



The Association of Coloproctology of Great Britain and Ireland (ACPGBI) is a group of 1000+ surgeons, nurses, and allied health professionals who advance the knowledge and treatment of bowel diseases in Britain and Ireland.

**Association of Coloproctology
of Great Britain and Ireland**

**Haemorrhoids
(piles)**

Patient information

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Haemorrhoids are often known as 'piles'. Normally, 'vascular cushions' (blood-filled sacs or veins) act as a seal in the back passage, just like the washer in a tap. When these enlarge, they are known as piles when they can protrude (stick out) and bleed. They are very common. We think that at least one person in three in Britain will suffer from this condition at some stage in their life.

How do piles develop?

When the pressure in the veins of the back passage increase, piles may develop. The pressure may be caused by:

- Constipation, particularly prolonged attempts at straining to pass hard stools
- Pregnancy and childbirth

What are the symptoms?

- Bleeding from the back passage: This is the commonest symptom. The blood is usually bright red and separate from the stool.
- Lumpiness around the back passage: These may occasionally be external piles but are much more likely to be tags of skin. They may swell up and become painful from time to time ('an attack of piles'). Sometimes they make it difficult to get properly clean after a bowel movement. Often they cause no trouble at all.
- Prolapse: The piles sometimes protrude during defaecation. They may need to be pushed back inside.
- Pain: Piles often cause discomfort but are not very often acutely painful. If you have a severe pain during defaecation associated with bleeding, it may be due to a tear in the back passage ('anal fissure').

- Itching and soreness: Although this is a common symptom in people with piles, it is often not due to the piles themselves. It is often due to a skin condition around the back passage rather than the piles.

Are piles dangerous?

No. They can often be troublesome and require treatment but are almost never life-threatening.

Are tests needed?

Although bleeding from the back passage is usually due to piles, bleeding can also be an important warning symptom of bowel cancer. So tests are often done mainly to rule out cancer.

The usual test that is done is either an scan of the bowel (CT scan) or a telescope examination (colonoscopy or flexible sigmoidoscopy)

Is treatment required?

Reassurance that the symptoms are not due to a serious disease like bowel cancer is often enough.

A diet with extra fibre may help those with a tendency towards constipation. This change in diet and stool consistency is often enough to stop the symptoms, particularly if the symptom is bleeding. For persisting troublesome symptoms, the piles can often be treated by applying small rubber bands around the base of the piles (causing them to fall away). This can often be done in the outpatient clinic.

Is an operation ever needed?

If the piles are too big for the banding treatment (or it doesn't work), the piles can be surgically removed. This is called a 'haemorrhoidectomy' and is a simple operation that can often be carried out as a day case procedure.

An alternative procedure is a haemorrhoidal artery ligation operation (HALO). This procedure involves stitching the haemorrhoids blood vessels and part of the inside lining of the bowel to make the haemorrhoids shrink inside the bowel.

Further information

<http://www.familydoctor.co.uk/wp-content/uploads/2013/02/Bowels-sample.pdf>

<https://www.nhs.uk/conditions/piles-haemorrhoids/>