

[Another eBookWholesaler Publication](#)



"The Complete Guide to Hemorrhoids"

By Seymour Wells

Understanding, Managing and Treating Hemorrhoids

Proudly brought to you by

[Lewis Philips signature books](#)

[Email](#)

Recommended Resources

- [Web Site Hosting Service](#)
- [Internet Marketing](#)
- [Affiliate Program](#)

Please Read this **First**

Terms of Use

This Electronic book is Copyright © 2008. All rights reserved. No part of this book may be reproduced, stored in a retrieval system, or transmitted by any means; electronic, mechanical, photocopying, recording, or otherwise, without written permission from the copyright holder(s).

You do not have any right to distribute any part of this ebook in any way at all. Members of eBookwholesaler are the sole distributors and must abide by all the terms at <http://www.ebookwholesaler.net/terms.php>

Disclaimer

The advice contained in this material might not be suitable for any particular person. You must always do your own careful checking.

Always consult your own medical advisor about any matter that concerns your health or that of others. Give them all relevant information so that they can apply their specialized training, experience and knowledge of your circumstances, current health and medical history to give you their best advice about your medical condition.

The author only provides the material as a broad overview by a layperson about an important subject. The author obtained the information from sources believed to be reliable and from his own personal experience, but he neither implies nor intends any guarantee of accuracy.

All claims made for any product, treatment or other procedure that is reported in this book is only the author's personal opinion or claims which he has read about or been told. They should not be regarded as authoritative.

Research is constantly changing theories and practices in this area. Your doctor is your best source for current information.

The content is not intended to be a substitute for professional medical advice, diagnosis or treatment. Always seek the advice of your physician or other qualified health care provider with any questions you may have regarding a

medical condition. Never disregard professional medical advice or delay in seeking it for any reason.

The author, publisher and distributors never give legal, accounting, medical or any other type of professional advice. The reader must always seek those services from competent professionals that can review their own particular circumstances.

The author, publisher and distributors particularly disclaim any liability, loss, or risk taken by individuals who directly or indirectly act on the information contained herein. All readers must accept full responsibility for their use of this material.

Pictures which appear in this book are for illustrative purposes only. They are just licensed for use here and must not be used for any other purpose.

The people in the pictures are not connected with the book, author or publisher.

No link or endorsement between any of the people in the pictures and the topic or any of the content is implied, nor should any be assumed.

Some pictures © Jupiter Images 2008.

Contents

Please Read this First.....	2
Terms of Use	2
Disclaimer.....	2
Contents	4
About the Author	8
What are Hemorrhoids?	9
Explanation	9
Causes of Hemorrhoids	11
Diet.....	11
Strained Bowel Movement.....	11
Postponing Bowel Movement	11
Genetics.....	11
Pregnancy	11
Constipation and Diarrhea.....	12
Disease	12
Lack of Exercise	12
Obesity.....	12
<i>Other Possible Causes of Hemorrhoids.....</i>	<i>12</i>
Signs and Symptoms of Hemorrhoids.....	14
Internal Hemorrhoids.	14
<i>Symptoms of Internal Hemorrhoids</i>	<i>15</i>
External Hemorrhoids	15
<i>Symptoms of External Hemorrhoids</i>	<i>16</i>
Is It Really Hemorrhoids?.....	17
Anorectal Conditions	18
Sexually Transmitted Diseases.....	19
Polyps and Cancer	19
Types of Hemorrhoids.....	21
Internal Hemorrhoids	21
<i>Internal Hemorrhoids Grading System.....</i>	<i>21</i>

External Hemorrhoids 22

Risk Factors for Hemorrhoids? 23

Hemorrhoids and the Elderly 25

 Causes for Hemorrhoid Problems in the Elderly 25

Helpful Tips for Hemorrhoidal Problems in the Elderly..... 26

Hemorrhoids and Pregnancy 27

 Alleviating Hemorrhoidal Problems during Pregnancy 27

Prognosis of Hemorrhoids 30

When to Seek Medical Care 31

How Hemorrhoids are Diagnosed 33

 Diagnostic Examination 33

The Anoscope 33

The Proctoscope..... 34

How are Hemorrhoids Treated?..... 35

 Hemorrhoid Treatment Options 35

 Treatment Options for Severe Hemorrhoids 36

Rubberband Ligation..... 36

Sclerotherapy..... 37

Cryotherapy..... 37

Infrared Coagulation..... 37

Hemorrhoidectomy..... 37

 Other Options..... 37

Surgery for Treating Hemorrhoids 39

 Types of Hemorrhoid Surgery 39

Rubberband Ligation..... 39

Sclerotherapy..... 39

Infrared Coagulation: 40

Stapling..... 40

Hemorrhoidectomy..... 40

Cryosurgery 40

Clot Removal..... 41

Medical Treatments for Hemorrhoids 42

 Dosage and Selection of Medications 44

Self-Care Hemorrhoid Treatment at Home..... 45

 Simple Self-Care Techniques 45

Hot Sitz baths 45

 Dietary changes 45

Stool softeners and lubricants 46

Ice Packs 46

Exercises 47

Changes to Posture..... 47

Good Bowel Habits..... 47

Herbal Treatments for Hemorrhoids 48

Benefits Claimed for Herbal Remedies 48

 Herbal Treatments 49

Aloe Vera 49

Bromelain 49

Butcher's Broom (Ruscus aculeatus) 49

Calendula..... 50

Cranesbill (Geranium maculatum) 50

Dandelion 50

Horse Chestnut (Aesculus hippocastanum)..... 50

Horsetail 51

Japanese Pagoda Tree (Sophora Japonica)..... 51

Mint and Ginger 51

Pilewort (Ranunculus ficaria) 51

Plantain (Plantago major) 51

Psyllium (Plantago ovata)..... 52

Witch Hazel (Hamamelis Virginiana)..... 52

Yam 53

 Other herbs 53

 Lifestyle Changes 54

Diet and Nutrition that may Help Hemorrhoids Patients 55

 Dietary Fiber 55

 Wonderful Water 55

Reducing Hemorrhoidal Effects with Simple Lifestyle Changes 58

Hemorrhoids and Exercise..... 60

Exercise for Hemorrhoid Patients..... 60

Tips for Coping with Hemorrhoids 62

Glossary of Hemorrhoid and Other Anorectal Conditions 63

Seymour Says 68

About the Author

Seymour Wells has suffered from hemorrhoids.

He understands the attitude of many sufferers who do not want to discuss this affliction because they feel embarrassed or think that their friends might think less of anyone who develops this actually very common ailment.

They probably don't realize that many of the people they know well either have hemorrhoids or may have suffered themselves at some time in their lives.

Many people don't like to even discuss the ailment with their doctor because of embarrassment or fear of the treatment which they might have to undergo.

But, Seymour says that a full discussion with your medical advisor is the first and most important step in minimizing the pain and other effects of hemorrhoids. It also is the first step to recovery.

He says that we must ignore the myths and rumors about hemorrhoids and "secret" hemorrhoid cures because there is currently no specific cure.

But, many patients can look forward to a full recovery from hemorrhoids and the prognosis is improving as new drugs and procedures are developed and tested.

Seymour has tried to give a broad picture of the current state of hemorrhoid treatment and the best methods of coping with their effects.

He has also included information about some natural methods but emphasizes that no-one should self-medicate without first consulting their doctor.

Part-I: Understanding Hemorrhoids

What are Hemorrhoids?

Hemorrhoids are also called 'piles'; a swelling of veins in the anus and rectum.

Hemorrhoids are a very difficult and painful condition. It can restrict your movements and interfere with your daily routine.

They are a common problem with about fifty to seventy-five percent of Americans affected sometime during their lives.

They are due to inflammation and swelling of the veins around the anus or lower rectum which disturbs the tissues, fibers, arteries, muscles containing blood vessels in the area of the rectum and the anal canal.

The burning sensation which comes with hemorrhoids causes discomfort, itching and, often, some pain.

Hemorrhoids could make you falsely believe that you passed an incomplete bowel movement.

The location of the hemorrhoids affects the level of discomfort.

Sometimes, they could go away after a short time but the discomfort can persist.

Professional medical advice should be obtained as early as possible to ensure that possible complications are minimized.

Hemorrhoids may cause a mucus discharge which irritates the skin surrounding the anal region. The irritation persists as the skin in the anal region is very sensitive.

Explanation

Hemorrhoidal veins are present in the anal canal, rectum and anus.

Hemorrhoids develop due to above-normal pressure on the pelvic veins which could be due to constipation, diarrhea, obesity, or pregnancy

The pressure causes the pelvic veins to swell and grow out of shape. The pressure also weakens tissues supporting the veins around the anal canal. The tissues become so weak that they are unable to hold the hemorrhoidal veins in place. When the swollen tissues and veins bulge out of the anal opening, they are called "external hemorrhoids".

In less extreme cases, these tissues and veins develop as "internal hemorrhoids" in the anal canal.

Internal hemorrhoids are more difficult to identify as they remain inside the rectum and may show no symptoms.

You might detect an internal hemorrhoid if you notice blood in your stool.

Sometimes, the internal hemorrhoid comes out of the anal opening. Then, it is termed a **prolapsed hemorrhoid**.

When a clot forms in an external hemorrhoid, due to a rupture, this is called a **thrombosed external hemorrhoid**.

Alternatively, it can be external hemorrhoids, under the skin around the anus. Hemorrhoids can be classified into four varying levels according to the severity of the condition.

