

Haemorrhoids



Get rid of your haemorrhoids the gentle way!

A patient's guide to types and treatments of
Haemorrhoids

The Lowdown on Haemorrhoids

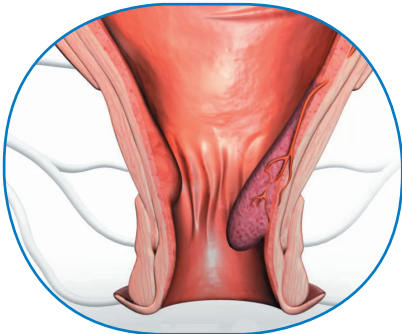
What are haemorrhoids?

Haemorrhoids, also known as piles, are natural cushions of tissue and veins located at the junction of rectum and anus. Along with the sphincter, this normal tissue is responsible for complete closure of the anus and prevents any leakage. During a bowel movement, these cushions become smaller to allow stool to pass through. Everyone has them, and problems only arise when they become larger than they should.

Are there different types?

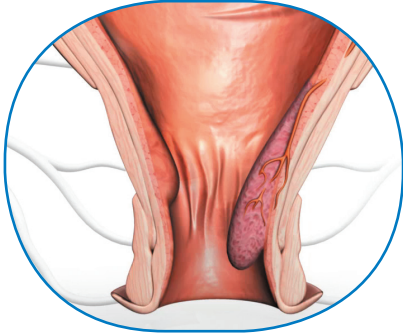
These anal cushions are normally held safely in place in the sphincter region by muscles and tissue. If too much pressure is exerted on them, the system of securing them may be damaged and the cushions will swell. When they protrude outside the anus, they are referred to as prolapsing haemorrhoids. The enlarged cushions are classified into four grades, depending on their size and severity:

Grade I:



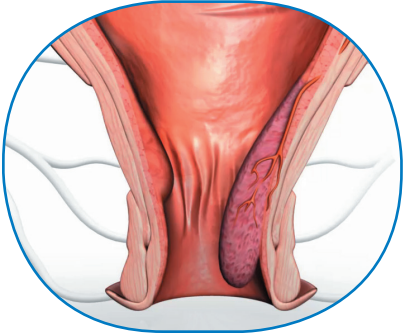
Slightly enlarged haemorrhoidal cushions.

Grade II:



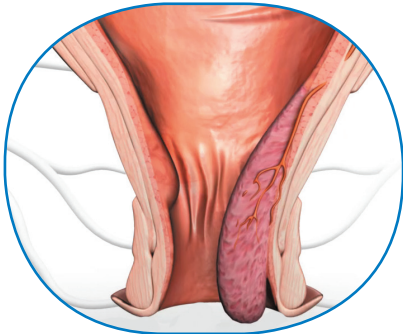
Enlarged cushions which protrude with pressing but retract again themselves.

Grade III:



Much larger haemorrhoidal cushions which require manual repositioning in the anal canal.

Grade IV:



Extremely large cushions with permanent protrusion.

Causes and Symptoms

Why do people get haemorrhoids?

Many factors may cause haemorrhoids to enlarge and the exact reason is not always obvious for every patient.

However, there is no doubt that:

- straining during bowel movements or very hard stool
- pregnancy
- weakening of the tissue in old age
- an unhealthy lifestyle (lack of exercise, bad eating habits, alcohol, etc.)

can all lead to haemorrhoidal disease.

What are the symptoms?

Haemorrhoids can often be quite painless and may even go virtually unnoticed by the person affected. Other sufferers may experience any or all of the following symptoms:

- **Bleeding** during bowel movements. Usually in the form of bright red blood on the toilet paper.
- **Swelling** protruding from the anus. In some cases, the haemorrhoids might feel like small lumps in the anus and project from the back passage only after straining on the toilet; in severe cases, the swellings will be constantly visible.
- Haemorrhoids can cause **skin irritation** and **intense itching**.
- In isolated instances haemorrhoids may cause **dull pain**.

Be Haemorrhoid-Free

What should I do?

With almost one in every two adults being affected by haemorrhoids at some stage of their life, there's no longer any need for sufferers to be embarrassed or fearful. The earlier you seek advice and a thorough diagnosis, the better the chances are that symptoms can be cured with minimal discomfort.

How are haemorrhoids treated?

As a general rule:

- Grade I haemorrhoids require medication only, but
- Grades II to IV are best treated with surgery.

Common methods of treating protruding haemorrhoids involve:

- tying them to cut off their blood supply (called ligation)
- removing them completely

The choice usually depends on their size. Depending on which method is used, the wounds are then left open to heal or stitched closed. In either case, their highly sensitive location means these wounds can be extremely painful for the patient. They may result in longer hospital stays, and as long as four weeks off work.

Because treatment and the consequences are often extremely uncomfortable, many patients up until now have preferred to live with the problem rather than see their doctor.

What's the alternative?

There is another option. Instead of painful operations, the Haemorrhoidal Artery Ligation and Recto Anal Repair Systems (HAL-RAR) from A.M.I. offer safe, fast and effective relief for all grades of haemorrhoids.

HAL-RAR – The Gentle Touch

HAL-RAR in brief

- No cutting, no removal of tissue and no open wounds
- Short procedure time
- Only one day in hospital*
- Quick return to work
- High success rates worldwide

Why choose HAL-RAR?

The concept of HAL (Haemorrhoidal Artery Ligation) was originally developed in 1995 by Dr. Morinaga in Japan. Since the year 2000, A.M.I. has been active in training surgeons worldwide with the HAL equipment. The method was enhanced towards the end of 2005 by the addition of RAR (Recto Anal Repair).

