

Managing piles (haemorrhoids) without surgery

General Surgery

Information for Patients

Produced: February 2026

Review: February 2029

Leaflet number: 1705 Version: 1

What are piles (haemorrhoids)? Piles are swollen blood vessels. They can form inside and around the anus and rectum (back passage). They are very common. They affect around half of the people in the UK at some stage.

What causes piles?

There are several situations that are thought to increase the chance of piles developing

- **Long-term (chronic) constipation or diarrhoea:** straining during bowel movements will raise pressure in the back passage
- **Low fibre diet:** if your diet is low in fibre, you are more likely to become constipated and need to strain to open bowels
- **Pregnancy:** the weight of the growing baby and hormonal changes can increase pressure inside the tummy (abdomen) and in the back passage
- **Ageing:** the tissues in the back passage may become weaker as we get older
- **Obesity:** excess body weight can cause higher pressure in the lower abdomen
- **Heavy lifting:** repeatedly lifting heavy objects can raise pressure within the abdomen
- **Hereditary:** there is evidence that you have more chance of developing piles if close family members have had them

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.uhleicester.nhs.uk for maps and information about visiting Leicester's Hospitals.
To give feedback about this information sheet, contact uhl-tr.informationforpatientsmailbox@nhs.net

Common symptoms of piles:

- Discomfort and pain
- Itching and irritation of skin surrounding the back passage
- Bleeding, mainly after going to the toilet
- Mucous discharge
- Feeling of fullness in the back passage
- Feeling of not fully emptying back passage after going to the toilet

What do piles feel and look like?

Piles can be inside the back passage (internal) or outside the back passage (external). The symptoms of piles can vary. It depends on

- the size
- place (internal or external)
- amount of piles.

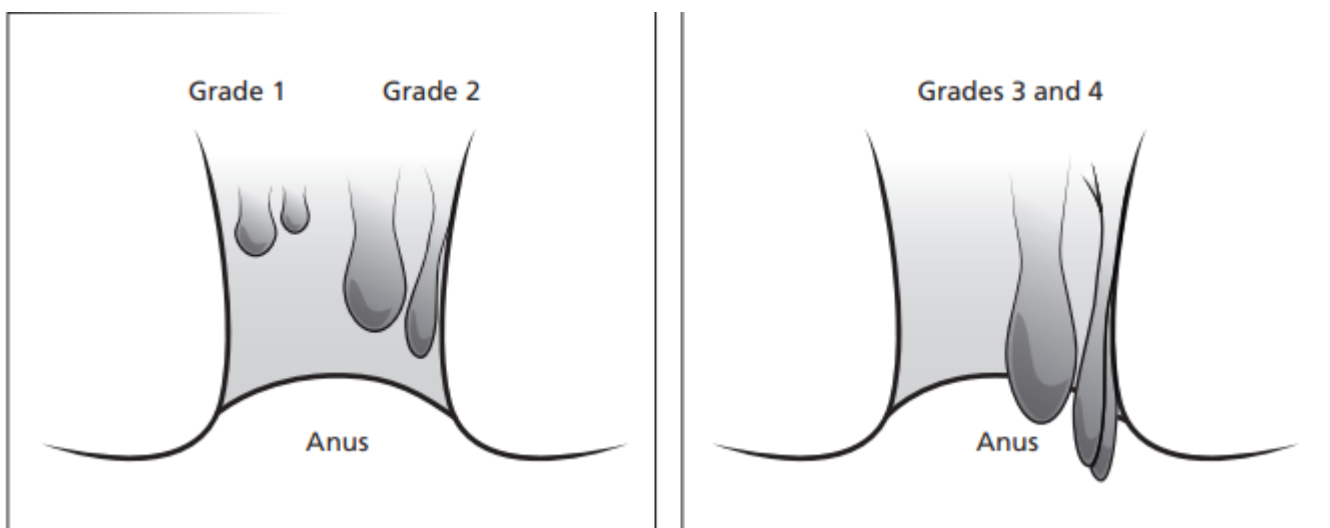
Most small internal piles are painless. Piles have a grading system:

Grade 1 Internal piles. They cannot be seen or felt from outside the back passage

Grade 2 usually larger. They may be pushed out from the back passage when you go to the toilet. They usually go back inside when straining stops

Grade 3 piles that hang outside the back passage. They can be pushed back inside with a finger

Grade 4 piles which permanently hang outside the back passage. They cannot be pushed back inside



Complications of piles

Grade 3 and 4 piles that hang outside the back passage can become thrombosed. This means that a blood clot has formed and becomes stuck within the pile. This is uncommon but can cause severe pain.