Causes of Hemorrhoids

Diet

Diet rich in processed food with less of fresh fruits and vegetables is a major cause for hemorrhoids. Consumption of lots of refined flour, animal proteins, fiber-depleted carbohydrates, and sugar reduces roughage and therefore your stools become hard and difficult to pass. This leads to hemorrhoids.

Strained Bowel Movement

Forced bowel movement either trying too hard or for too long can cause hemorrhoids. Such strained bowel movement could be due to constipation, diarrhea, or poor bathroom habits. Squatting toilets makes it easier for smooth bowel movements.

Postponing Bowel Movement

You could occasionally postpone a bowel movement if there are no proper facilities in the vicinity. This does not cause any great problem. However, if you are regularly in the habit of postponing bowel movements, eventually, fecal matter within the intestines gets dried up and consequently harder. This then strains while passing and therefore leads to hemorrhoids. Further, fecal matter within colon pressurizes muscles and veins in the anal region. This causes swelling of veins around the anus and rectum.

Genetics

Some people inherit weak vein walls. This could lead to hemorrhoids, although this alone may not be the deciding factor. Weak vein walls combined with long hours of standing or sitting or poor bathroom habits can lead to hemorrhoids.

Pregnancy

During pregnancy, the extra weight of the uterus walls weighs down on the rectal veins. Further, a long and painful labor causes increased pressure on the anal region. This could lead to constipation in women without any previous complaints. However, if you already have hemorrhoids, pregnancy can worsen your problem. This problem worsens in the final trimester.

Constipation and Diarrhea

Both can cause hemorrhoids. Constipation is difficulty in passing stools due to hardening causing excessive straining. Diarrhea causes excessive passing of watery stools due to any adverse reaction. This damages rectal veins and leads to hemorrhoids.

Disease

Rectal cancer can lead to hemorrhoids. Rectal cancer prompts or causes an urge to defecate often, although you do not actually defecate. This unnecessary and frequent strain causes excessive pressure on your veins and leads to hemorrhoids.

Other diseases like heart ailments, liver diseases, irritable bowel syndrome, and intestinal tumors can indirectly cause hemorrhoids.

Lack of Exercise

A sedentary lifestyle with almost very little movement of muscles causes your muscles to lose their elasticity. This makes bowel movements difficult. This is a common problem in the elderly and sick people. Similarly, some jobs require you to sit or stand for very prolonged periods. This also causes hemorrhoids.

Obesity

Being overweight causes several problems, hemorrhoids being one of them. Excess weight in the pelvic and abdomen region increases pressure on the pelvic veins. This leads to hemorrhoids.

Other Possible Causes of Hemorrhoids

Other factors which may be linked to the occurrence of hemorrhoids with some patients may include vitamin deficiency, frequent use of laxatives, hypertension and poor intake of fluids and water.

People who regularly suffer from constipation and diarrhea can get hemorrhoids. Similarly, chronic sufferers of liver diseases and intestinal diseases can get hemorrhoids.

People having jobs that entail long hours of sitting or standing could develop hemorrhoids. People eating more spicy foods or those drinking less water could suffer from constipation and resultant hemorrhoidal symptoms.

Signs and Symptoms of Hemorrhoids

The signs and symptoms of a hemorrhoid are simple. The most common symptom is bleeding. Although there are many hemorrhoidal symptoms, it is not necessary for you to experience all the symptoms.

There are various other diseases like intestinal diseases, liver ailments, colorectal cancers, etc. that have common symptoms of hemorrhoids. Often, various anorectal ailments like fissures, fistulas, and abscesses have symptoms that are very similar to hemorrhoids. Itching, irritation, discomfort, and bleeding are common examples.

Recent changes in bowel movements and rectal pain could indicate hemorrhoids. This is specifically so in people over the age of fifty. Often, it is not possible to distinguish the true ailment. It would then require a thorough medical analysis to arrive at the correct diagnosis.

Hemorrhoids are of two types, internal hemorrhoids, and external hemorrhoids. The symptoms of both hemorrhoids are a little overlapping while some symptoms are specific.

Common symptoms of internal and external hemorrhoids may include:

- Inflammation around the anal region.
- Red blood with stool or on toilet paper.
- Tenderness and a feeling of extreme discomfort soon after defecation.
- Mucus discharge from anus with itching or could also be without itching.
- Protrusion of soft tissue from the anus soon after defecation, which normally retracts after some time.

Internal Hemorrhoids.

Internal hemorrhoids cause small swellings in the veins within the anal canal. Most of the time, internal hemorrhoids remain within the anal canal and therefore do not cause any pain. Sometimes these hemorrhoids could sag out

and protrude out of the anus. Such bulging and protruding hemorrhoids could be painful.

Symptoms of Internal Hemorrhoids

Internal hemorrhoid symptoms are more severe than external hemorrhoid symptoms.

The symptoms may include:

- Painless bleeding could cause bright red streaks of blood on the toilet paper or on the toilet bowl after normal bowel movements. Sometimes blood is visible on the surface of the stool.
- Itching is common in internal hemorrhoids as these cause mucus to seep out. This leads to irritation in the anal region.
- Sometimes internal hemorrhoids bulge out and can cause skin irritation due to mucus.

Normally internal hemorrhoids are not painful. However, very large internal hemorrhoids could protrude out of the anal canal. Muscles around the anus could squeeze this. This is a strangulated hemorrhoid. This could cause unbearable pain. This is because squeezing causes blood supply to be cut off to the hemorrhoid. Sometimes the condition could become so serious that immediate medical treatment is necessary.

Such hemorrhoids cause immense discomfort. You feel a constant urge to defecate even immediately after a thorough bowel movement. This is due to protrusion of the hemorrhoid outside the anus.

External Hemorrhoids

Hemorrhoids outside the anal canal are external hemorrhoids. The hemorrhoidal veins pop out and could swell around the anus causing pain and discomfort. Sometimes these lumps could turn hard due to clotting of blood. These are thrombosed hemorrhoids. Sometimes, the clot could dissolve by itself or break out of the hemorrhoid. It would then mingle with the normal circulation.

Symptoms of External Hemorrhoids

An external hemorrhoid is a hemorrhoid occurring outside the anal canal.

The symptoms include:

- Severe pain around the anal region that often becomes unbearable. This pain could even cause extreme discomfort in cleaning the anal region. The anus has many nerve endings and therefore it could cause itchiness and pain due to external hemorrhoids.
- Swelling around the anal region could cause a lump around the anus. This lump could have a purple or bluish tint.
- A burning sensation around the anus specifically just before and after bowel movements is a common symptom.
- An itching sensation around the anus is predominant due to leakage of mucus. This additionally also causes severe irritation.
- These hemorrhoids could bleed and cause a painful lump. This is a clotted or thrombosed hemorrhoid.
- These hemorrhoids cause difficulty with sitting. The problem aggravates with swelling of the hemorrhoids. Further, the pain intensifies soon after bowel movements.

Is It Really Hemorrhoids?

Most symptoms of hemorrhoids are similar to those of various other diseases.

Pain, bleeding, and anal discomfort may or may not be due to hemorrhoids.

It is easy to confuse symptoms for such diseases like bowel diseases, colorectal cancers, and sexually transmitted diseases with those of hemorrhoids.



You should always consult your Doctor about any sign or symptom which you think you have. Early diagnosis is very important.

Your Doctor can arrange tests and examinations, and even a complete analysis and medical examination if they believe they may be required, to confirm your ailment.

That avoids worry and unnecessary expense or surgery for you.

You are then better equipped to deal with whatever is affecting you.

Proper diagnosis and understanding of the ailment is essential for correct medical care and treatment.

This section discusses signs and symptoms which may confuse lay-people like us.

Various intestinal ailments cause uncontrollable anal leakage and soilage. Similarly, changes in feces characteristics like tar-like stool, pencil-like and narrow stools, and blood on the stool are common to many ailments like colitis or intestinal diseases. Changes in bowel movements are a common feature of many ailments.

Some of the medical conditions which have symptoms that sometimes may overlap with those of hemorrhoids include inflammatory bowel diseases, including:

- Anorectal conditions
- Sexually transmitted diseases
- Polyps and cancers
- Inflammatory Bowel Diseases

Common inflammatory bowel diseases include Crohn's disease and ulcerative colitis. Both these diseases cause inflammation of the digestive tissue.

Crohn's disease causes inflammation of the small intestine and colon. It causes blockage of the intestines and digestive tract. This leads to infection and fissures, abscesses, and skin tags. These cause similar symptoms as hemorrhoids, like blood in the stool, pain, itching in the anal region, and other similar symptoms. They can be easily mistaken for hemorrhoidal symptoms.

Ulcerative colitis causes serious inflammation of the surface of the colon. This causes bleeding and leads to blood in the stool. Diarrhea is a common symptom of ulcerative colitis. This again could cause symptoms similar to hemorrhoids.

Anorectal Conditions

Abscesses, fissures, and fistulas are common anorectal conditions with symptoms similar to hemorrhoids. An abscess is a collection of pus due to bacteria. Trapped fecal materials within the glands of the sphincter muscle in the anal canal can cause swelling and a painful bulge develops. This is an anorectal abscess. It is essential to locate such abscesses and drain them.

A skin tear of the anal canal is a fissure. A deep fissure can even expose the sphincter muscle. Regular contraction of the anal muscles worsens fissures. Fissures develop due to forcible expulsion of hard stools or due to anal surgery.

Common symptoms of fissures include blood in the stool, a burning sensation before and after bowel movements, pain, and swollen tissue. Skin tags are similar to hemorrhoidal skin tags. Again, simple self-care treatments like warm baths and analgesic creams can bring temporary relief for hemorrhoids. Although fissures are normally self-healing, surgery could become essential in specific cases.

