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Having surgery for piles (haemorrhoids)

General Surgery

Information for Patients

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Introduction

This booklet aims to give you and your family information and advice about your operation. Please read it before you come into hospital and make note of any questions you would like to ask.

Your surgeon has recommended that you have a haemorrhoidectomy. You can usually go home the same day, if you meet the day surgery criteria.

What are piles (haemorrhoids)?

Piles or haemorrhoids are lumps inside and around your bottom (anus). These can bleed or hang down so you can feel them.

What is a haemorrhoidectomy?

There are 2 ways to treat haemorrhoids with surgery. The operation is called a haemorrhoidectomy. The piles are removed using

- heat energy (diathermy) or
- a tool (ligasure) that uses heat and pressure

What are the benefits?

Removing your piles should stop any bleeding and treat your symptoms of them falling outside your back passage. Other operations to treat them include

- a laser haemorrhoidoplasty
- a HALO (haemorrhoid artery ligation),
- THD (transanal haemorrhoid dearterialisation)

and these would have been discussed with you.

This operation has the lowest failure rate.

Are there any risks or complications from the operation?

- Constipation – this can be a problem after your operation. Taking a laxative as directed and drinking plenty of fluids will help stop this
- Not being able to pee. Patients who become constipated are at more risk of this
- Passing wind without being able to control it for a short time. There is a loss of control of the muscles around the back passage. This can lead to passing wind inadvertently. This is unusual.
- Long-term complications are uncommon but include continued continence problems, narrowing of the back passage, lasting pain, and recurrence of piles.
- A lot of bleeding in the first week or 10 days
- Infection – bathing after going to the toilet for a poo will reduce the risk

If you have any specific questions about the risks of the operation please ask the doctor.

Are there any other options to this operation?

Yes, you would have had a chance to talk about these with your surgeon in clinic

What happens before my operation?

You will have a pre-assessment appointment.

You will need to have a swab taken to test for MRSA.

What do I need to do before my operation?

You will have been seen in a pre-assessment clinic before you come in for your operation.

Please write down any questions about your surgery and ask the surgeon before your operation.

Depending on your general health and your age, you may have had some tests carried out. The results will have been examined before your surgery.

Bring in all the medication you are now taking.

The MRSA swabs taken in pre-assessment will be checked. If you had been found to be positive the pre-assessment team will have contacted you. You will have received treatment. You will be swabbed again before your operation.

If your surgeon thinks that your surgery is urgent this will go ahead as planned. All precautions will be taken to aid your safe recovery.

It is important that you bath or shower with the body wash you were given at pre-assessment. This helps to reduce the amount of skin bacteria (germs).

Once a date has been agreed you will be sent a letter confirming the date of your operation. This letter has fasting instructions that you **must** follow.

The following points should be noted before coming into hospital:

- Follow your fasting instructions.
- If you are having day surgery, organise a responsible adult (over 18) to take you home in a car or taxi.
- A responsible adult must stay with you for 24 hours after your operation.
- Take your medicine as advised by the surgeon or pre-assessment nurse.
- Read all the information leaflets you have been given.
- If you smoke, it is recommended that you stop 48 hours before your operation. The hospital is a ‘smoke free environment’. This means you cannot smoke in the hospital. You can only smoke at one of the designated smoking shelters on hospital grounds.
- Do not bring valuables into hospital. We cannot be held responsible for any loss or damage
- Please remove all jewellery. Any jewellery you cannot remove will be discussed at pre-assessment.
- Take a bath or shower using shower gel provided at your preassessment.
- You do not need to shave the area. It will be done, if needed, during your operation.
- Bring a contact number for the person who is taking you home.
- Only bring an overnight bag if you have been told at pre-assessment it is needed. Most patients will go home on the day of their operation.
- You must have a phone at home
- You must not drive, cycle, operate machinery, drink alcohol, or be alone for at least 24 hours after your operation.

Preparing for your operation

Arrival at the hospital

We look forward to seeing you. We want to make sure that your visit is comfortable and successful. To help us do this, please read the following important information:

- If you are ill, or cannot keep your appointment, please let us know as soon as possible. Another patient may benefit from the cancellation of your appointment.
- Please follow instructions you have been given about your medicines at pre-assessment.
- Most patients will go to Theatre Arrivals to wait for their operation. You may go to the surgical • day ward or an inpatient ward. It will say in your letter.
- The operating list can be a morning/afternoon list or an all-day list, depending on the surgeon. Please be prepared to wait, if you are waiting for longer than expected the nursing staff will tell you.