How are piles treated?

Piles can often be treated with the following to avoid constipation and straining. These steps can also help to stop piles coming back in the future:

- **Eating a diet rich in fibre:** such as fruit, vegetables, whole grains, beans, lentils, nuts and seeds
- **Fibre supplements:** if it is not possible to get enough fibre from diet then a fibre supplement may help to soften poo and make it easier to pass
- **Laxatives:** laxatives can help by making it easier to poo and reduce straining. It is important to choose the right type of laxative. Do not use laxatives for too long. They can make symptoms worse or cause other issues with long term use
- **Drinking plenty of fluid:** adults should drink 6 to 8 glasses or cups of fluid a day. All drinks count apart from alcohol which can be dehydrating. Most of the fluid is passed through your pee (urine). Some will be absorbed by gut (intestines) and make poo softer and easier to pass
- **Avoiding things that cause constipation:** some painkillers such as codeine phosphate are known to cause constipation. Some people may find that certain foods make them constipated
- **Improving toilet habits:** It is important to go to the toilet as soon as you have the urge. Holding it in may result in harder and larger poo which are more difficult to pass. Try to not strain on the toilet. Do not spend longer than needed on the toilet, for example, to read. This may encourage straining

Helping symptoms at home:

- **Baths and sitz baths:** Some people find that sitting in warm water helps reduce swelling and relieve itching and discomfort linked with piles. This is very soothing after bowel movements. As it is time consuming and costly to run a full bath a few times a day it may be better to buy a sitz bath. This is a shallow plastic basin that can fit over the toilet.
- **Ice packs:** A cold compress or ice pack may help reduce swelling and discomfort

Medications for piles:

- **Over the counter medicines:** there are a lot of over the counter medicines for piles such as creams, gels, ointments and suppositories. Some will help with pain by numbing the area. Some have ingredients which may also shrink the pile

- **Fibre supplements:** If you are not able to eat enough fibre in your diet you may take fibre supplements such as Psyllium husk and Ispagula husk to help prevent constipation. You can buy these over the counter or in health food stores
- **Laxatives:** You can buy many laxatives over the counter or in a supermarket. Laxatives help to keep the poo soft and avoid straining.
- **Steroid cream:** In rare cases you may be prescribed a steroid cream if there is a lot of swelling around the piles. Steroid may help to reduce swelling and improve symptoms. You must not use steroid creams for longer than 7 days
- **Painkillers:** painkillers such as paracetamol and ibuprofen may help with discomfort caused by piles. In rare cases you may be prescribed stronger painkillers. Please be aware that the side effects of many of these strong painkillers such as codeine is constipation. This could make symptoms worse or last longer.

Other treatments for piles

Banding treatment

Banding is a common treatment used mostly in grade 2 and 3 piles. A rubber band is put around the base of the pile. This cuts off the blood supply to the pile. It then dies and drops off after a few days. Banding is usually done in the endoscopy department or sometimes in an outpatient clinic.

Please read University Hospitals of Leicester leaflet 1477 “Banding of piles (haemorrhoids)” for more details about this procedure.

Surgical treatment:

Sometimes you may need to have an operation. We will do this in severe cases such as grade 4 piles or when we have tried all non surgical options and they are still causing symptoms. There are a few different surgical options. This includes the traditional haemorrhoidectomy where we cut the piles away.

If you need surgery you can be referred to a colorectal surgeon for review in outpatients clinic. During this appointment the surgeon will assess you. They will talk about different surgical options with you.

When to get medical advice:

If you are suffering from piles try the suggestions in this leaflet at home. Most cases can be managed at home or by the GP. They do not need hospital referral. You may need to get medical advice in the following cases:

Contact your own GP or call NHS 111 if:

- There is no improvement after 7 days of home treatment
- You keep getting piles
- You notice a new or unusual lump or skin changes around the back passage
- You have a change in your normal bowel habit for example diarrhoea or constipation

Urgently contact your GP or call NHS 111 if:

- Your temperature is high or you feel hot and shivery
- You feel generally unwell
- There is pus leaking from the piles
- You are in severe pain

Go to the emergency department or call 999 if:

- Bleeding from the piles that does not stop
- You are losing a lot of blood or see large blood clots
- You are bleeding and feel faint or dizzy

Contact details

If you are suffering from piles and have been seen in the surgical department and have a query or need further advice related to your appointment please contact:

Ward 16 Surgical Assessment Unit

0116 258 5332

0116 258 7513

Ward 16 Surgical Triage Unit

0116 258 8906

When you call it would be helpful if you can provide:

- The patient's full name and date of birth
- Hospital number (printed on discharge summary)