Untreated and undrained abscesses develop into fistulas. The infection in the abscess spreads through the internal tissue into a painful external opening. Pus comes out of these fistula openings. This condition requires immediate surgery. The symptoms are very similar to hemorrhoids.

Sexually Transmitted Diseases

Most sexually transmitted diseases like Chlamydia, Anal Warts, Syphilis, Gonorrhea, and Herpes, have hemorrhoid-like symptoms. Chlamydia causes bleeding, rectal infection, pain, and anal discharge. Anal warts cause bleeding, itching, fleshy growth in the anal canal or near the anus, pain, and discharge.

A syphilis infection starts with an ulcer. If the infection is in the anal canal, pain can cause symptoms similar to hemorrhoids. Gonorrhea causes extensive pain and discharge. Herpes causes severe pain and itching in the genitals, bleeding, blisters, and the development of anal sores.

Polyps and Cancer

Polyps are harmless growths in the intestinal linings and rectum. However, these develop into colorectal cancers. Polyps are discovered through colonoscopies and manual medical examinations. Normally polyps depict multiple growths. Some polyps can cause mucus discharge, rectal bleeding, pain, and changes in bowel habits. Removal of polyps is essential, as it is not possible to analyze which of these could develop to be cancerous.

Colorectal cancer is a very common cancer and is the second-most important type of cancer leading to death. Most colorectal cancers develop from polyps.

Common symptoms of colorectal cancer include rectal bleeding, blood in the stool, pain in the rectum, regular changes in bowel habits, false defecating urges, weakness, weight loss, anal opening protrusions, an ulcer near the anus, and regular bouts of diarrhea and constipation. These are very similar to hemorrhoid symptoms. It is possible to rectify colorectal cancer symptoms by eating a fiber-rich diet. This is again similar to rectification of hemorrhoidal symptoms. Therefore differentiating between colorectal cancer and hemorrhoidal symptoms can be difficult as most symptoms can be similar.

Types of Hemorrhoids

There are two main types of hemorrhoids according to their location. These are internal hemorrhoids and external hemorrhoids. Internal hemorrhoids are within the anal canal while external hemorrhoids are located outside the anal canal often near the anal opening.

Internal Hemorrhoids

Internal hemorrhoids are the most common type of hemorrhoids. These hemorrhoids develop along the passage to the anus above the dentate line. Internal hemorrhoids are normally painless, as the visceral nerves above the dentate line do not sense any pain. These nerves can only sense pressure. Sometimes, internal hemorrhoids could come out of the anus as protrusions. These protrusions appear as small lump-like masses. These are prolapsed hemorrhoids. These protrusions cannot be pushed back in to the anal canal. Sometimes these protrusions cause excessive pain. The anal sphincter muscles trap these protrusions and cut off the blood supply. This is the cause for the severe pain.

A hard stool could sometimes cause little discomfort while passing through the internal hemorrhoids during a bowel movement. Mucus leakage is a common symptom of internal hemorrhoids. This leakage causes extreme discomfort coupled with an itching sensation.

It is not possible to diagnose an internal hemorrhoid by yourself, as there are no signs. Only a doctor can diagnose an internal hemorrhoid after a complete exam. Internal hemorrhoids normally occur due to weakening of tissues supporting the anal canal veins.

Internal Hemorrhoids Grading System

Internal hemorrhoids occur with different levels of severity and have a specific grading system. This includes:

First-degree hemorrhoids: These hemorrhoids bleed but do not protrude from the anus or prolapse.

Second-degree hemorrhoids: These hemorrhoids protrude from the anus during a bowel movement and retract on their own back into the anal canal although a little later.

Third-degree hemorrhoids: These hemorrhoids protrude from the anus during the bowel movement. However, they do not retract by themselves and you need to push them back inside with a finger.

Fourth-degree hemorrhoids: These hemorrhoids protrude or prolapse from the anus and it is not possible to push them back into the anal canal.

External Hemorrhoids

External hemorrhoids develop outside the anal canal, more so near the anal opening. These hemorrhoids are more painful as the skin around them is very sensitive. These hemorrhoids can develop ruptures and thereby cause bleeding. Sometimes, a vein within the external hemorrhoid breaks and forms blood pools under the skin. These lumps could become hard and cause severe pain. These are thrombosed or clotted hemorrhoids.

External hemorrhoids cause sharp pain during bowel movements and often for some time after bowel movements. Further, these hemorrhoids cause severe itching and a burning sensation around the anus. People with external hemorrhoids can sense a hard lump. This lump is very sensitive and can bleed on rupture.

Risk Factors for Hemorrhoids?

Risk factors for hemorrhoids indicate the factors that could cause hemorrhoids. Nevertheless, presence of such factors alone does not make you a possible patient of hemorrhoids. Again, absence of such factors does not mean you cannot get hemorrhoids. It is only that such risk factors can increase your chances of developing hemorrhoids.



The risk factors of hemorrhoids are not very alarming. It is possible to treat and overcome these risk factors through simple measures. Often these measures are small changes in your lifestyle and dietary habits. The factors include:

Chronic constipation and diarrhea causes you to regularly strain during bowel movements.

Being obese puts extra pressure on the pelvic region causing hemorrhoids.

People over the age of fifty commonly develop hemorrhoids.

If you have a family history of hemorrhoids, you could develop in your later life.

If you suffer from chronic liver and heart diseases, you develop hemorrhoids. These diseases cause blood to pile up in the pelvic and abdominal region.

If your job entails long hours of standing or sitting, you develop hemorrhoids. Long hours of standing and sitting causes blood to pool in the anal region and increases pressure on the pelvic veins. This leads to hemorrhoids.

Pregnancy, prolonged labor, and delivery are all possible risk factors for hemorrhoids. During the final trimester, the growing fetus exerts pressure on the pelvic region and causes hemorrhoids. Prolonged labor could weaken tissues around the pelvic region and lead to hemorrhoids after childbirth.

If you lift heavy weights frequently or hold your breath while lifting heavy objects, you cause a sudden surge of pressure within the blood vessels. This causes hemorrhoids, a common feature among weightlifters.

Anal intercourse could lead to hemorrhoids due to forced pressure and ruptures.

Eating a fiber-less diet and including lots of animal protein can cause hemorrhoids. A fiber-less diet makes your stools hard and difficult to pass.

Hemorrhoids and the Elderly

The elderly often suffer from severe hemorrhoidal problems. There are a few causes for it.

Causes for Hemorrhoid Problems in the Elderly

Constipation is a chronic problem in the elderly. Normally, elderly people prefer eating easily chewable foods. These foods prove easy to swallow. However, easily chewable foods are low on fiber and resultant roughage. Therefore, the elderly suffer from chronic constipation. Chronic constipation hardens stools and often this gets lodged in the rectum. This is a serious problem. It is then necessary to manually pull out fecal material from the anal canal.

Some of the elderly could become bedridden due to other diseases. At times, they have to delay bowel movements until nursing aides arrive and help them. Such regular postponement of bowel movements may significantly decrease the ability of sphincter and abdominal muscles. This makes the any constipation problem more severe.

Advancing age often weakens sphincter muscles. They lose their ability to ease passing of stools. The elderly often take laxatives to lessen their problem. Regular use of laxatives makes the elderly dependent on them for regular bowel movements.

Soilage is a common problem in the elderly. The weak sphincter muscles make it almost impossible to control bowel movements and there could be regular leakage of feces from the anus. Sometimes weakened sphincter muscles allow the rectal lining to come out of the anus. This is called prolapse. An extreme condition is procidentia when the entire anal canal slides out of the anus. Regular soilage leads to hemorrhoidal problems and causes ulcers and chafed skin around the anus.

In some elderly people, constipation has always been a problem. Somehow, the elderly did not pay much attention to the problem in their youth.

Helpful Tips for Hemorrhoidal Problems in the Elderly

Include more fiber-rich foods in your diet like barley, oatmeal, steamed vegetables, peas, and stewed fruits. There are plenty of fiber-rich foods, which are not difficult to chew or crunchy.

Refrain from using laxatives regularly. Instead, use fiber-based stool softeners. A better option is to include natural foods with laxative properties like figs, dried fruits, prunes, and prune juice.

Cold compresses and warm Sitz baths can provide lot of relief from hemorrhoidal pain.

Use petroleum jelly to lubricate the anal canal just before a bowel movement.

Never leave a hemorrhoid problem untreated even if it is a mild problem. Use herbal and natural supplements to strengthen vein walls and treat hemorrhoids.

Increase your water intake. Drink lots of water with meals instead of drinking after meals. This helps in softening the food and the fiber content. It then becomes easier to pass stools.

Hemorrhoids and Pregnancy

Hemorrhoids during pregnancy are a common occurrence. Many women suffer from hemorrhoidal problems arising from their pregnancy. But, they often disappear soon after delivery of the baby.

Some pregnant women also suffer from bleeding hemorrhoids.

Causes for Hemorrhoids during Pregnancy

Hemorrhoidal problems usually start in the final trimester. If you have hemorrhoids before your pregnancy, they could be aggravated during the advanced stages of the pregnancy. The uterus is located just above the blood vessels where the hemorrhoidal veins drain. The weight of the growing baby causes these veins to swell and that may cause or aggravate hemorrhoids.

Also, the pregnancy hormone **progesterone** relaxes the walls of the varicose veins and that causes them to swell.

Pregnant women often have less exercise or physical activity than they usually have.



Long periods of sitting or standing can aggravate the condition.

During childbirth, all the abdominal muscles exert pressure and this affects the veins in the region.

