

CONSENT FOR HEMORRHOID SURGERY

Please watch the Hemorrhoid Treatment Options video & write the code at the end of this video. Please scan QR code.



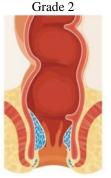
HEMORRHOID PROCEDURE

Hemorrhoids are swollen and inflamed blood vessels in the rectum and anus underneath the skin, from pregnancy, straining at stool, constipation, prolonged sitting, or heavy lifting. Hemorrhoids can be internal (inside the rectum) or external or both. External hemorrhoids are usually caused by internal hemorrhoids. These may cause prolapse, bleeding, swelling, pain, and itching. Hemorrhoids are graded in severity from 1-4:

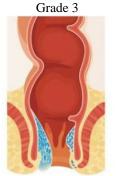




These tend to mostly bleed.



The swelling comes out and goes in by itself.



This usually goes in after you push it back in.



These remain outside even if you push it back in.

Treatment Options

Hemorrhoid treatment options vary depending on the severity of the condition and can range from non-surgical to surgical procedures.

- <u>Non-Surgical</u>:
 - Medical Management:
 - Increase fiber with fluids to ease stool passage.
 - Medications: Suppositories, creams, ointments, Diosmin tablets. These are available over the counter or by prescription.
 - Lifestyle changes: Avoid prolonged sitting, heavy lifting, straining, and cycling.
 - Rubber Band Ligation (RBL):
 - Rubber band placed at the base of hemorrhoid to cut off blood supply.
 - Requires multiple sessions, with a low risk of complications but high recurrence (approximately ~60% of hemorrhoids come back).
- <u>Surgical:</u>

• Hemorrhoidectomy:

- Incomplete removal of hemorrhoid tissue (generally the largest first) by cutting out the tissue with electricity or scalpel and closure with absorbable sutures.
- Recovery usually takes 2-8 weeks.
- Laser Hemorrhoidoplasty:
 - Minimally invasive; uses laser energy to treat hemorrhoids.
 - Generally a shorter recovery time (a few days to about a month or so) with milder postoperative pain/swelling than hemorrhoidectomy.
 - Lower recurrence rate.
 - Not covered by provincial insurance (LHP 1 [\$1600] LHP 6 [\$7000] depending on the severity of disease).



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• Mucopexy/Transanal Hemorrhoidal Dearterialization (THD):

• Minimally invasive; hemorrhoids are lifted higher up in the rectum, towards your head, using absorbable sutures that cut off the blood supply and keep them in place.

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- Effective for prolapse with quicker recovery and minimal pain.
- Recurrence is high when used alone.
- Rectal Mucosal Excision:
 - Removes part of rectal mucosa to reduce prolapse.
 - Often paired with mucopexy; recovery takes 2-8 weeks

Recovery and Complications:

- Common:
 - Pain (short term)
 - Pressure
 - Swelling (both inside & outside which can cause skin tags)
 - Superficial Infection
 - Rare Complications:
 - Chronic pain
 - Deep Infections (Fistula, abscess)
 - Incontinence/Losing control
 - Scarring/Stenosis
- Minimizing Risk:
 - Follow lifestyle changes (high-fiber diet, hydration).
 - Attend follow-ups for tailored care.

Alternatives to Treatment:

- Lifestyle changes: High-fiber diet, more fluids, avoid sitting or heavy lifting.
- Non-surgical: Sclerotherapy or cryotherapy for smaller hemorrhoids.
- Surgical:
 - Hemorrhoidectomy in the hospital (effective but longer recovery and higher complications).
 - o Stapled hemorrhoidectomy (less pain, quicker recovery, potential recurrence).

Special Considerations

Pregnancy: Hemorrhoid surgery not recommended due to risks to the fetus (e.g., malformation or death).

PATIENT CONSENT

I understand the following:

- 1. The nature, purpose and reasonable benefits I obtain by having these procedure(s) and prevention of problems, but understand each has its limitations.
- 2. The probable potential side effects, complications and likelihood of having them, including risk to a fetus.
- 3. The advantages, disadvantages of alternative procedures.
- 4. It is impossible to identify every possible complication, but these are the commonest and the most serious ones that do occur.
- 5. I am responsible to inform the health practitioner(s) prior to my procedure of any dental issues as well as any other health issues that may need further assessment and care including but not limited to heart/liver/kidney disease, use of anticoagulants, pacemaker, and previous and current treatments.
- 6. Such extended, additional or alternative procedure which may be found to be immediately necessary in the professional judgement of the physicians present during the performance of this procedure.
- 7. The administration of anesthetic, if required, and to refrain from working, driving a motor vehicle or being on your own until next day.

I acknowledge that I have read and fully understand the above.

I agree to undergo the following procedures under the direction of the assigned physician and any assistance of other health care professionals including nurses and other physicians as necessary:

- □ Hemorrhoidectomy
- Mucopexy

- □ Rectal Mucosal Excision
- □ Laser Hemorrhoidoplasty

- PressureLeakage
- o Recurrence of hemorrhoids over time

Bleeding (with bowel movements)

- Heavy bleeding even without bowel movement
- o Blood clots

Itching

• Delayed wound healing