

## **McLean Hemorrhoid Center®**

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### **Our Information Brochure**

#### **What are hemorrhoids?...**

More than ten million people visit a physician in the U.S. each year with symptoms of hemorrhoids. Three out of four people will develop hemorrhoids at some time in their lives. While many people associate hemorrhoids with painful surgery, only a small percentage of patients actually require surgery.

Hemorrhoids are enlarged veins in the lower end of the rectum just inside the anus. Under certain conditions these veins may become swollen and can actually protrude or prolapse from the anus during a bowel movement. When this occurs the hemorrhoid may become irritated and painful and can bleed.

These enlarged veins are covered with the normal mucous membrane lining the rectum; this membrane produces mucus which can cause irritation, itching, and discomfort on the skin around the anus.

Constipation, pregnancy, heavy lifting, and sitting on the toilet for long periods may aggravate hemorrhoids. Correction of these problems is essential to its successful conservative treatment. Various anesthetic ointments and suppositories are useful for short-term relief of hemorrhoidal discomfort. Prolonged use of these products may cause a contact dermatitis and actually they may worsen the inflammation.

If conservative treatments do not relieve hemorrhoidal symptoms, other treatments, including surgery, must be considered.

New comfortable office treatments have taken the fear out of hemorrhoids. We offer several types of treatments for hemorrhoids not responding to conservative measures; these treatments are performed in our office and do not require anesthesia or hospitalization. There is minimal discomfort involved and there are no restrictions on activities after the procedure.

#### **What are "internal" and "external" hemorrhoids?...**

Hemorrhoids are enlarged veins in the lower end of the rectum just inside the anus. Under certain conditions these veins may become swollen and can actually protrude or prolapse from the anus during a bowel movement. When this occurs the hemorrhoid may become irritated and painful, with occasional bleeding.

"Internal" hemorrhoids are enlarged veins that appear just above the "dentate" line, which is the natural boundary between the mucosal lining of the rectum and the anal skin.

Internal hemorrhoids may look like "external" ones when they are large and protrude through the anus.

"External" hemorrhoids are those that appear below the "dentate" line, protruding through the anal skin layers.

#### **What are the symptoms of hemorrhoids?...**

Hemorrhoids can often be felt as a swelling in the area of the anus. The most common symptoms of internal hemorrhoids are soreness, bleeding during a bowel movement,

discharge and itching.

External hemorrhoids develop around the anus and can be very painful, especially if a blood clot develops within them. They can be felt as a sensitive, firm lump or lumps around the anus.

### **What causes hemorrhoids?...**

The cause of hemorrhoids is not clear. They are most common after the age of fifty; constipation caused by a low fiber diet may contribute to their appearance. Pregnancy, heavy lifting and straining may have a role also.

### **Are hemorrhoids preventable?...**

Hemorrhoids may be preventable. A diet rich in fluids, fruits, vegetables and fiber [multigrain breads, for instance] contributes to good bowel habits and, possibly, to the avoidance of hemorrhoids, as is regular exercise, including walking or just moving about. It also helps to avoid excessive straining, taking warm baths and spending too much time in the toilet.

### **How Are Hemorrhoids Treated?...**

The treatment of choice for **internal hemorrhoids** at our practice is the application of "Infrared Coagulation" [IRC] by means of a specialized medical device. The application of IRC on the origin of the enlarged vein in the rectum would cause it to close down with a formation of a thin layer of scar tissue, sloughing off within two weeks, when it is eliminated along with a few drops of blood.

**The application of IRC does not cause any pain;** patients may feel only a slight warm sensation for about two seconds during the procedure.

Internal hemorrhoids could also be treated by "Rubber Band Ligation" if they are fairly **large**. This is a procedure that consists in applying a small rubber band around the enlarged vein. Left in place, this band would cause the vein to slough off within two weeks, when it is eliminated along with a few drops of blood.

Most **external hemorrhoids** will respond to a conservative treatment of rest and warm sitz baths after the initial episodes; usually, soreness or pain subside within a few days. However, this is a temporary solution; unfortunately, when the hemorrhoid increases in size, the frequency and intensity of the symptoms will also increase.

If external hemorrhoids are not treated, a blood clot may form inside them. This clot feels like a firm lump to the touch. If pain is severe, the treatment would include making a small incision under local anesthesia and removing the clot, providing immediate relief.

By the time a patient consults a physician for external hemorrhoids, they are usually fairly large, and they may not be treatable at the doctor's office. In this situation, the patient may need to be admitted to a hospital where a surgeon would remove them under anesthesia.