The veins swell due to the intense pressure. If you have a long labor, it may cause hemorrhoidal problems after childbirth.

Pregnant women often experience constipation due to straining when passing a bowel movement and this may cause hemorrhoids.

Alleviating Hemorrhoidal Problems during Pregnancy

Normally, any hemorrhoidal problems that you develop during your pregnancy will reduce or even disappear as you regain your strength and normal level of activity after childbirth.

You may be allowed to use ice packs in the first twenty-four hours after delivery to ease pain and discomfort. Thereafter, your medical practitioner will advise you whether you can use Sitz baths, perhaps with local application of hydrocortisone ointments or Witch Hazel on sterile cotton balls. These should only be used when approved in advance by your doctor. They will also tell you how long each treatment, if approved, should be.

This can alleviate pain and discomfort.

Every four to six hours you may be advised that you can lie down on your left side for around twenty minutes. This may lower the pressure on the main vein draining the lower part of your body.

Pregnant women should not strain during bowel movements. Allow your body to function normally and visit the toilet promptly when the call comes.

Maintain a regular habit of drinking a glass of water on waking up. Then, you will soon feel the urge to defecate.

Develop and maintain healthy food habits during pregnancy. Have breakfast near to a fixed time as possible. Stick to your meal times as much as possible during the day.

Include lots of fibrous fruits, cereals, grains and vegetables in your daily diet. Eat probiotic foods with your meals to improve intestinal activity.

Drink more water, in line with your doctor's advice, during and after meals.

Maintain a regular physical exercise schedule. Go for a walk regularly as walking promotes good blood circulation and can help to keep you free of constipation.

It is best for pregnant women to refrain from sitting or standing in one place for a long time.

Take adequate periods of rest at regular intervals. This reduces the possibility of developing hemorrhoids during pregnancy.

Pregnant women should not use laxatives. It is always best to consult a doctor before using any drugs to ease hemorrhoidal problems or for any other reason during pregnancy.

If you have bleeding hemorrhoids, you should refrain from eating hot and spicy foods. These will aggravate the situation and increase inflammation and discomfort.

Prognosis of Hemorrhoids

This section explains possible effects of hemorrhoids.

Hemorrhoids are not always considered a dangerous disease but there can be severe outcomes and proper diagnosis of the individual patient's condition and correct treatment are very important.



Hemorrhoidal symptoms may subside without extensive medical care. But, proper treatment and accepting specific dietary conditions and lifestyle changes can bring relief from hemorrhoids within much less time and with less severe symptoms.

You should maintain a high-fiber diet and include many vegetables, fruits,



grains, and legumes in your daily diet. Drink sufficient water. Maintain a regular exercise schedule. Continue with all these even after you recover completely from hemorrhoids. This may help to prevent some relapses.

Soaking in warm water baths, cold compresses, and simple Kegel exercises can alleviate pain and discomfort. If need be, doctors would advise surgery in very serious cases like hemorrhoids with clots. There could be lot of pain after surgery during relaxation and contraction of the anus.

Normally, hemorrhoidal bleeding is not very severe. In some extreme cases, prolonged loss of blood could lead to iron deficiency or anemic conditions.

When to Seek Medical Care

Hemorrhoids are a very common problem. There is no cause for embarrassment if you have hemorrhoids.

If you have hemorrhoids, you may be able to use simple coping techniques to help to reduce some of the pain and discomfort.

In consultation with your doctor, analyze the main cause for your hemorrhoids.

You may be able to take some remedial steps to reduce their effects or more hemorrhoids occurring when your present condition improves.

Ointments for topical application of hemorrhoids can provide only temporary relief. These are not any specific treatment options. You should not use hemorrhoidal ointments except as advised by your doctor. It might cause increased irritation and aggravate your problem.

Though many elderly people develop hemorrhoids, it is not just a problem for older people. Almost anybody can develop this problem.

Getting hemorrhoids does not indicate the end of your world. It is a passing phase and most people can look forward to a good recovery.

Hemorrhoids are sometimes only a short-term problem but there is the possibility of serious complications or that what you think is hemorrhoids is actually a sign of another disease.

You should seek confirmation about your condition from your doctor.

Some possible signs of hemorrhoids are:

- You notice any of the listed signs or symptoms in the earlier chapter. Remember that some of the symptoms may indicate other, possibly even more serious, conditions.
- There are serious changes in your bowel movements like maroon, black or tarry stools – these often indicate intestinal bleeding.

- There is any sign of rectal bleeding. If this is frequent, it may indicate that tests for other ailments like colorectal cancer and inflammatory intestinal diseases should be undertaken.
- You often feel dizzy and light-headed with many bouts of fainting.
- You are above the age of forty and have a family history of colon cancer.
- You have severe pain in your anal region.
- Your prolapsed hemorrhoids do not go back through the anus.
- There is bleeding during or between bowel movements.

If your condition requires the attention of any medical specialists, your general physician might refer you to a gastroenterologist, proctologist, or a surgeon that has experience with conditions affecting the colon or general rectal area.

A **gastroenterologist** specializes in gastrointestinal and rectal diseases.

A **proctologist** specializes in anal diseases and related surgery.

A colon and rectal surgeon specializes in surgeries and other treatments of the diseases of the colon and rectum.

Part-III: Treatment of Hemorrhoids

How Hemorrhoids are Diagnosed

Hemorrhoids do not usually require any complicated tests or diagnostic procedures.

The diagnosis of hemorrhoids is normally from a fairly straight-forward examination of your medical history and a physical examination of the anal region.

Your doctor must find and then evaluate the size and location of the hemorrhoids to decide on the suitable treatment plan according to the severity of the hemorrhoid.



External hemorrhoids are visible on the outside of the anal canal, around the anus.

Internal hemorrhoids are present within the anal canal but are not visible from outside the body.

If many of your family members suffer from hemorrhoids, you could be more likely than the average person to develop them yourself.

Diagnostic Examination

Often, hemorrhoids do not require any detailed diagnostic tests.

Your doctor could first examine the anus and rectum for indications of swollen vessels.

Your doctor will also probably perform a digital rectal examination with a gloved and lubricated finger to check for any abnormalities that might indicate hemorrhoidal growth.

The Anoscope

Doctors use an **Anoscope** for closer evaluation of the rectum. This is a hollow, lighted tube used for viewing the internal hemorrhoids. The anoscope

is placed in your anus so that the doctor can view the inside of the anus and rectum thoroughly.

The process may be uncomfortable for you, but there is no need for any sedatives. Normally, doctors perform an anoscopy in their office which relieves you of the necessity and expense of going to a hospital.

The Proctoscope

If your doctor wants a clearer examination, they could do a **proctoscope** examination. This instrument gives them the opportunity for a complete examination of the entire rectum.

If you suffer from significant bleeding and have had severe blood loss, doctors would advise a complete blood count.

This can also help your doctor assess whether or not you are anemic.

If you have severe bleeding and other significant hemorrhoidal symptoms, the doctors could make more detailed diagnostic tests, involving **sigmoidoscopy** and **colonoscopy**. These procedures involve the use of instruments called the **Sigmoidoscope** and **Colonoscope**.

They are flexible instruments with a light at the end of a long tube. They help doctors to look into the lower part of the colon or the entire colon.

Doctors first conduct a complete sigmoidoscopic examination of the lower part of the colon.

Then, if they believe it is necessary, your doctor will make a colonoscopic examination of the entire colon.

These procedures may help the doctor to diagnose the exact cause for your rectal bleeding. Rectal bleeding might be due to hemorrhoids or other causes like inflammatory intestinal diseases or colorectal cancer.

In some cases, the doctor could advise a Barium enema to detect hemorrhoids. This can help them to check whether other diseases, like colon cancer, are causing your symptoms.

How are Hemorrhoids Treated?

Doctors decide on the best course of treatment for your hemorrhoids after considering your medical history, symptoms and the results from tests like those described in the previous chapter.

They could advise some dietary and/or lifestyle changes.

The available treatment options for hemorrhoids include medications and surgery. But, doctors advise surgery only if the size and effects of the hemorrhoids is major.

Hemorrhoid Treatment Options

External hemorrhoids may first be subjected to home treatments and some simple self-care techniques. These may include:

- Adopting a high-fiber diet by gradually including more vegetables and fruits in your daily diet,
- Drinking more water,
- Adopting a reasonable exercise regime that probably would include simple exercises like walking and swimming,
- Using simple stool softeners like mild laxatives, and
- Application of topical medications.

Some of these treatment options for external hemorrhoids may help with treating internal hemorrhoids. But, if your hemorrhoids are very severe, you require more intense treatments.

You should always consult your doctor before even thinking about trying any over-the-counter treatments.

A few corticosteroid creams available over-the-counter are claimed to reduce swelling and also the pain from hemorrhoids.

If you are already on antidepressant medications or suffer from hypertension, cardiovascular disease, urinary infection or diabetes, you

should not use topical applications containing ephedrine, epinephrine, or phenylephrine HCl.

Some hemorrhoidal creams contain astringents and analgesics that could cause allergies.

Herbal treatments like butcher's broom, horse chestnut, and Japanese pagoda tree are also claimed by some people to sometimes help with hemorrhoidal pain and discomfort.

Treatment Options for Severe Hemorrhoids

Severe hemorrhoids usually require special treatment. These treatment options could be surgical or non-surgical (fixative), or both in combination.

The main objective of fixative treatment options is to reduce the blood supply to the hemorrhoid so that it shrinks and goes away. Any scar tissue that is left behind may help to support the normal anal tissue and prevents more hemorrhoids from developing.