HAL is particularly effective for Grade II and III haemorrhoids, coupled with RAR for some Grade III and most Grade IV haemorrhoids. Together they form one of the most least invasive treatment methods practised.

* where no other complications (fistulas or fissures) are present

HAL-RAR takes as little as twenty minutes to complete and can be performed under various kinds of anaesthesia. Your doctor will recommend the most suitable one for you. Most patients experience only minor discomfort and can return to work within one or two days of receiving treatment. The risk of subsequent bleeding is far lower than with other methods, and any other complications that may arise post-surgery are both minor and quite rare.

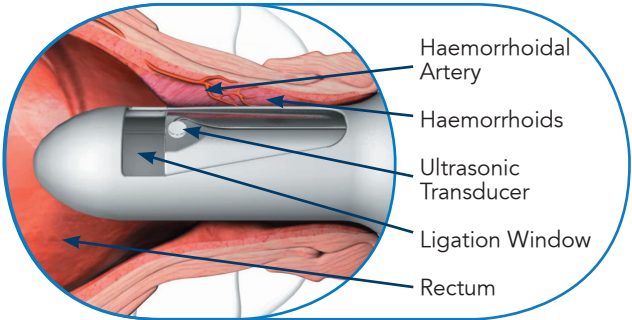
The procedure has now been carried out on over 250,000 patients worldwide with excellent results. Statistics show that the treatment of haemorrhoids with HAL-RAR is not only less painful and easier to recover from than other, more invasive methods; it is also just as effective.



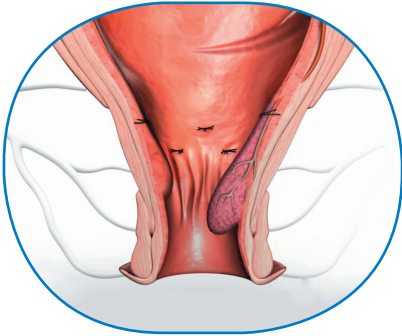
Haemorrhoidal Artery Ligation

How does HAL work?

A miniature Doppler ultrasound device is gently inserted into the anus.



An audible signal allows the surgeon to pinpoint the exact location of the arteries supplying blood to the haemorrhoids.

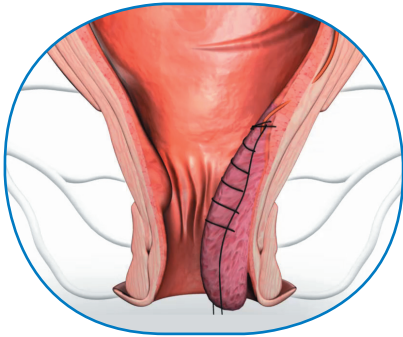


The surgeon then ties off each artery (called ligation) by placing a stitch around it and knotting the ends.

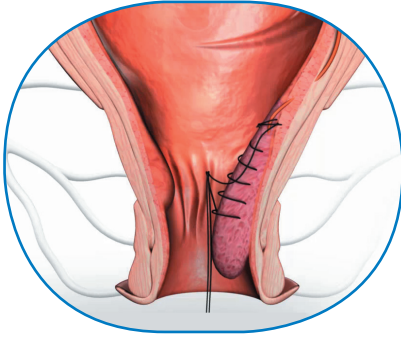
Because the stitch is placed not in the anus but in the lower rectum, where there are almost no pain nerves, the whole procedure is virtually painless.

With the blood supply to the haemorrhoids being obstructed, the pressure in them is reduced almost immediately and they start to shrink. In just a few weeks, they are no longer noticeable and the symptoms resolve.

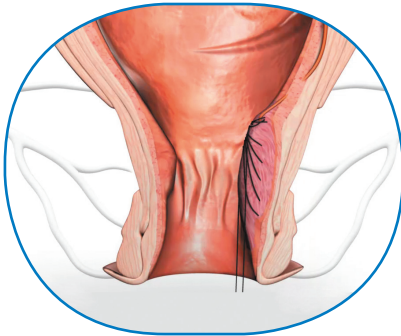
Where necessary (for example in the case of Grade III or IV haemorrhoids), RAR (Recto Anal Repair) can also be used to reposition the prolapsing haemorrhoids.



First, a running stitch is made from the top to the bottom. The device is so designed that only the prolapsing tissue is caught by the needle.



The ends of the thread are pulled together and knotted at the top. This has the effect of lifting up the haemorrhoids that are hanging down.



With this "lifting", the haemorrhoids are back where they belong. The tissue scars over and integrates "seamlessly" back into the anal tissue.

Potential risks

What are the potential risks?

It is mandatory to speak in detail with your physician about all potential risks and benefits of the procedure!

For your specific procedure, your physician can explain in detail the associated risks and warnings. Generally, there are risks when undergoing any kind of surgery. In worst cases, such complications can be life threatening. Anaesthesia may be problematic for each patient, especially when serious underlying medical conditions are already present.

This listing is not complete and may vary from the surgical approach and the individual patient situation.

Important note:

This patient guide includes general information about haemorrhoids and the corresponding treatments. However, it is by no means a substitute for a consultation and thorough examination by your doctor. Only your doctor can evaluate your personal situation and recommend the treatment and aftercare best suited to your needs, as well as inform you of possible risks.

A.M.I. GmbH:

A.M.I. is an Austrian-based manufacturer of innovative medical technology. Our product range includes effective, patient-friendly solutions for various afflictions such as haemorrhoids, incontinence and obesity, all of which can severely affect quality of life. All our products are manufactured according to the highest quality standards, and enable doctors to take even better care of their patients.

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