

Patient Information

Banding of piles

Introduction

This leaflet gives you information about the banding of your piles, what to expect after the banding and what to look for. It will also give you information on how to stop the piles returning.

What are piles (haemorrhoids)?

The back passage (anus) is normally lined with 3 areas of soft fleshy tissue (cushions) which are very well supplied with blood vessels. In some cases, often because of problems with passing motions, these cushions enlarge over time, forming what we call piles (haemorrhoids). Because of the very good blood supply, these piles can cause bright red bleeding usually during or after having your bowels open. They may also prolapse (push out of the anus) or cause mucus leakage and skin irritation.

How does the treatment work?

Banding of piles is done as an outpatient treatment and only takes a few minutes. Using a short telescope, tiny rubber bands are placed inside the back passage above the piles. This constricts (tightens) and cuts off the blood supply to the piles. Over the next few weeks, the piles then shrivel up, hopefully leading to an improvement in your symptoms.

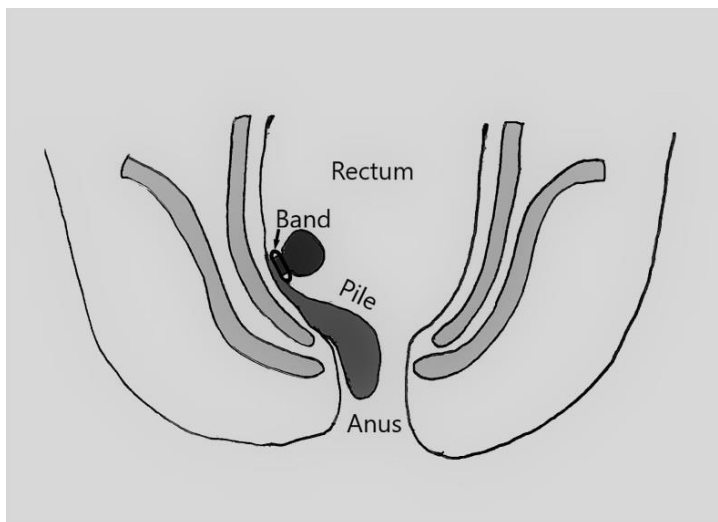


Figure 1: Band placement above pile

Reference No.

GHPI0997_01_21

Department

**Gastrointestinal
Surgery**

Review due

January 2024

**Patient
Information**

What to expect afterwards

Immediately after the banding there may be a sensation of needing to have your bowels open. This is normal – do not worry. It then fades to a mild discomfort or ache lasting a couple of days.

You may feel a little light headed shortly after the procedure. It is usually advisable to sit quietly to let things settle down for 20 to 30 minutes before driving or catching public transport in case you feel faint. Over the next few days you can take some mild pain relief, as you would normally take for a headache, such as paracetamol to help with any discomfort.

After 7 to 10 days the tissue in the band falls away. You may get some dark red bleeding from the back passage at this stage. This is normal – do not worry.

Possible complications of the treatment

Occasionally, bands constrict a part of the lining of the back passage which is very sensitive. This usually shows as severe pain at the time they are put on and the bands may need to be removed.

Very rarely you may get very large amounts of bright red bleeding after 7 to 10 days. If this happens you may need to be seen by your GP or at the Emergency Department at the hospital. This may be more common if you take any medications to thin your blood such as Clopidogrel, Warfarin or Rivaroxaban. If you do take any of these medications your surgeon may recommend that you stop before having the banding carried out.

Banding is a simple and effective treatment for piles but sometimes you may still have remaining symptoms that need repeat banding, or alternatively a different procedure.

**Patient
Information**

When to go to your GP

There is no need to be seen routinely after banding treatment. If there is severe pain in the back passage or persisting or heavy bleeding, you should see your GP for a check-up. Often your surgeon will leave you with an 'open appointment' so that if you have ongoing symptoms (within 6 months of treatment) you can contact their secretary to book an appointment to be seen again in clinic without having to go back through your GP.

How to stop the haemorrhoids returning

A good bowel habit is the key to stopping haemorrhoids from forming.

- Stop the motions from being too hard. You can help to keep the motions soft by eating a diet high in fibre, drinking plenty of fluid with meals and, if necessary, taking mild laxatives which act as stool-softeners such as Laxido® or Fybogel® from the chemist.
- Try not to strain when passing motions. Different people have different numbers of bowel action in a day/week. Do not try and strain to have a bowel action unless you feel the need to go and don't try too hard to 'push out every last little bit'. Some people find it helpful to raise their feet on a step/box to reduce straining.
- Do not spend too long on the toilet. When sitting down, the weight of the body pushes down into the pelvis causing the lining of the back passage to swell. Aim to spend around 5 minutes having a bowel action and don't take any longer than necessary.

Content reviewed: January 2021