**Did you know we are born with hemorrhoidal tissue?**

Hemorrhoidal tissue lies within the anal canal and perianal area and consists of blood vessels, connective tissue and a small amount of muscle.

Hemorrhoids are described as varicose veins of the anus and rectum because they are enlarged, bulging blood vessels in the anus and lower rectum. The only time we actually feel hemorrhoids is when they become enlarged or symptomatic. Dr. Paonessa likes to use the analogy: “We all have teeth, but we all don’t have cavities”. Likewise, all we have hemorrhoids, but we all don’t have symptomatic hemorrhoids.

There are two types of hemorrhoids, internal and external. Both can have different symptoms and often different treatments. Internal (inside) hemorrhoids form in the anus beneath a lining called mucosa, which is not sensitive to touch, pain, stretch or temperature. As such, internal hemorrhoids are commonly associated with painless bleeding and protrusion during bowel movements. It is only when the hemorrhoid completely prolapses from the opening of the anus and cannot be pushed back inside that it becomes severely painful.

**Internal hemorrhoids are classified in four grades:**

- **Grade One:** The hemorrhoid is not protruding from the opening of the anus (no prolapse).
- **Grade Two:** The hemorrhoid protrudes from the anus but it goes back in on its own.
- **Grade Three:** The hemorrhoid protrudes and requires the patient to push it back inside the anus.
- **Grade Four:** The hemorrhoid cannot be placed back into the anus by the patient. This is often very painful.

External (outside) hemorrhoids form around the anus and are covered by very sensitive skin. The most common complaints associated with external hemorrhoids are occasional swelling, pressure or discomfort. When a hemorrhoid is symptomatic it becomes a bluish-red, painful lump. When the pressure becomes elevated it can cause the thrombosed hemorrhoid to break down the overlying skin and the clot begins to leak out. Even after the hemorrhoid has healed some patients complain about soft tissue outside the anus called an anal skin tag. An anal skin tag is the residual effect from the thrombosed hemorrhoid to breakdown the overlying skin and the clot begins to leak out.

**What factors cause hemorrhoids?**

There are several factors that can cause hemorrhoids although the exact cause is unknown. Upright posture, alone, increases pressure on the rectal veins and can cause them to bulge. Additional factors include aging, chronic constipation or diarrhea, straining during pregnancy, heredity, straining during bowel movements, overuse of laxatives or enemas, and extended periods of time on the toilet (i.e. reading).

**Recognize The symptoms**

Here are some symptoms you should be aware of to determine if you may have a hemorrhoid problem.

- If you are having bleeding during bowel movements, itching in the anal area, pain, sensitive lumps or protruding during bowel movements. If you do experience any of the symptoms do not treat with over the counter medication. Call and make an appointment with your doctor. It is very important to understand that NOT all rectal bleeding is caused by hemorrhoids. As such, it is crucial to seek consultation with a specialist such as a colon and rectal surgeon to be sure that the rectal bleeding is not caused by a serious disease such as anal or colorectal cancer.

**Treatment**

How hemorrhoids are treated depends on how severe the condition is. If the symptoms are mild your doctor may simply have you increase your fiber intake in your diet (i.e. fruits, vegetables, breads and cereals) or by adding an oral fiber supplement. It is recommended that you consume 20-35 grams of fiber per day. It is very important to make sure that you drink 8-10 glasses per day of water. Other beverages that contain caffeine or alcohol will dehydrate you so try to decrease your intake of those beverages. These measures help to create a soft formed stool thereby eliminating excessive straining during bowel movements. This in turn will decrease the pressure on the hemorrhoids. The use of warm water soaks (sitz baths) will also provide relief.

There are several outpatient treatments that may be performed in the office to help treat symptomatic hemorrhoids. These include: rubber band ligation, infrared photocoagulation and sclerotherapy. All of these procedures are painless. Dr. Paonessa’s procedure of choice in the office is sclerotherapy. Sclerotherapy involves an injection of a chemical irritant into the hemorrhoid, which causes scarring and shrinkage of the blood vessels present within the hemorrhoidal tissues. This procedure is painless and has few, if any, complications.

Sclerotherapy is safe for patients on blood thinners. As with any procedure, you will need to discuss this with your physician.

External Hemorrhoids may also be treated on an outpatient basis as well. Excision of the hemorrhoidal tissue can be performed. The hemorrhoid will be injected with a numbing agent and excising of the hemorrhoid along with all blood clot (thrombus) is done. In this case the entire external hemorrhoid is removed not lanced, so as to avoid any residual skin tag once healed. This procedure provides instant pain relief for those patients suffering from severe pain. Often hemorrhoids that are not thrombosed can be treated with dietary change and sitz baths.

There are other procedures that can be done on an outpatient basis at surgery centers or hospitals. These include: traditional hemorrhoidectomy, Transanal Hemorrhoidal Dearterialization (THD), and stapled hemorrhoidectomy. As with any surgery you will need to have your physician evaluate your condition and see what the best option for you is. With advances in local anesthetic and surgical technique, hemorrhoidectomy is not the painful procedure it had been associated with in the past.

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