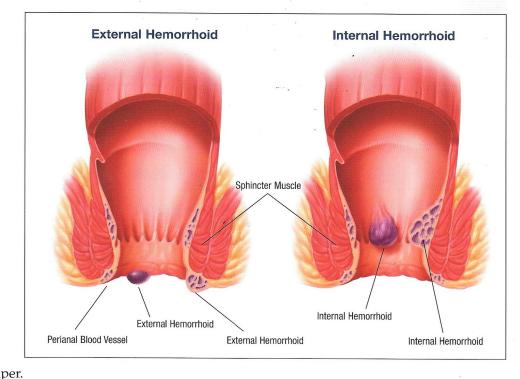
What You Need to Know About

Hemorrhoids

What Are Hemorrhoids?

Hemorrhoids are veins in the rectum or around the anus that have become enlarged, swollen or inflamed. More than half the US population will develop hemorrhoids, usually after age 30.

There are two kinds of hemorrhoids—internal and external. Internal hemorrhoids are located inside the rectum. Usually, you can't feel or see them, unless they protrude through the anus, forming a prolapsed hemorrhoid. Internal hemorrhoids may bleed occasionally and leave small traces of blood on the toilet paper.



External hemorrhoids are located outside the anus under sensitive skin. They resemble small, soft, skintoned pads around the anal opening, and can be especially uncomfortable during a bowel movement. If a blood clot forms in an external hemorrhoid, it may appear blue in color and cause significant pain, itching and inflammation.

What Causes Hemorrhoids?

Hemorrhoids are often caused by increased pressure in the veins of the rectum and anus, resulting from factors including:

- Chronic diarrhea or constipation that causes straining
- ◆ Pregnancy
- Sitting or standing for long periods of time
- ♦ Heavy lifting
- Being overweight/obese
- Sitting on the toilet for long periods of time (e.g., reading)
- ◆ Family history of hemorrhoids or varicose veins

What Are the Symptoms of Hemorrhoids?

Hemorrhoidal symptoms may include:

- ◆ Pain and/or itch around the anal area
- ◆ Blood on the toilet tissue (sometimes in toilet bowl)
- ◆ Feeling of pressure around the anus
- ◆ Feeling of incomplete evacuation of the bowel
- ◆ Tender protrusion from the anus

Hemorrhoidal symptoms are usually not serious, and with treatment, can resolve in a few days. However, should symptoms such as persistent pain or rectal bleeding occur, see your doctor to rule out any serious health conditions.

How Are Hemorrhoids Diagnosed?

Your doctor will examine the anus and rectum to locate any swellings or abnormalities. Your doctor may decide to do a more thorough examination with an anoscope or proctoscope. These instruments are lighted tubes that allow the doctor to view any internal hemorrhoids.

How Are Hemorrhoids Treated?

Diet and Lifestyle Changes

The first step in hemorrhoid treatment is usually to make positive lifestyle changes, such as:

- Eat a healthy diet with plenty of fiber to make passing stools easier
- ◆ Avoid straining during bowel movements and limit toilet time
- Lose weight and increase exercise to manage symptoms and prevent recurrence

Non-Operative Treatments and Office Procedures

If your hemorrhoids do not improve from lifestyle changes, your doctor may advise other treatment options. In general, hemorrhoid treatments are relatively painless, and may include:

- ◆ Sitz baths relax in a warm tub for about ten minutes to relieve symptoms.
- Prescription Topical Creams usually prescribed to deliver prompt relief of pain, itching and/or inflammation.
- ◆ Sclerotherapy a chemical is injected to shrink the hemorrhoid.
- Rubber Band Ligation one or two very small rubber bands are tied around the base of a hemorrhoid to cut off circulation to the tissue. Within 7 to 10 days, the hemorrhoid often painlessly falls off.
- ◆ Infrared Light Therapy a one- or two-second burst of infrared light cuts off circulation to the hemorrhoid with the intended goal of destroying it.
- ◆ Laser Therapy a laser beam is used to vaporize hemorrhoidal tissue.
- ◆ Cryosurgery the affected tissue is frozen to cut off circulation.
- ◆ Electric Current a burst of electric current is used to shrink hemorrhoidal tissue.

