Hemorrhoidectomy
Pre-op and Procedure

Hemorrhoidectomy is surgery to remove hemorrhoids. Hemorrhoids are veins that have become swollen in the rectum. The rectum is the area from the bottom end of the intestines to the opening where bowel movements leave the body. Hemorrhoids can be uncomfortable. They can cause itching, bleeding and pain if a blood clot forms in them (*thrombose*). If hemorrhoids are small, surgery may not be needed. But if they cover a larger area, surgery is usually suggested.

BEFORE THE PROCEDURE

- Stop using aspirin and non-steroidal anti-inflammatory drugs (NSAIDs) for pain relief. This includes prescription drugs and over-the-counter drugs such as ibuprofen and naproxen. Also stop taking vitamin E. If possible, do this two weeks before your surgery.
- If you take blood-thinners, ask your healthcare provider when you should stop taking them.
- You will probably have blood and urine tests done several days before your surgery.
- Do not eat or drink for about 8 hours before the surgery.
- Arrive at least an hour before the surgery, or whenever your surgeon recommends. This will give you time to check in and fill out any needed paperwork.
- Hemorrhoidectomy is often an outpatient procedure. This means you will be able to go home the same day. Sometimes, though, people stay overnight in the hospital after the procedure. Ask your surgeon what to expect. Either way, make arrangements in advance for someone to drive you home.

LET YOUR CAREGIVER KNOW ABOUT:

- Any allergies.
- All medications you are taking, including:
  - Herbs, eyedrops, over-the-counter medications and creams.
  - Blood thinners (*anticoagulants*), aspirin or other drugs that could affect blood clotting.
- Use of steroids (by mouth or as creams).
- Previous problems with anesthetics, including local anesthetics.
- Possibility of pregnancy, if this applies.
- Any history of blood clots.
- Any history of bleeding or other blood problems.
- Previous surgery.
- Smoking history.
- Other health problems.

THE SURGERY

- The preparation:
  - You will change into a hospital gown.
  - You will be given an IV. A needle will be inserted in your arm. Medication can flow directly into your body through this needle.
  - You might be given an enema to clear your rectum.
  - Once in the operating room, you will probably lie on your side or be repositioned later to lying on your stomach.
  - You will be given *anesthesia* (medication) so you will not feel anything during the surgery. The surgery often is done with *local anesthesia* (the area near the hemorrhoids will be numb and you will be drowsy but awake). Sometimes, *general anesthesia* is used (you will be asleep during the procedure).
- The procedure:
  - There are a few different procedures for hemorrhoids. Be sure to ask you surgeon about the procedure,

the risks and benefits.
- Be sure to ask about what you need to do to take care of the wound, if there is one.

POSSIBLE COMPLICATIONS

All surgery carries some risk. However, hemorrhoid surgery usually goes smoothly. Possible complications could include:

- Urinary retention.
- Bleeding.
- Infection.
- A painful incision.
- A reaction to the anesthesia (this is not common).

AFTER SURGERY

- You will stay in a recovery area until the anesthesia has worn off. Your blood pressure and pulse will be checked every so often.
- You may feel a lot of pain in the area of the rectum.
  - Take all pain medication prescribed by your surgeon. Ask before taking any over-the-counter pain medicines.
  - Sometimes sitting in a warm bath can help relieve your pain.
- To make sure you have bowel movements without straining:
  - You will probably need to take stool softeners (usually a pill) for a few days.
  - You should drink 8 to 10 glasses of water each day.
- Your activity will be restricted for awhile. Ask your healthcare provider for a list of what you should and should not do while you recover.

PROGNOSIS

You will probably start feeling normal again after a week or two. In severe cases, it might take longer. But the pain will gradually go away. However, it is possible to develop new hemorrhoids. Ask your healthcare provider what you should do to prevent this.

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