Fixative procedures are sometimes very effective in treating small hemorrhoids that may stick out during bowel movements and go back within the anal canal after bowel movements.

Fixative treatment options are more popular with patients and often advised by doctors. Doctors prescribe such treatments for sick and elderly people with hemorrhoidal problems because they may put less stress on the patient.

Surgical procedures for treating hemorrhoids are used for patients with severe pain or bleeding or those who have not responded to other treatment options.

The treatment options Include:

Rubberband Ligation

This is a fixative hemorrhoidal treatment option. Doctors attach a rubber band around the base of your hemorrhoid inside the rectum. The band cuts off blood circulation and this should cause the hemorrhoid to wither away within a few days. In some cases, there could be a recurrence sometime in

the next five or more years. Then, a second course of banding may cure the problem.

Sclerotherapy

This is also a fixative hemorrhoidal treatment option where your doctor injects a chemical solution near the blood vessels surrounding the hemorrhoid. This causes the hemorrhoid to shrink and fall off.

Cryotherapy

This is another fixative technique of treating hemorrhoids. Doctors use extreme cold to freeze hemorrhoids, which soon fall off.

Infrared Coagulation

This treatment makes use of a special device that burns away hemorrhoidal tissue by the application of heat.

Hemorrhoidectomy

This is a fairly rare surgical treatment only used for very severe hemorrhoids or if you have many small internal hemorrhoids.

This treatment may offer long-term results, but it is usually very expensive and requires a very long recovery time during which the patient can suffer severe pain and feel extremely uncomfortable. There may also be the chance of further complications after this treatment.

Other Options

Some believe that lifestyle changes may help to improve your hemorrhoidal problems.

Some of these changes include:

- Wearing fairly loose cotton undergarments.
- Applying a cotton swab dipped in witch hazel to get relief from hemorrhoidal pain. Always check with your doctor before considering applying anything to your hemorrhoids.
- Using more comfortable seats, so that you do not apply more pressure on and around the affected region.

- Sitting in a warm Sitz bath for fifteen minutes once or twice a day
- Using ointments that prevent or reduce itching
- Regular cleaning of the anal region with a mild, unscented soap and water, especially after bowel movements.

Surgery for Treating Hemorrhoids

Surgery for removal of hemorrhoids will probably be advised if simple self-care treatments and home remedies do not yield satisfactory results.

Surgery may be essential if your external hemorrhoids are very big and causing a lot of discomfort or if you have any small internal hemorrhoids.

Often, untreated hemorrhoids could lead to hemorrhoidal flesh protruding out of the anus. This can cause severe pain, bleeding and discomfort.

Common situations that necessitate surgical removal of hemorrhoids include prolapsed hemorrhoids, excessive bleeding, unbearable pain and thrombosed hemorrhoids.

Some fixative procedures are also forms of surgery and are included here for completeness.

Types of Hemorrhoid Surgery

Rubberband Ligation

This is the most common, non-operative type of surgical removal of hemorrhoids. Rubberband ligation can be most effective on first and second-degree hemorrhoids.

In this technique, a rubber band, about one millimeter in diameter is fitted to a special gun-like device. The operator pulls the trigger, then the rubber band lodges itself at the base of the hemorrhoid, stopping the hemorrhoid's blood supply. The hemorrhoid usually shrivels and falls out within a week.

As a hemorrhoid does not have any nerve endings, the rubber band ligation procedure does not require anesthesia.

Sclerotherapy

This non-operative type of surgical removal of hemorrhoids involves the injection of a chemical solution all around the bleeding hemorrhoid or swollen blood vessels. The chemicals cause the blood vessels to shrink and fall off. The inflammation then ceases when the hemorrhoid falls off.

Infrared Coagulation:

This non-operative type of surgical removal of hemorrhoids uses infrared radiation. The doctor has a special beam of infrared radiation fired at the hemorrhoids. The heat from the radiation causes the hemorrhoid to burn and fall out.

Stapling

This is a relatively new technique for the removal of hemorrhoids that is gaining popularity. But, there may be a greater chance of a relapse or recurrence of hemorrhoids when this technique is used.

Hemorrhoidectomy

This is an operation to remove hemorrhoids. This is fairly complicated and you need to be hospitalized. Normally, doctors prescribe this surgery only in cases of very severe hemorrhoids. The recovery period may also be long.

There are two types of Hemorrhoidectomy; a **closed hemorrhoidectomy** and a **circular stapled hemorrhoidopexy**.

In a closed hemorrhoidectomy, the surgeon uses a special anal speculum to expose hemorrhoidal tissue. He then cuts off the tissue and closes the wound with absorbable stitches.

In a circular stapled hemorrhoidopexy, the surgeon removes the excess mucosal tissue around the anal canal. The hemorrhoids are then pulled back and stapled. This procedure may be less painful and have a faster recovery period.

Cryosurgery

This is another non-operative method for removal of hemorrhoids. Your doctor uses nitrous oxide or liquid nitrogen in a special device which is called a **cryoprobe**. The chemical helps to cool the tip of the cryoprobe near to freezing.

The doctor uses this cold probe to either freeze hemorrhoids or ligate them. Either way, the hemorrhoids soon fall off.

The surgery is painful, so doctors usually advise use of a local anesthetic.

Clot Removal

This technique is for the surgical removal of clotted, or thrombosed, hemorrhoids. Your surgeon will have a local anesthetic administered. Then, the surgeon cuts off the skin, removes the clot, and then stitches the wound and applies a dressing.

Although you are now free of the throbbing pain of the hemorrhoidal clot, you may feel lingering pain from the surgery for some time. This subsides as your wound heals.

This technique may prove to be the best if done within four to five days of formation of the clot.

Medical Treatments for Hemorrhoids

There are various medications and simple medical treatments that are claimed to help relieve the symptoms of hemorrhoids. Most are available over-the-counter.

Always consult your doctor before considering the use of any such preparation.

Ointments like calamine, zinc oxide, or petroleum jelly which are among the most popular non-prescription treatments for hemorrhoids. These astringents coagulate proteins in your surface skin cells. This leaves a thin protective barrier over the hemorrhoids and is claimed to reduce the itching sensation by decreasing the effect of mucous and other irrational secretions.

Over time, it is claimed to relieve you of all hemorrhoidal symptoms.

Some people use up to six applications each day.

Some people claim that astringents like witch hazel may provide temporary relief from itching, burning, discomfort and irritation.

Various suppositories like Anusol lubricate the anal canal during bowel movements. This relieves irritation and itching.

Some of these suppositories might harm anal tissues if used too often. So, consult your doctor before purchasing them and follow directions with care.

Suppositories may decrease straining associated with defecation. However, there can be factors which require professional advice before using them.

Protectants reduce irritation around the anus during bowel movements as these medications form a barrier in the perianal area. These medications are intended to prevent contact of the irritated skin with aggravating liquid or stool from the rectum. This is claimed to reduce pain, burning, itching and irritation.

Common protectants include Cocoa butter, Cod-liver oil, Glycerin, Aluminum hydroxide gel, Calamine, Shark liver oil, Topical starch, Mineral oil and Kaolin.

Special steroidal medications containing just 1% to 2.5% hydrocortisone are claimed to provide some relief from hemorrhoidal inflammation, pain and itching. Hemorrhoid creams with lidocaine are also claimed to reduce pain.

Hydrocortisone is claimed to have anti-inflammatory, antimetabolic, lysosomal membrane stabilization and vasoconstrictive properties that may prove beneficial in relieving some of the irritation of hemorrhoids.

You should only ever consider using these products after getting advice from your doctor first. Also, you should not use them beyond a fortnight as it could thin your skin around the anus and cause allergies and irritation. You should obtain these medications only as a prescription medication.

There are certain anesthetics with a numbing effect. These products are claimed to provide help for those with painful external hemorrhoids. However, you may develop allergies due to use of these medications. It is always best to consult your doctor before deciding whether to get this type of preparation.

Some doctors may advise laxatives or stool softeners for particular patients to cause the stool to bulk and make it softer. This allows the stool to pass out more easily.

One or more of the following techniques might be recommended to particular individuals by their medical practitioner for improvement in the condition of their hemorrhoids:

- Sitz baths or sitting in warm water for fifteen minutes,
- drinking plenty of fluids,
- increasing fiber in the diet, and
- doing more simple exercises.

Vasoconstrictors contain chemicals that are similar to the natural substance, epinephrine. Some doctors may suggest (for particular patients) local application of the cream around the anus. This may cause the blood vessels to become smaller and reducing swelling, itching and pain. Local application of the prescribed version of this type of ointment might cause

milder side effects than if you use vasoconstrictors in injectable or oral formulations.

Antipruritics are said to be similar medications to analgesics and anesthetics. These medications stimulate the cold receptors and suppress cutaneous sensory receptors in the perianal area. They are claimed to reduce the disturbing symptoms of hemorrhoids. Antipruritics include menthol, juniper tar, and camphor. but, doctors are divided over the effectiveness of these medications so check with your doctor for his advice and the most current information before considering whether to get any of them.

Anal dilation is claimed to be an effective treatment for hemorrhoids. This technique involves stretching of the anal sphincter muscle to reduce increasing pressure on rectal veins due to hemorrhoids. This stretching reduces straining required for passing of stools.

Side effects include fecal incontinence and anal leakage. This technique is obviously not suitable for elderly patients and those with weak sphincter muscles.

Dosage and Selection of Medications

Pharmacists play an important role in deciding the specific medication for treatment of hemorrhoidal symptoms and suggesting the most suitable dosage. Your medical practitioner should determine the specific type of hemorrhoid before prescribing medication based on their knowledge of the medical history of the patient.