Operative Hemorrhoidectomy

that do not respond to other treatments.

If other procedures have been unsuccessful in bringing relief, a physician can remove the hemorrhoid in a surgical procedure called a hemorrhoidectomy. This procedure often involves a one- or two-day hospital stay, as well as a period of inactivity afterward. Surgery is reserved for cases

- **Note:** Increase your fiber intake gradually. Eating too much fiber too soon can cause an uncomfortable bloated feeling and abdominal cramps. Increase your fiber intake over several weeks, drinking plenty of water, until you reach the recommended amount.
- ** U.S. Department of Agriculture, Agricultural Research Service. USDA National Nutrient Database for Standard Reference, Rel. 17. Available at: http://www.nal.usda.gov/fnic/foodcomp/. Accessed January 19, 2006.

Tips for a Healthy Lifestyle to Help Avoid Hemorrhoids

- 1. Eat a healthy, balanced diet with plenty of fiber, fruits and vegetables (see table below).
- 2. Substitute high-fiber foods for foods already in your regular diet. For example, use whole wheat bread instead of white bread, brown rice instead of white rice, and eat raw vegetables and vegetable skins, when possible.
- **3.** Avoid putting off using the bathroom. Delaying can cause hard stools that require straining to pass.
- 4. Drink plenty of water every day. Keeping your body properly hydrated keeps feces soft, because the body does not need to reabsorb fluid from the stools.
- Wash your bottom with damp, soft toilet tissue and non-perfumed soap after each bowel movement rather than wiping with dry tissue.
- 6. Avoid sitting on the toilet for long periods of time, as this can lead to pressure on the rectal veins.

Recommended Total Daily Fiber Intake*AgeMenWomen19-5038 grams/day25 grams/dayOver 5030 grams/day21 grams/day

Food	Serving size	Fiber grams per serving
Apple	1 medium	3.3
Asparagus	1/2 cup	1.5
Blackberries	1 cup	7.6
Bran flakes	3/4 cup	5.1
Broccoli	1/2 cup	2.8
Brown rice	1/3 cup	1.2
Brussels sprouts	1/2 cup	3.2
Carrots	1/2 cup	2.3
Corn	1/2 cup	2.1
Grapefruit	1/2 medium	2
Green beans	1/2 cup	1.3
Green peas	1/2 cup	3.5
Kidney beans	1/2 cup	6.6
Pear	1 medium	5.1
Pinto beans	1/2 cup	5.5
Potato (with skin)	1 medium	4.4
Prunes	2 medium	2
Spinach -	1/2 cup	3.5
Whole wheat bread	1 slice	1.9
Zucchini	1/2 cup	1

Hemorrhoids



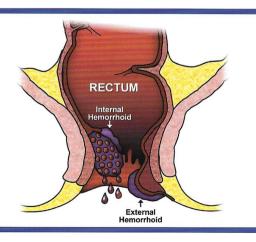


Hemorrhoids

Often described as "varicose veins of the anus and rectum," hemorrhoids are enlarged, bulging blood vessels in and around the anus and lower rectum. The rectum is the bottom section of your colon (large intestine). The tissues supporting the vessels stretch. As a result, the vessels expand, the walls thin, and bleeding occurs. When the stretching and pressure continue, the weakened vessels protrude. The two types of hemorrhoids, external and internal, refer to their location.

External (outside) hemorrhoids form near the anus and are covered by sensitive skin. They are usually painless unless a blood clot (thrombosis) forms.

Thrombosed external hemorrhoids are blood clots that form in an outer hemorrhoid in the anal skin. If the clots are large, they can cause significant pain. A painful anal mass may appear suddenly and get worse during the first 48 hours. The pain generally lessens over the next few days. You may notice bleeding, if the skin on top opens.



Internal (inside) hemorrhoids form within the anus beneath the lining. Painless bleeding and protrusion during bowel movements are the most common symptoms. However, an internal hemorrhoid can cause severe pain, if it is completely prolapsed. This means it has slid out of the anal opening and cannot be pushed back inside.

