tyneside surgical services

Patient Information

Banding of Haemorrhoids (Piles)

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This information leaflet is to help you understand why you require banding of haemorrhoids.

Introduction

Haemorrhoids (piles) are enlarged blood vessels in the lining of the anus and lower rectum (back passage), these can become irritated resulting in bleeding, itching, discomfort and sometimes they can protrude from the back passage. Haemorrhoids are usually small and often the symptoms settle without any treatment, but sometimes treatment is required.

Banding is most effective for symptoms of bleeding from haemorrhoids that do not prolapse significantly. External / prolapsing haemorrhoids would usually require more invasive procedures if further treatment is desired.

Causes

Half the population in the UK will at some time develop one or more haemorrhoids, certain situations can increase the chance of haemorrhoids developing such as:

Constipation - Straining when opening bowels, passing large stools, resulting in increased pressure in and around the veins in the anus.

Pregnancy - Haemorrhoids are often common during pregnancy due to the effect of the pressure of the baby lying above the rectum and anus and hormonal changes during pregnancy on the veins.

Age - As we get older the tissue in the lining of the anus becomes less supportive**.**

Hereditary factors - There are some people who may inherit a weakness of the wall of the veins in the anal region.

Tips to help

- Eat plenty of fibre, fruit, vegetables, whole meal bread and cereals
- Drink at least 10-12 cups of water per day (alcoholic drinks can be dehydrating)
- Avoid if you can, pain relief containing codeine
- Try not to delay going to the toilet when you get the urge, and avoid constipation and straining.

Banding treatment

Your examination will be discussed with you by the surgeon and then your consent will be obtained. You will change into gowns and lie on the couch on your left side with your knees drawn up to your chest to enable the doctor to examine your back passage. A small tube will be passed into your back passage. Small elastic bands are then placed

through the tube over the piles; they remain tight to reduce the blood supply to the pile. The aim is that the piles will then shrivel and disappear which takes up to a couple of weeks. Often up to three haemorrhoids may be treated at one time using this method which is usually painless. The bands should fall off in about 5-10 days. The area heals over during the following 3-4 weeks.

Will this hurt?

The examination only takes a few minutes and can be uncomfortable; to help you can take some deep breaths and try to relax. This procedure does not require anaesthetic.

Benefits

In around 8 in 10 cases the haemorrhoids are removed successfully by this method; however, in 2 in 10 cases the haemorrhoids recur at some stage, in which case you may require further banding treatment. Haemorrhoids are less likely to recur after banding if you avoid constipation and straining.

Risks

A small amount of people may have complications following banding such as bleeding, urinary problems or infection at the site. If you see a large amount of fresh blood or you pass clots you must seek urgent medical attention.

The risk of bleeding means that we do not routinely perform banding of piles if you take anticoagulants such as Warfarin or novel oral anticoagulants (NOACs such as Apixaban or Rivaroxaban). These medications would need to be stopped prior to your examination. (this would be discussed prior to your examination appointment).

Due to the potential side effects of the procedure, you should have someone to accompany you to a haemorrhoid banding procedure, as you will not be able to drive yourself home or use public transport on your own.

Why you need someone with you

- **Cannot drive:** You will not be able to drive yourself home after the procedure especially if you are given any form of sedation or pain medication.
- **Risk of feeling faint:** The procedure can sometimes leave you feeling faint, making it unsafe to drive or travel alone.

Recovery from haemorrhoid banding

You may feel pain or discomfort for up to 48 hours after your examination.

You may have a sensation of fullness in your back passage.

You may have the sensation of needing to move your bowels.

In addition you may find difficulty in passing urine and in controlling wind or bowel movements for a few days. You may also bleed for up to 14 days after treatment and you may find at seven to 10

days when the haemorrhoid scar and band drops off that the bleeding becomes heavier, this is normal. The wound normally takes around two weeks to heal.

After the procedure you may need to take some regular pain relief such as paracetamol. Avoid any painkillers that may cause constipation such as codeine. Avoid any strenuous exercise on the day of your examination. You may resume normal activity the next day.

If you need a follow-up appointment this will be arranged with your TSS Consultant or follow-up will be with your GP.

Contact numbers

During Endoscopy Opening Hours (Mon – Fri 9;00am til 4:30pm)

TSS Endoscopy Lead Nurse:
0191 737 1089 or 0191 737 1070

Out of Hours:

Ring 111 or visit your local A&E department if you have an emergency

Data Protection

Any personal information is kept confidential. There may be occasions where your information needs to be shared with other care professionals to ensure you receive the best care possible.

In order to assist us to improve the services available, your information may be used for clinical audit, research, teaching and anonymised for National NHS Reviews and Statistics.

Further information is available via Tyneside Surgical Services (TSS) website or by telephoning TSS IG Team on 0191 7371082

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