What will happen on the day of my operation?

You should come to the ward named in your letter. Your details will be checked and you will be directed into a waiting area, where the nurse will collect you

The nurse will talk to you about your operation and ask you a few questions.

You will meet one of the surgical team who will check you have signed a consent form. Please ask

your surgeon if there is anything you do not understand before you sign the form.

You will be visited by the anaesthetist. This is the doctor who will look after you when you are asleep during the operation

You will need to change into a theatre gown. The nurse will ask you do to this when you arrive.

You will then be directed to a same sex waiting area, or single sex bay to wait for your surgery.

What happens after the operation?

- After you have come round in the recovery area you will be taken to back to your ward, either the day ward, or inpatient ward depending on your surgery.
- The staff will make sure you are comfortable, and give you refreshments.
- If you have any discomfort or sickness, please let the staff know so that they can help you.
- If you are on the day ward, you will recover on the ward until your nurse is happy that you are well enough to go home.
- You will need to eat and drink before you can go home, and pass pee (urine) depending on the type of surgery.
- You will be given a card with contact details for any questions you may have for the first 24 hours after discharge. Any problems after this time you should contact your GP.

There are 4 things you must **not** do for 24 hours after your anaesthetic

1. Do not drive a car or operate machinery, including kettles, irons, etc.
2. Do not carry children in case you feel dizzy
3. Do not sign legal documents, as your judgement may be impaired
4. Do not drink alcohol

Wound care

You may have some bleeding after surgery. This is normal. You may need to wear a pad for a few days. You are likely to have some pain (especially when going to the toilet) for a few weeks. You may also bleed when you have you poo. This should stop quickly. If you have continuous bleeding you should contact your GP.

You may have a dressing in your back passage. This will fall out when you first poo.

The wounds will discharge some blood stained fluid over the days after your operation and continuing to wear a pad is usually needed. If you start to pass lots of bright red blood that covers your pad you should contact the hospital straight away.

You should have a bath or shower daily after you have had a poo.

After 24 hours you need to contact the nurse at your doctor’s surgery if you are concerned about your wound in any way, especially if:

- It becomes more, rather than less painful
- It begins to look red or swollen
- It feels hot
- It begins to smell

Tablets for pain

You will have a lot of pain after your operation. The amount will depend on your operation and how well you take painkillers.

We will give you pain killing tablets when you go home. Take them regularly as prescribed for the first few days.

If you run out of tablets you can take the empty box to your chemist. They will let you know which tablets to buy. Or you can arrange to see your own GP to get some more tablets.

Please read the following points:

- Take painkillers when the pain starts. Do not wait for it to get really bad
- Take painkillers before you go to sleep so you are able to rest
- If your pain is very bad take the painkillers regularly, that is, 4 times a day, so they keep your pain away
- Take painkillers when you wake up, so they are working before you get out of bed
- Painkillers can cause constipation, so you should drink plenty of water. Also eat some high fibre foods like as fruit, vegetables and cereals
- Everyone is different. Do not be surprised if you are still having some pain for 2 or 4 weeks, this is quite normal

Activities

Driving

You must not drive for 24 hours after a general anaesthetic. You will not be covered by your car insurance. You may not be able to drive comfortably for a few weeks. It depends on how quickly your wound heals.

Work

The length of time you need to be off work depends on what your job is. Please discuss this with the doctor doing your operation or the nurse. If you need a sick note, please ask the nurse before your operation.

Sex

You may return to your usual activities once you are comfortable. If you have any questions, please ask the pre-assessment nurse or the ward nurses.

Physical activity

Do not do too much too soon. It is usual to feel some aches and pains for a few days, perhaps up to 2 weeks. Avoid strenuous activity for about 2 weeks after your operation.

Holidays

Flying too soon after an operation can increase the chance of problems. You may not be covered by your insurance. Please discuss this with your insurance company.

Contact details

If you have a query and have been seen in the surgical department or need further advice about 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

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

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہِ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔

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If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email uhl-tr.equalitymailbox@nhs.net

We are a research hospital and you may be asked to take part in research