Hemorrhoid Facts and Stats

- Hemorrhoids are one of the most common known ailments.
- Millions of Americans currently suffer from hemorrhoids.
- The average person suffers for a long time before seeking treatment for hemorrhoids.
- Advances in treatment methods means some types of hemorrhoids can be treated with far less painful methods than before.

Causes

The exact cause of hemorrhoids is unknown. A lot of pressure is put on human rectal veins due to our upright posture, which can potentially cause bulging. Other contributing factors include:

- Aging
- · Chronic constipation or diarrhea
- Pregnancy
- Heredity
- Straining during bowel movements
- Faulty bowel function due to overuse of laxatives or enemas
- Spending long periods of time on the toilet (e.g., reading)

Symptoms

Any of the following may be a sign of hemorrhoids:

- Bleeding during bowel movements
- Protrusion of skin during bowel movements
- Itching in the anal area
- · Pain in the anal area
- Sensitive lump(s)

Nonsurgical Treatment

It is important that symptoms are checked by a colon and rectal surgeon first before you try self-treatments. They will perform a thorough examination and recommend treatment. Mild symptoms can be relieved frequently without surgery. With nonsurgical treatment, pain and swelling usually decrease in 2–7 days. The firm lump should recede within 4–6 weeks.

Treatment includes:

- Eating a high-fiber diet and taking over-the-counter fiber supplements (25–35 grams of fiber/day) to make stools soft, formed and bulky.
- Avoiding excessive straining to reduce the pressure on hemorrhoids and help prevent protrusion.
- Drinking more water to help prevent hard stools and aid in healing.
- Taking warm tub baths (sitz baths) for 10–20 minutes, a few times per day to help the healing process.

Surgical Treatment

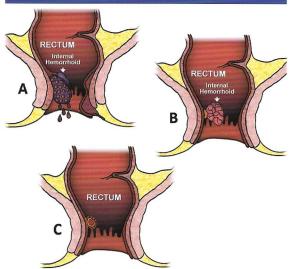
If pain from a thrombosed hemorrhoid is severe, your physician may decide to remove the hemorrhoid and/or clot with

a small incision. These procedures can be done at your physician's office or at the hospital under local anesthesia.

Rubber band ligation: This treatment works well on internal hemorrhoids that protrude during bowel movements. A small rubber band is placed over the hemorrhoid, cutting off its blood supply. The hemorrhoid and the band fall off in a few days. The wound usually heals in 1–2 weeks. Mild discomfort and bleeding may occur. Sometimes this treatment needs to be repeated for complete treatment of the hemorrhoids.

Injection and coagulation: This method can be used on bleeding hemorrhoids that do not protrude. Both methods are fairly painless and cause the hemorrhoids to shrivel up.

Rubber Band Ligation of Internal Hemorrhoids



- **A.** Bulging, bleeding internal hemorrhoid
- B. Rubber band applied at the base of the hemorrhoid
- C. Banded hemorrhoid falls off, leaving a small scar at the base

Hemorrhoid stapling: A special device is used to apply staples and remove tissue from internal hemorrhoids. While the stapling method can shrink internal tissue, it cannot be used for external hemorrhoids. This procedure is generally more painful than rubber band ligation but less painful than hemorroidectomy.

Hemorrhoidectomy: This is the most complete surgical method for removing extra tissue that causes bleeding and protrusion. It is done under anesthesia using either sutures or staples. Depending on the case, hospitalization and a period of rest may be required. Contrary to popular belief, laser methods do not offer any benefit compared to standard operative techniques. Laser surgery is expensive and no less painful.

Hemorrhoidectomy is considered when:

- 1. Clots repeatedly form in external hemorrhoids
- 2. Ligation is not effective in treating internal hemorrhoids
- 3. Protruding hemorrhoid cannot be reduced
- 4. There is chronic bleeding

Do hemorrhoids lead to cancer?

Hemorrhoids do not increase the risk of colorectal cancer nor cause it. However, more serious conditions can cause similar symptoms. Even when a hemorrhoid has healed completely, your colon and rectal surgeon may request other tests. A colonoscopy may be done to rule out other causes of rectal bleeding. Every person age 50 and older should undergo a colonoscopy to screen for colorectal cancer.