They must consider if you are allergic to specific medications or if you already have other existing diseases like hypertension, diabetes, hyperthyroidism or urinary infections, or whether suffer from depression.

If the application of any specific ointment causes existing symptoms to aggravate, stop application immediately and consult your physician who can advise about your future course of treatment.

Self-Care Hemorrhoid Treatment at Home

Treatment options for your hemorrhoids will depend on their severity.

Some people claim to get good relief from hemorrhoidal symptoms with simple self-care treatments after consulting their medical practitioner.

Simple Self-Care Techniques

Hot Sitz baths

Doctors may recommend a Sitz for specific patients. Sometimes, this might be used up to three times a day and possibly for fifteen minutes after a bowel movement.

Some people who favor this practice, claim that some of their patients get good effects from their Sitz bath by sitting in a few inches of warm water in a tub. You might place the tub in a special basin on top of the toilet or have it in your bathtub. Make sure that everything is very stable.

The water should just be a little warm and not be too hot. You should not add any bath oil, Epsom salt, soap or any other substance that could cause irritation to your hemorrhoids.

Dry the skin around the anus thoroughly after each bath so that it does not develop any tears.

Pregnant women in the last months of their pregnancy should not try Sitz baths as water could enter through the vagina.

Dietary changes

Some hemorrhoid sufferers, depending on their medical history and current circumstances, may find some of the following tactics useful.

Increase the amount of leafy green vegetables and fruits in your diet.

Eat more portions of fibrous food like grains, oats, bran and legumes. This may help to make your stools bulkier and soft and possibly relieve constipation.

Doctors might prescribe a bulking agent like psyllium for you to increase your fiber intake. This is a high-fiber supplement that might be available from some drug stores and grocery shops.

Fiber comes in two forms; soluble fiber and insoluble fiber.

Bulking agents have more insoluble fiber. Foods rich in insoluble fiber include whole-grain breads, wheat bran, fresh fruits, and vegetables.

Soluble fiber is found in foods like oat bran. Although soluble fiber is a healthier option, it may not ease constipation as much as insoluble fiber.

Increase the amount of water that you drink through the day. Don't drink large quantities at any time - spread out the intake over your day.

Drink water while eating fibrous foods rather than drinking after your meals. The insoluble fiber absorbs water and is claimed to make your stools softer and bulkier.

You might also drink fruit juices, like prune juice and apple juice. These may ease constipation problems.

Stool softeners and lubricants

You can use fiber-based stool softeners to makes your stools soft. However, if you develop watery stools due to using a laxative, it could encourage anal infections to develop.

You might, with great care, use your finger to lubricate the anal opening and inside the anal canal with lubricants like petroleum jelly before bowel movements. However, wash your hands thoroughly before and after the treatment.

Ice Packs

Some people use an ice pack on thrombosed external hemorrhoids for up to fifteen or twenty minutes. Keep the ice wrapped in a cloth or place a cloth in between ice and your skin to reduce the possibility of any damage to your skin.

Exercises

Make simple exercises a regular habit. Exercise helps in better digestion and improves the symptoms of constipation. Simple exercises like walking and swimming might prove very beneficial. Always start with an easy regimen that you can comfortably handle at first. Many people always drink some water after their exercise.

Changes to Posture

Doctors normally prescribe specific postures for relief from hemorrhoids. It is best not to sit or stand for a long period as this is likely to aggravate the effects of your hemorrhoids.

You may try using comfortable seating arrangements like doughnut cushions.

Good Bowel Habits

Develop good and hygienic bowel habits.

- 1)** Go to the bathroom promptly when you feel the urge to defecate.
- 2)** Do not strain bowel movements.
- 3)** Use soft tissue or wipes.

Herbal Treatments for Hemorrhoids

Hemorrhoids are not usually fatal or dangerous ailments, except in some instances. But, they can be very uncomfortable.

Herbal remedies for hemorrhoids are claimed to be an inexpensive and natural way of combating your problem. Some people suggest that they may be very helpful to hemorrhoid sufferers.

But, their effects are dependent on substances which may be similar to prescription medications. Using them may have negative effects on you and work against the treatment prescribed by your doctor.

Always consult your doctor before considering whether you might get and use any of these preparations.

Benefits Claimed for Herbal Remedies

Herbal remedies may make use of natural plant extracts from herbs that are grown naturally. They should not contain any synthetics or artificial agents but use the herbs in their natural form.

Herbal remedies are claimed to be safe but always check them with your doctor before buying or using them.

Some people make herbal remedies themselves at home. But, this involves risks if they are not qualified with a proven knowledge of the effects of all the various substances involved and the skills to make sure that the ingredients are safe and to ensure that they do not make any mistakes with the strength or safety of the ingredients and when using the preparations.

Herbs are available from "health" stores but may not be as closely controlled or carefully labeled as is required for medicines which are subject to strict tests and regulation in each jurisdiction.

Always consult your doctor before considering using any herbal or other non-prescription treatment.

Herbal Treatments

Aloe Vera

This herb is widely used for its claimed cooling and soothing properties. The aloe gel is obtained from the leaves of the Aloe Vera plant. Some people claim that applying this gel may soothe the swelling and pain of external hemorrhoids.

Aloe Vera latex extract is a natural laxative which some claim may bring some relief from constipation. They claim that it may prevent stools from becoming hard and irritating hemorrhoids.

Cold soaks and compresses of Aloe Vera extract are claimed to be helpful. Some people say that they use bottled Aloe Vera gel or break a leaf from an Aloe Vera plant and use it as a compress externally.

Aloe Vera is highly potent, so you should consult your doctor before deciding to try any Aloe Vera preparation and only ever use it very sparingly. Some people combine it with other herbs.

Bromelain

This is a combination of various digestive enzymes found in pineapple. These enzymes are claimed to sometimes reduce swelling and inflammation. Some people use it for treatment of hemorrhoids and other vein conditions like varicose veins and chronic venous insufficiency.

Butcher's Broom (Ruscus aculeatus)

Butcher's broom is an evergreen bush with a stiff spine. This bush gets its name as those spines were traditionally used in making brooms in the old days. Butcher's broom is used as both a vegetable and as a herb. It is closely related to asparagus.

It is claimed to have strong anti-inflammatory and vaso-constricting properties. Some people drink a sort of tea made from butcher's broom but this should only be considered after discussing it with your doctor. The 'tea' will probably need to be sweetened to taste with honey.

Some people make a paste of the root of Butcher's broom bush and apply it to their external hemorrhoids for relief from pain and itching. The root contains ruscogenins as an active ingredient which some claim has some natural ability to narrow blood vessels to reduce inflammation.

Calendula

Calendula cream is promoted by some people who claim it is a good pain reliever and may reduce inflammation. They use the cream as a topical application or make a strong infusion and use in a Sitz bath.

Cranesbill (Geranium maculatum)

This is a wild plant related to the geranium that is sometimes apparently used by Native Americans for relieving various digestive conditions. The root and tuber of this herbal plant are claimed to have astringent qualities. Some people use it to relieve some of their hemorrhoidal problems.

Dandelion

Some people apply Dandelion tincture to their external hemorrhoids for relief from pain. Another folk treatment is to take Dandelion capsules to soften hard stools.

Horse Chestnut (Aesculus hippocastanum)

The seeds of the horse chestnut tree have been used for treating vein conditions by some people since the nineteenth century. Horse chestnut extract contains aescin which they say may improve vein elasticity and reduce inflammation, improve vein tone and perhaps even strengthen vein walls.

Horse chestnut is also promoted as being able to lessen the swelling and improve fluid retention.

Horse chestnut extract is currently in common use in Europe and Asia for treatment of hemorrhoids. They apply horse chestnut ointment two or three times a day on their external hemorrhoids. Strangely, they say not to take it orally as the tannins it contains may increase constipation.

Horsetail

Horsetail tea is claimed by some people to sometimes help with the effects of hemorrhoidal bleeding. However, this bleeding may be a sign of serious problems, so always consult your doctor before trying this or any other treatment.

Japanese Pagoda Tree (Sophora Japonica)

Japanese pagoda tree extracts are claimed by some people to sometimes help with relief from the pain, itching and discomfort associated with hemorrhoids.

Some also say that it may be effective at reducing discharge and associated itching, bleeding and inflammation.

Mint and Ginger

Some people make a mixture of a half-teaspoon of fresh lime juice, a half-teaspoon of fresh ginger juice, a tablespoon of honey and a half-teaspoon of mint leaves. They may take this mixture once daily to get good relief from hemorrhoids.

Pilewort (Ranunculus ficaria)

This herb can cause serious side effects such as blisters but some people have traditionally used it to treat their hemorrhoids!

Definitely NOT recommended.

Early herbalists may have felt that it could be a good cure for hemorrhoid problems because the physical appearance of pilewort plant and its tubers is similar to that of a pile or hemorrhoid!

Some people say that they use pilewort tincture as an external application on the hemorrhoids or make a tea from the tubers and drink it.

Plantain (Plantago major)

The plantain tree is said to be very rich in fiber content which is why some people have used it to try it on their hemorrhoids. Plantain contains a natural compound, allantoin, an anti-inflammatory agent. It is claimed by some that this may help your skin heal from wounds.

Psyllium (Plantago ovata)

Psyllium, or flea seed, is a natural laxative. Chronic constipation can aggravate existing hemorrhoids and some people's hemorrhoidal problem may develop from constipation.

Psyllium has very high fiber content and contains lot of gum-like residue. It is used in some preparations which are sold for relieving constipation.

