhoidectomy (Conventional surgery)

Removes hemorrhoids rather than just treating it; hemorrhoid return rate is low

A scalpel is used during surgery to cut out the hemorrhoids; extremely painful recovery, even more painful than the hemorrhoid itself; 2 to 3 weeks before return to normal activity; requires general anesthesia; possibility of wound infection; chance of short- or long-term incontinence.

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4th degree hemorrhoid symptoms:

Extreme swelling and pain, prolapse that cannot be pushed back inside

Treatment options

Pros

Cons

Hemorrhoidectomy

Removes hemorrhoids rather than just treating it; hemorrhoid return rate is low

A scalpel is used during surgery to cut out the hemorrhoids; extremely painful recovery, even more painful than the hemorrhoids itself; 2 to 3 weeks before return to normal activity; requires general anesthesia; possibility of wound infection; chance of short- or long-term incontinence.

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