

Definition

Hemorrhoids are enlarged veins in the anus or lower rectum. They often go unnoticed and usually clear up after a few days, but can cause long-lasting discomfort, bleeding and be excruciatingly painful. Effective medical treatments are available, however.

Description

Hemorrhoids (also called piles) can be divided into two kinds, internal and external. Internal hemorrhoids lie inside the anus or lower rectum, beneath the anal or rectal lining. External hemorrhoids lie outside the anal opening. Both kinds can be present at the same time.

Hemorrhoids are a very common medical complaint. More than 75% of Americans have hemorrhoids at some point in their lives, typically after age 30. Pregnant women often develop hemorrhoids, but the condition usually clears up after childbirth. Men are more likely than women to suffer from hemorrhoids that require professional medical treatment. Haemorrhoids (piles) are swellings arising from the anus that may bleed or cause the area to be itchy or painful. They are a common condition and many of us will experience them to a certain degree at some time during our lives. They are especially common in women during pregnancy. The majority of haemorrhoids resolve spontaneously, but persistent symptoms, especially of bleeding in people over 50 years old, may need investigation as, rarely, they can mimic other more serious bowel disease such as cancer. Haemorrhoids are the most common cause of bleeding from the anus; the bleeding usually occurs after passing a bowel motion and will appear on the toilet paper.

Haemorrhoids have been recognized and treated for at least 4000 years. The term itself, as described by Hippocrates, comes from the Greek, haema — blood — and rhoos — flowing. Despite their common occurrence and extended history the exact cause of haemorrhoids is still unclear. In medieval times it was thought that haemorrhoids were enlarged veins that expelled superfluous melancholy humours. The concept of haemorrhoids as enlarged veins persisted until recently, when detailed anatomical studies demonstrated their soft tissue nature and the close association they have with the normal anus. Many long-held beliefs regarding the exact cause of haemorrhoids have been difficult to prove scientifically. Generally accepted associations are that haemorrhoids occur more frequently in those who are constipated, strain excessively when passing a bowel motion, or spend a long time sitting (especially on the toilet seat). In some cases a genetic component for the formation of haemorrhoids may well be responsible.

Haemorrhoids arise from the three cushions of tissue just inside the anus that normally function to give a watertight seal. These cushions may be damaged, bleed, or be pushed down by the passing bowel motion, thus forming a haemorrhoid. If trapped outside the anus the haemorrhoid's blood supply may be disrupted, causing the severe pain of a 'thrombosed pile'.

The cornerstone of treatment and prevention of haemorrhoids is a high-fibre diet, producing a soft bowel motion that is easy to pass without straining. Combined with this it is important to avoid sitting for prolonged periods or excessive wiping of the anus after passing a bowel motion. Use of a moist cloth, wet wipe, or lying in a bath filled with lukewarm water are also helpful when the haemorrhoids cause symptoms. Historically, anaesthetic creams have been used to reduce the pain felt locally; however these may be irritating to the skin and should be considered secondary to other measures. If basic treatment fails, outpatient 'banding', injection, or freezing treatments can shrink the haemorrhoid, thus speeding resolution. Surgical treatment, where the haemorrhoids are removed at operation (haemorrhoidectomy) is used less frequently now, as outpatient treatment is very effective.

Causes and symptoms

Precisely why hemorrhoids develop is unknown. Researchers have identified a number of reasons to explain hemorrhoidal swelling, including the simple fact that people's upright posture places a lot of pressure on the anal and rectal veins. Aging, obesity, pregnancy, chronic constipation or diarrhea, excessive

use of enemas or laxatives, straining during bowel movements, and spending too much time on the toilet are considered contributing factors. Heredity may also play a part in some cases. There is no reason to believe that hemorrhoids are caused by jobs requiring, for instance, heavy lifting or long hours of sitting, although activities of that kind may make existing hemorrhoids worse.

The commonest symptom of internal hemorrhoids is bright red blood in the toilet bowl or on one's feces or toilet paper. When hemorrhoids remain inside the anus they are almost never painful, but they can prolapse (protrude outside the anus) and become irritated and sore. Sometimes, prolapsed hemorrhoids move back into the anal canal on their own or can be pushed back in, but at

other times they remain permanently outside the anus until treated by a doctor.

Small external hemorrhoids usually do not produce symptoms. Larger ones, however, can be painful and interfere with cleaning the anal area after a bowel movement. When, as sometimes happens, a blood clot forms in an external hemorrhoid (creating what is called a thrombosed hemorrhoid), the skin around the anus becomes inflamed and a very painful lump develops. On rare occasions the clot will begin to bleed after a few days and leave blood on the underwear. A thrombosed hemorrhoid will not cause an embolism.

Prevention

A high-fiber diet and the other lifestyle changes recommended for coping with existing hemorrhoids also help to prevent hemorrhoids. Not straining during bowel movements is essential.