

Hemorrhoids are a very common occurrence in adults worldwide. In the US over 1 million new cases are diagnosed each year and it is believed that half of adults over age 50 have had a hemorrhoid.

What is a Hemorrhoid?

Hemorrhoids are inflamed and swollen veins located in and around the anus or lower rectum. Internal hemorrhoids develop within the anus and are usually not painful unless they become prolapsed, or sag and protrude from the anal opening. External hemorrhoids develop near the anus and are also typically painless except if a blood clot develops within the hemorrhoid. This can cause the hemorrhoid to harden and become quite painful. It is possible to have both types of hemorrhoids simultaneously, but both are considered very treatable.

Symptoms of Hemorrhoids

Symptoms can vary depending on the type of hemorrhoid. The most common symptoms include bleeding during bowel movements, itching, pain or discomfort in the anal area and lumps near the anus. Blood from hemorrhoids is bright red in color and may be seen on toilet paper, in the toilet bowl or on the surface of the stool after a bowel movement. Bleeding during bowel movements is also a symptom of other digestive diseases like colon cancer, making it very important to speak with your doctor to rule out any more serious conditions.

Causes of Hemorrhoids

The causes of hemorrhoids most commonly are pressure and straining; typically from bowel movements or pregnancy. Other contributing factors include aging, heredity, chronic constipation or diarrhea and faulty bowel function.

Treatment of Hemorrhoids

In most cases with mild symptoms, increasing fluids and fiber in the diet, soaking the hemorrhoid in plain warm water for 10 minutes at a time and topical medications can relieve some of the pain and swelling. Hemorrhoids that do not respond to these treatments may need to be removed. There are several ways your physician can remove a troublesome hemorrhoid.

Ligation – The ligation procedure works by placing a rubber band over the hemorrhoid in order to cut off the blood supplying the hemorrhoid. After a few days the band and hemorrhoid will fall off leaving the site to heal over the next week or two.

Injection – Your physician will perform several injections of a chemical solution around the base of the hemorrhoid to shrink and destroy it. Injection causes little or no pain but in some cases may be less effective than ligation.

Coagulation – This technique is similar to ligation, but rather than rubber bands, your physician applies infrared light, heat or a laser to the hemorrhoid. This process causes the hemorrhoid to harden, shrivel up and ultimately fall off. Coagulation has few side effects but can have a higher rate of recurrence than ligation.

Hemorrhoidectomy – When minimally invasive measures have failed to adequately treat hemorrhoids, your physician may opt for surgical removal. Performed under anesthesia, the procedure involves removing excess tissue responsible for the bleeding and protrusion. While considered the most complete way to remove hemorrhoids, hemorrhoidectomy, like all surgery, can have some risks including temporary difficulty emptying your bladder and urinary tract infections.