The husk of the psyllium seed absorbs water and keeps the stool soft and moist. Some people claim that the psyllium seeds may coat and soothe the bowel lining.

Drinking lot of water with psyllium seeds is claimed to improve the effect with these seeds.

Ask your doctor whether taking psyllium capsules might help you with relief from pain, itching, bleeding and discomfort by easing bowel movements.

Witch Hazel (Hamamelis Virginiana)

This is a popular astringent and sometimes used in creams and ointments for hemorrhoids.

The promoters claim that:

- 1)** The leaf and bark of this medicinal herb may reduce swelling and inflammation of external hemorrhoids.
- 2)** It can also control hemorrhoidal bleeding as it causes the blood vessels to shrink and contract.
- 3)** Witch hazel is a cooling, soothing astringent that helps relieve pain and itching.

Some people put a bottle of witch hazel in a bucket of ice. When it gets cold, they use a dab of this witch hazel on a cotton ball and apply it on the external hemorrhoids to try to get some relief from pain, itching and bleeding.

Cold-water treatment may shrink veins and is claimed by some to tone up the walls. Those people apply a cold compress to the rectal area for an hour before going to bed at night.

Yam

Some people dry a few yam slices and make them into a powder. They mix this with certain other herbs and spices, then press this into pellets. They eat these pellets. I definitely would not do this, nor do I recommend that anyone reading my book does so.

Other herbs

Some other herbs like white oak and bayberry are made into a paste which some people claim may be helpful when treating hemorrhoids.

Some people claim that compresses of cypress, lavender, frankincense or myrrh may be helpful when trying to alleviate hemorrhoid inflammation.

Others suggest that Rosemary oil in a warm bath can improve circulation and alleviate pain but I was advised that a patient should not add anything to their warm baths without first checking about it with their doctor.

Some people claim that Elder and honeysuckle flowers mixed with boiling water or hot milk as a compress (Do NOT drink any mixture of this sort) may relieve some hemorrhoid symptoms to a varying extent, depending on the individual. Some steep the mixture for fifteen minutes, strain it and then add more milk or boiling water. They soak a clean cloth in the liquid and apply the hot pack to the external hemorrhoid. This should not be done without your doctor's approval.

Some people say that they use the leaves or green berries of these flowers as a hot ointment.

Drinking any bitter herb tea like that of dandelion root, stone root, and yarrow is claimed by some people to sometimes help relieve constipation to some extent.

Lifestyle Changes

You may be able to help the effects of the treatment which your doctor advises you by discussing with him or her whether you should make any of the changes in your diet and lifestyle I list here.

Eat more foods that contain beneficial fiber. Include more plant fibers like legumes, whole grain cereals, nuts, fruits, vegetables, and seeds.

Drink more water as it helps to keeps your body, including your brain, hydrated and makes your stools more moist and loose. Fiber-rich products and water stimulate digestion and allow better circulation of blood within the body.



Regular exercise should be a part of your daily life. Go for walks, and other forms of physical exercise like swimming, running, or jogging.

Avoid lifting anything heavy wherever possible as it may cause your pelvic muscles to cramp and increase hemorrhoidal pain. When you cannot avoid lifting something, even if it is fairly light, follow safe lifting practices to limit any aggravation of your hemorrhoidal pain and discomfort.

Some people claim that Yoga exercises may help to provide some relief. Always discuss this idea with your doctor so that he can advise you from his specialist knowledge and the knowledge of your medical history and present condition.

Part-IV: Coping with Hemorrhoids

Diet and Nutrition that may Help Hemorrhoids Patients

Hemorrhoids patients should ideally eat a fiber-rich diet which may help to relieve some of the discomfort and pain.

Dietary Fiber

Dietary fiber is of two types: soluble and insoluble.

Soluble fiber is commonly found in apples, citrus, oat bran, pears, peas, beans and Psyllium.

Insoluble fiber is found in wheat bran, cabbage, peas, beans, and root vegetables like carrots, turnips and potatoes.

Insoluble fiber is said to be of prime importance for hemorrhoids patients. This fiber has the capacity to absorb large quantities of water and retain it in the colon. This results in soft, large stools that may help to reduce constipation problems.

High-fiber foods include vegetables like cabbage, broccoli, carrots and peas. You may benefit from eating more leafy green vegetables and fruits with good fibrous content

These fruits include bananas, papaya, apples, peaches, raisins, pears, plums, figs, melons, blackberries, blueberries, cherries, guavas, prunes, mangos, limes and cranberries.

Many people believe that they benefit by eating foods made of whole grains like corn bran, wheat bran, and brown rice.

Kidney beans, peanuts and lentils are good sources of fiber and are rich in proteins.

Wonderful Water

Many people may benefit from drinking between eight and twelve glasses of water most days. I have found that easier to do if I just drink about a half a glass of water each time. This may help your hemorrhoids but it is also

believed to help your blood circulation and protect your body, including your brain, from dehydration.

Restrict your intake of alcoholic beverages and caffeinated drinks like tea and coffee.

Drink lots of fruit and vegetable juices, preferably pure ones without additives or extra sugar.

Avoid eating spicy and salty foods.

Avoid fried foods and foods rich in animal protein and fat.

Avoid eating lots of sweets or sugary foods like cakes and pastries.

Reduce your smoking. Stop, if you are able to do that.

Some people take vitamin supplements and the promoters claim many benefits but anyone that is eating a healthy, varied diet may not need artificial supplements.

Discuss the worth, or otherwise, of simple home treatments like grated radish in honey, soaked dried figs, and bitter gourd juice in buttermilk with your doctor.

Some people claim to have benefited by eating dark berries which, they say, are rich in antioxidants.

Reduce or stop eating too many processed foods or fast food snacks. Many of these products have very low fiber content and will not help the comfortable excretion of waste from your body.

You should avoid foods or snacks that could cause indigestion, gas and diarrhea.

A diet for hemorrhoids patients might include:

A high-fiber breakfast with, perhaps a wheat bran cereal and a sliced banana, or other fiber-containing fruit, or peanut butter on whole-wheat toast.

Include fish, unless advised otherwise by your doctor and a range of vegetables in your diet.

Some people reduce the amount of meat which they consume.

Sandwiches should be of whole grain breads rather than heavily processed white bread.

Snacks could consist of carrot sticks or fruits like apples and raisins. Carrot sticks are low in calories, are tasty and easy to prepare.

Reducing Hemorrhoidal Effects with Simple Lifestyle Changes

Hemorrhoids could prove extremely inconvenient and uncomfortable.

There is no specific way to avoid hemorrhoids completely. You might discuss some of the measures below with your doctor to see if he thinks that they might reduce the incidence of your hemorrhoids or their effects on you:

Avoid straining rectal and anal veins by exerting pressure on them. You should defecate only when you feel the strong urge for defecation. If you are unable to defecate normally, try again after some time.

Go to the toilet promptly when your body has the urge. Do not postpone a bowel movement when you feel the urge. Regular postponement of bowel movements may reduce the capability of your abdominal muscle to push out fecal materials. They may then harden within the anal canal so that it becomes more difficult and uncomfortable to pass stools later.

Normal bowel movements take two to five minutes. Sitting on the toilet seat for a long time and reading on the toilet seat are bad habits which may cause increased pressure on the anal muscles and thereby weaken them.

Restrict foods that contain lots of animal protein, animal fat and foods made of refined flours. Some of these foods contain very little fiber and may tend to make your stools drier, less bulky and harder to pass.

Drink sufficient water and other healthy fluids like fruit juices. Water softens your stools.

There are benefits for most people in eating a fiber-rich diet.

Include fibrous food such as bran, oatmeal, raw fruits and vegetables and whole grains in your daily diet.

Elderly people may tend to skip eating fibrous food as it may be more difficult for them to bite and chew. But, most elderly people can easily eat chewable foods like steamed vegetables, oatmeal and stewed fruits. These help to provide most of the essential fiber and may not cause as much strain on their ability to chew or bite their meals.

Make simple exercise a part of your daily routine. Regular exercise tones your muscles and strengthens them. Further, it may help to reduce your weight and reduce the incidence or effects of hemorrhoids.

Again, exercise increases your thirst and you tend to drink more water. This improves digestion, hydration, and helps to flush toxins from your body.

Standing or sitting for long periods can put pressure on rectal veins which may encourage hemorrhoids. If your job entails long hours of standing or sitting, take frequent breaks and walk for few minutes before resuming work.

Wear cotton undergarments that are not too tight. This may reduce pain and itching associated with hemorrhoids.

Some people get relief when they use a Sitz bath for ten to fifteen minutes.

Do not use laxatives more than absolutely necessary. Instead, include more foods with a natural laxative content like prunes, figs and fruit juices like prune juice and apple juice.

Reduce your intake of tea or coffee and alcohol. These dehydrate your body and may encourage constipation and the development of hemorrhoids.

Hemorrhoids and Exercise

Hemorrhoids are probably more common among people that do not have much consistent, healthy physical activity. It makes sense to do some light exercises as part of your daily routine.

Regular and appropriate exercises which you have consulted your doctor about may help with the treatment of your hemorrhoids and possibly help to reduce the chance of more occurrences in the future.

Exercise may improve your blood circulation and helps by bringing more blood to your anal region. Healthy blood can provide essential nutrients and also help to remove the unnecessary toxins and other waste.

Good nutrients help strengthen rectal veins and alleviate inflammation. Toxins lodged within the anus veins may tend to weaken the vein walls. This might encourage the development of hemorrhoids. Removal of toxins from the anal region improves functioning of the anal veins and surrounding regions.

