

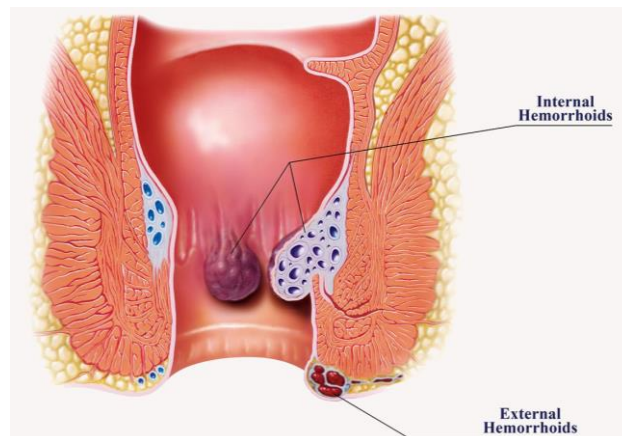
Banding of Haemorrhoids

What is Banding of Haemorrhoids?

Haemorrhoidal banding, also known as rubber band ligation, is a minimally invasive procedure to treat internal haemorrhoids.

Why would I need this procedure?

Haemorrhoids, commonly referred to as piles are swollen blood vessels within the lower rectum or anal canal (back passage). Haemorrhoids can be caused for various reasons including straining during bowel movements, chronic constipation, obesity, pregnancy, or prolonged sitting or standing, but can also be associated with normal bowel habits. Up to one third of people will suffer from haemorrhoids in their lifetime.



What are the symptoms that have led to me having this procedure?

The symptoms you have can depend on the size of the haemorrhoid. Small haemorrhoids may cause you to see bright red blood during a bowel movement or on a toilet paper. Larger haemorrhoids might protrude (prolapse) outside the anus. Other symptoms associated with haemorrhoids are itching, discomfort, passing mucous or the feeling of incompletely emptying your bowels.

What will Happen at the Procedure

The procedure is normally carried out in the outpatient's department, day surgery unit or as part of an endoscopic examination of the large bowel (colonoscopy or sigmoidoscopy).

It involves using a special instrument to put a very tight elastic band around the base of the haemorrhoid. This cuts off the blood supply to the haemorrhoid swelling which will fall off after 5-10 days, but you may not notice this. The area will heal over a period of 3-4 weeks.

You'll be awake during the procedure, meaning you'll be able to return home the same day. You must therefore have someone to bring you to your appointment and take you back home.

Your doctor will ask you to lay on your left-hand side with your knees towards your chest. Your doctor will then insert a thin medical device with a light on the end (proctoscope) to get a good view of the haemorrhoids. A special device will then be used to place two or three tight bands around the haemorrhoids. The procedure takes around 15 minutes.

What are the alternatives?

Increased fibre within your diet and having a good fluid intake can help reduce the chances of further problems with your haemorrhoids. Similarly avoiding straining or constipation will reduce the chance of recurrence. Some haemorrhoids may require an operation.

What are the potential risks and side effects?

Whilst haemorrhoid banding is generally safe, like any medical procedure, it carries some risks and potential complications including:

- Pain or discomfort
- Bleeding
- Infection
- Formation of scar tissue

Having your haemorrhoids banded does not guarantee they will not come back in the future. In these cases, the banding may need to be repeated or may require an operation.

What are the expected benefits of treatment?

The benefits of haemorrhoid banding include:

- Minimally invasive procedure
- Effective in treating small to moderate sized internal haemorrhoids
- Quick recovery time
- Low risk of complications

What should I do before I come into hospital?

This procedure may on occasion leave you feeling faint afterwards, please note:

- You will not be able to drive yourself home afterwards.
- Please ensure you bring someone with you who can drive you home or make other suitable arrangements to get yourself home.
- It is also important that you have had something to eat and drink prior to your appointment.
- You must be accompanied to the clinic by a responsible adult, or treatment will not be offered.

The procedure will take place in Main Outpatients at Conquest Hospital, Main Outpatients at Eastbourne District General Hospital or Eastbourne Day Surgery Unit. Please see your appointment letter to confirm the location of your appointment.

Will I have an anaesthetic?

No anaesthetic is required for haemorrhoid banding.

How will I feel afterwards?

There will be some discomfort after treatment and a feeling of some urgency to open your bowels. This is quite normal and will ease over a period of 2-3 days or up to a couple of weeks. During this time, you should take regular pain killers, such as paracetamol every 4 to 6 hours, if needed. Avoid painkillers containing codeine as these can cause constipation. Occasionally patients get more severe pain after banding and if this occurs you should contact your doctor or GP.

How long will I be in hospital?

You will return home on the same day, shortly after your procedure is completed.

What should I do when I go home?

Sometimes the bands can become loose after a few hours, but it does not mean that the treatment did not work. Most people do not notice the bands falling off.

You may notice some minor spots of blood in your stools or when wiping and this should settle down within a couple of days. Sometimes patients get bleeding 5 to 14 days after the procedure. This is due to the haemorrhoid “scab” falling off and wound healing. This is usually temporary and does not last for very long. If it doesn't or you notice a large amount with clots you should seek urgent medical advice.

If you have been prescribed laxatives continue to take these but do not use strong laxatives, suppositories or enemas.

How soon will I be able to resume normal activities?

You can return to normal activities as soon as you feel comfortable. However, you should avoid strenuous exercise such as playing sports, riding a bicycle or running for a few days. You should also avoid long haul flights for 3 weeks after banding due to the risk of increased bleeding.

You can bathe or shower as you wish. Local irritation and discomfort can be relieved by having two baths a day. You should not put any salts or extra products in the water. Do not use any additional creams or ointments that have not been prescribed.

Opening your bowels may cause some discomfort, however it is important to maintain regular bowel function with soft stools and to avoid forcing a bowel movement. To achieve this it is important to have an adequate amount of fibre in your diet by taking high fibre foods such as wholemeal bread and cereals. It is also important to drink enough water to avoid constipation. Clean the area by washing after opening your bowels.

Will I have to come back to hospital?

In the unlikely event you experience any of the following you should contact the Surgical Assessment Unit (0300 131 4330) for advice:

- Feel unusually feverish
- Passing large amounts of blood or clots
- Have difficulty passing urine
- Vomiting

When can I return to work?

You can return to normal activities as soon as you feel comfortable. However, you should avoid strenuous exercise for a few days.

Consent

Although you consent for this treatment, you may at any time after that withdraw such consent. Please discuss this with your medical team.

Sources of information

Mr Neil Donald, General Surgery ST4
Mr Matthew Miller, General Surgery Consultant

Important information

The information in this leaflet is for guidance purposes only and is not provided to replace professional clinical advice from a qualified practitioner.

Your comments

We are always interested to hear your views about our leaflets. If you have any comments, please contact the patient experience team on 0300 131 4784 or esh-tr.patientexperience@nhs.net

Hand hygiene

We are committed to maintaining a clean, safe environment. Hand hygiene is very important in controlling infection. Alcohol gel is widely available at the patient bedside for staff use and at the entrance of each clinical area for visitors to clean their hands before and after entering.

Other formats

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After reading this information are there any questions you would like to ask? Please list below and ask your nurse or doctor.

Reference

The following clinicians have been consulted and agreed this patient information:
All General Surgery Consultants at the Consultants Meeting

The directorate group that have agreed this patient information leaflet:
Diagnostic, Anaesthetic and Surgery – and Divisional Management Group

Next review date: June 2026
Responsible clinician/author: Mr Neil Donald, General Surgery ST4

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