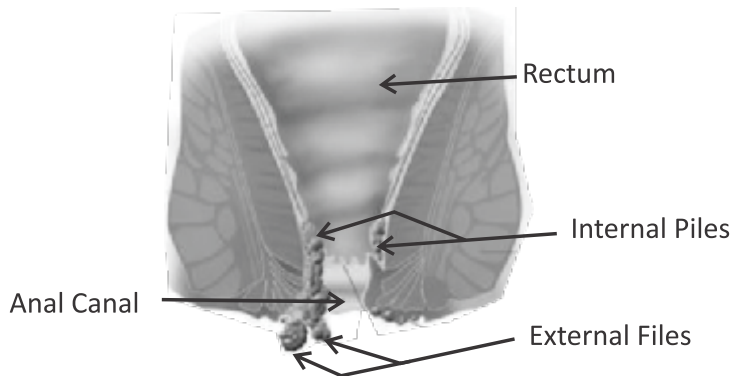




DEPARTMENT OF SURGERY PILES (HEMORRHOIDS)

WHAT ARE PILES ?

When the rectal veins become swollen, they are called piles.



WHAT CAUSES PILES ?

- Chronic constipation.
- Pregnancy can cause piles due to pressure of the gravid uterus on the veins. This is automatically relieved after delivery.
- Hereditary anatomy of the veins predisposing to piles & prolonged standing.

TYPES OF PILES

If the piles are not visible outside the anal canal, they are called internal piles. If they are visible outside the anus, they are called external piles.

GRADING THE PILES

- I-degree piles : Piles that cannot be seen on the outside.
- II-degree piles : Piles that appear outside the anus (prolapse) during passage of stools but retract inside on their own.
- III-degree piles : Piles that prolapse but when pushed back in, remain inside the anal canal.
- IV-degree piles : Piles that permanently remain outside the anus.

PROBLEMS DUE TO PILES

- Painless, bright red bleed during defecation.
- Bulge outside the anus.
- Heavy bleeding from the piles leading to anemia.
- Severe pain & swelling due to blood clot in piles.

INVESTIGATIONS

Local clinical examination with a proctoscope is done.

However, if you are above the age of 45 years, a colonoscopy is advised to rule out rectal tumours which can lead to piles.

TREATMENT

MEDICAL

There are no medicines which can make piles disappear. They can only control them.

- Strong laxatives like Dulcolax tablets are given for severe piles, pink liquid Cremaffin for moderate constipation and Herbolax or Kayam Churna are mild laxatives. These provide immediate relief from bleeding and constipation. You can use any one of these laxatives according to your need and in anticipation of problems like during travel, fever concurrently with antibiotics, etc. Consult your doctor for this.
- Local anaesthetic gels relieve pain.
- Drink plenty of water and eat a high-fibre diet to avoid constipation.

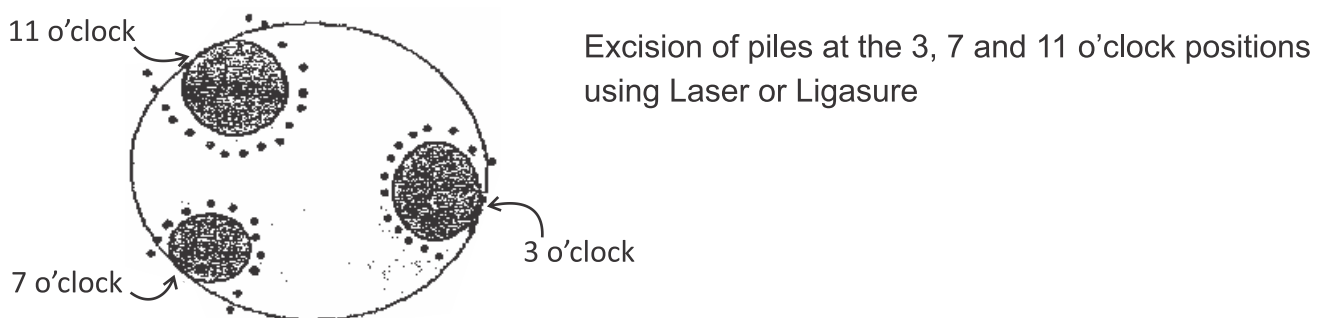
SURGICAL

Surgery is always elective.

- Grade I piles : Treated medically.
- Grade II piles : Treated medically or with elective surgery.
- Grade III and IV piles : Surgery is a must.

ABOUT DIFFERENT SURGICAL PROCEDURES

- **BANDING** : This is an OPD procedure that requires no anesthesia. The piles are tightly tied up with rubber bands and you are allowed to go home immediately. This procedure has a 60% success rate.
- **INFRARED COAGULATION** : Used in grade I and II piles, but has only a 40% - 50% success rate and hence, is not recommended.
- **SCLEROTHERAPY** : is very painful, unpredictable and hence not advised.
- **STAPLING** : Can be done for piles.
- **EXCISION OF PILES** : This is the conventional method of treatment. The recurrence rates are very low. Used for patients with three piles as shown. Laser / Ligasure is used which reduces pain.



INSTRUCTIONS AFTER SURGERY

- Hospitalization for 2 days.
- The stitches are of absorbable type.
- There is no dressing.
- You are advised to take a Sitz bath every day, that is, sitting in a tub of warm water 2-3 times a day to keep the area clean and for relief from pain.
- You may experience pain, discomfort and a slight watery discharge from the operated site for 7-10 days.
- Rest is recommended for 10-12 days and you can go back to work after 2 weeks.
- No restrictions on activities or exercise after 1 month.