### **Are there complications after treatments?...**

Both treatments, infrared coagulation and rubber band ligation of hemorrhoids, are very safe and generally do not cause complications. Rubber band ligation may cause occasional soreness and mild discomfort after its application; however, the use of an anesthetic ointment applied to the treated area brings immediate relief. These symptoms disappear after the remaining vein is eliminated within two weeks after the procedure is done.

### **How many treatments are required to treat hemorrhoids?...**

The number of treatments depends on the type, number and size of the hemorrhoids. Usually, for multiple hemorrhoids, three to four separate treatments would be required. It is

advisable to wait from ten to fourteen days between treatments; this time would allow for proper healing of the treated tissues.

### **Would the hemorrhoids come back?...**

Hemorrhoids treated with either infrared coagulation or rubber band ligation do not generally recur. New ones may appear if, for instance, constipation is not resolved, and a proper diet with enough fiber is not adopted...

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### **Hemorrhoids Treatments**

Our doctors treat different types of hemorrhoids, internal and external, applying several procedures and techniques.

The treatment of choice for internal hemorrhoids at our practice is the application of "Infrared Coagulation" [IRC] by means of a specialized medical device.

The application of IRC on the origin of the enlarged veins in the rectum would cause them to close down with the formation of a thin layer of scar tissue, sloughing off in a week or two, when it is eliminated along with a few drops of blood.

The application of IRC does not cause any pain; patients may feel only a slight warm sensation for about two seconds during the procedure.

Internal hemorrhoids can also be treated by "Rubber Band Ligation" [RBL] if they are fairly large. This is a procedure that consists of applying a small rubber band around the enlarged vein. Left in place, this band would cause the vein to slough off in a week or two, when it is eliminated along with a few drops of blood.

The choice of treatments depends on many factors, such as internal or external hemorrhoids, their size, previous treatments, etc. For instance, the presence of a blood clot [sensitive "lump"] in an enlarged external vein may require limited surgery using local anesthesia.

Independently of the type of hemorrhoid, their size and the treatment method applied, our patients are very comfortable during the procedures. Some sensitive patients may feel mild soreness on the treated area after the procedure; application of an anesthetic ointment would bring immediate relief of this symptom.

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**Please note:** most types of hemorrhoids are successfully treated at our practice. However, some large, external and/or bleeding hemorrhoids are best treated in a hospital setting, where the resources are available if patients require sedation or general anesthesia when extensive surgical procedures are indicated.

Along with the treatment of hemorrhoids, other procedures might be recommended, or necessary, during the consultation. "Flexible Sigmoidoscopy" is one of these procedures, where part of the large intestine [Sigmoid] would be examined for the presence of "polyps" and other lesions that might in the future develop into a serious disease. Also, other lesions in the anal area may be treated. These added minor procedures do not cause pain, although sensitive patients may experiment a mild, temporary discomfort while they are performed.

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### **Insurance Plans**

At this time, we accept patients covered by most insurance companies. However, **we only process health claims for patients covered by Medicare and CareFirst Blue Cross Blue Shield.**

Patients covered by other insurance plans, including HMOs, PPOs, etc., can be treated at our practice; however, we would not be able to file health claims with their insurers. We would provide patients with the proper documentation, for a reasonable fee, for them to file these claims. Payment for our services is expected at the time they are rendered. We accept Visa, MasterCard and American Express cards

### **Treatment Fees**

For updated fees, please visit our web site at [McLeanHC.com](http://McLeanHC.com)

Initial Consultation \$135

Hemorrhoid treatments start at \$390

Sigmoidoscopy starts at \$340

Other fees may apply, depending on the type of hemorrhoids and their treatments.

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### **Instructions for Patients to Follow Before Consultation and Treatments**

Before an examination and treatment could be properly performed at the time of consultation, we should assure that the patient's lower part of the large intestine [sigmoid colon and rectum] is free of stools. To this effect, we recommend the following to our patients:

- 1 – **Two of each night** before a consultation appointment, patients should use a Fleet® enema in order to empty the large intestine of solid stools.
- 2 – Starting the night before a scheduled appointment, **patients should consume only liquids** in order to keep the large intestine empty of solid stools. [A Fleet® enema should also be used at this time.]
- 3 - After an examination and procedures are completed, it is recommended that in order to soften stools, a diet rich in fluids and fiber be adopted, with plenty of fruits and vegetables. Metamucil, twice daily, is also advisable.

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