Exercises may help to reduce obesity in a person. Obese people may be more prone to hemorrhoidal ailments.

Exercise for Hemorrhoid Patients

The basic requirement of exercise that could be most suited for people with hemorrhoids are those that increase and improve muscle tone.

If you have a good muscle tone, you may be less likely to suffer from hemorrhoids and their effects may also be less severe.

Poor muscle tone, indicated by sluggish and soft muscles happens when muscles are poorly used.

Simple exercises that boost a good muscle tone include walking, running, jogging, swimming, yoga and aerobics.

Discuss what may be the best options for your particular situation with your doctor before deciding whether to use any particular form of exercise. Your

general physical state, particular condition and medical history all need to be considered first.

Many people claim that a daily walk for up to half an hour has benefited them. But, that might be too much for you – start with a shorter period of the least strenuous exercises. Add to your routine when you feel in charge of it.

Simply running or jogging for a few minutes may help to make your muscles more firm and useful.

Swimming offers a complete workout for all the muscles in your body. A daily swimming session of up to thirty minutes is perhaps something which you can build up to. The supporting action of the water can make people less tired than if they run for an equivalent time in many cases.

Yoga stretches may be appropriate for you but be careful as many beginners are injured every year due to their not understanding the pressures which some stances may put on various parts of their bodies.

Some people claim that "anus exercises", which involves contraction and relaxation of certain muscles, may be helpful for getting relief from hemorrhoids. But, this is definitely something which should be discussed with your doctor first. These exercises could prove uncomfortable initially and may even be totally unsuitable for any particular individual.

Tips for Coping with Hemorrhoids

Hemorrhoids are a very common problem which can affect many people.

You should adhere to specific dietary restrictions like:

- ✓ Avoid spicy and oily food.
- ✓ Eat more fruits and vegetables, including those with good fiber content such as whole grains, oats, bran, prunes, figs, dried fruits.
- ✓ Drink sufficient water.

Simple lifestyle changes may bring some comfort:

- ✓ Start a regular exercise regimen with simple exercises like walking and swimming.
- ✓ Develop good bathroom habits. Do not use the bathroom unless you feel a strong urge to defecate. But, do not suppress your urge for any reason. This might harden stools while they wait inside you and lead to constipation. That could encourage the development of more hemorrhoids.
- ✓ Always keep the anal region clean. Use moist towelettes to clean the region. Dry tissues may cause irritation in the sensitive skin around the anal region.
- ✓ Do not over-wash the area, which might cause ruptures and fissures.
- ✓ Dry the anal region gently and thoroughly after cleaning.

Glossary of Hemorrhoid and Other Anorectal Conditions

Abdomen: Part of the body between the pelvis and the chest

Acute hemorrhoidal attack: Sudden pain and swelling of prolapsed internal hemorrhoids and/or external hemorrhoids

Alimentary: Relating to a digestive organ.

Anal: Pertaining to the anus

Anal fissure: Rupture in the skin of the anal canal exposing the sphincter muscle and causing severe pain, normally extending from the dentate line to the anal opening

Anal stenosis: Narrowing of the anal canal

Anal ulcer: Chronic and severe anal fissure

Anal wart: Fleshy and lumpy growth in the anal canal or the anus, often due to direct sexual contact.

Anorectal: Pertaining to the anus and rectum

Anoscope: A medical device in the form of a long tube with a light attached at one end, used for visual examination of the anal canal

Anoscopy: Visual examination of anal canal and rectum by an anoscope to detect for anorectal polyps

Anus: Terminal end of the digestive system composed of two circular sphincter muscles; although it normally remains closed, the sphincter muscles relax and allows the anus to open for elimination of feces

Barium Enema: Enema of a solution of barium sulfate taken to assist with X-Ray exposure where it can show any bulges in the colon due to polyps, tumors or ulcers.

Barron ligator: Instrument used for placing rubber band ligations on internal hemorrhoids.

BICAP coagulation: Method of cauterizing and removing hemorrhoids through the use of electricity with a Bipolar Circumactive (BICAP) probe

Cauterize: To sear with the help of caustic agents. This is used to either to destroy affected tissues or prevent the spread of infection.

Chronic: Continuing for a long period.

Chronic hemorrhoids: Recurring hemorrhoids that persist for a long time.

Colitis: Inflammation of the lining of the colon.

Colon: The large intestine or large bowel. Part of the digestive system with the primary function of absorbing water and salt from digested food, which leads to the formation of feces.

Colon and rectal surgeon: Surgeon specializing in surgery in the colon and rectum.

Colonoscope: A 75-inch long flexible tube with camera and special attachments to cauterize polyps in the colon and the rectum.

Colonoscopy: A visual medical examination of the colon to detect polyps.

Colorectal: Pertaining to the colon and rectum.

Constipation: Difficult or strained passage of feces.

Crohn's Disease: Inflammation of the colon caused by blockage due to development of scar tissues causing abscesses, fissures, fistulas and skin tags.

Cryosurgery: Surgical procedure to remove tissues with a freezing process.

CT scan: Computed Tomography scan to perform a virtual (computer-based) colonoscopy.

Dentate line: Ring of tissue arranged on top of the anal canal separating the anus from the rectum

Digital examination: Medical examination of the anal canal where the doctor uses fingers to probe into the anal canal to locate hemorrhoids or polyps.

Electrocautery: Process using electricity to cauterize tissues.

Endoscopy: Visual examination of a body cavity with the help of an endoscope.

External hemorrhoids: Hemorrhoid located around the anus

Fissure: Same as [anal fissure](#).

Fistula: Tunnel within the anal canal extending from an infected gland to an external opening in the skin around the anus.

Gastroenterologist: Doctor that specializes in gastrointestinal diseases.

Gastrointestinal system or tract: Digestive organ extending from the esophagus to the anus.

Hemorrhoid: Swelling of veins in the anorectal area.

Hemorrhoid bundle: Cluster of hemorrhoids.

Hemorrhoidectomy: Surgical process to cut off hemorrhoidal tissues.

IBS: Same as [Irritable Bowel Syndrome](#)

Impaction: Sticking of dried and hardened feces within the intestines.

Inflammatory Bowel Disease: Gastrointestinal disorder due to inflammation of affected tissues. Common types include ulcerative colitis and Crohn's disease.

Infrared coagulation: Cauterization and removal of hemorrhoids using infrared light.

Internal hemorrhoids: Hemorrhoids occurring inside the rectum.

Intestinal transit time: Time taken for food to move through the intestine and pass as stool. This is normally used when trying to relate diet to digestion time.

Irritable Bowel Syndrome: Disorder characterized by bouts of constipation, diarrhea, cramps and gas.

Large bowel: Same as [Colon](#).

Laser Hemorrhoidectomy: Removal of hemorrhoids using laser beams.

Mucous colitis: Same as [Irritable Bowel Syndrome](#)

Nervous bowel: Same as [Irritable Bowel Syndrome](#)

Polyp (colon): Abnormal growth in the lining of the colon. It may be benign or a malignant type that may lead to colorectal cancer.

Proctologist: Doctor specializing in the treatment of anorectal diseases

Proctoscope: Ten-inch tubular device used for anal and rectum examination

Proctoscopy: Visual examination of anus and rectum using a Proctoscope

Prolapsed hemorrhoid: Swollen internal hemorrhoid that bulges out of the anal opening.

Pruritus: Itching.

Pruritus Ani: Anal itching, a common symptom of hemorrhoids.

Rectum: End part of the colon, including the anal canal and storage space for feces before elimination.

Rubber band ligation: Method of removing hemorrhoid by tying it with a rubber band to stop it getting a supply of blood, which causes the hemorrhoid to wither and fall off.

Ruptured hemorrhoids: Blood clot within an external hemorrhoid that is bursting through the skin.

Sclerosing agent: Solution that irritates tissue causing scarring and hardening.

Sclerotherapy: Method of removing internal hemorrhoids by using a Sclerosing agent.

Sigmoidoscope: 24-inch flexible tube used for rectal and colon examination.

Sigmoidoscopy: Visual examination of rectum and colon with the help of Sigmoidoscope.

Sitz bath: Warm water bath used to bring temporary relief from hemorrhoidal swelling and pain. It can be done on a special basin which is placed on top of the closed toilet or in the bathtub.

Skin tag: Flabby skin that is a remnant of a thrombosed hemorrhoid and hanging out of the anal opening.

Small bowel: Same as Small intestine.

Small intestine: The initial part of the intestine involved in the digestion of food and absorption of nutrients.

Sphincter muscle: Circular muscle that remains closed on contraction and opens on relaxation.

Stool softener: Non-prescription medication or bulking agent intended to make stools moist and soft.

Thrombosed hemorrhoid: Hard lump of an external hemorrhoid containing a blood clot.

Ulcerative colitis: A common inflammatory bowel disease. A chronic colitis characterized by pain, weight loss and bloody diarrhea.

Valves of Houston: Folds in the rectum that store fecal matter before elimination. these valves exert pressure for elimination when stools become heavy, triggering the urge to defecate.

Varicose veins: Swollen veins that change shape and become weak leading to improper functioning.

Seymour Says

I hope that my book will help you to better understand the causes, effects and recommended treatments for your hemorrhoids.

Also, you should share this book with your wife or husband and include them in your discussions with your doctor wherever possible, so that they know how best to assist you through this time and also the best methods for them to avoid getting hemorrhoids themselves.

Hemorrhoids are not a good subject for jokes but they are also not something which anyone should be embarrassed about having; almost anyone can get them at some time.

Good luck and keep smiling.

Seymour Wells.

[Another eBookWholesaler Publication](#)