# HAEMORRHOIDS – A COMMON DISEASE

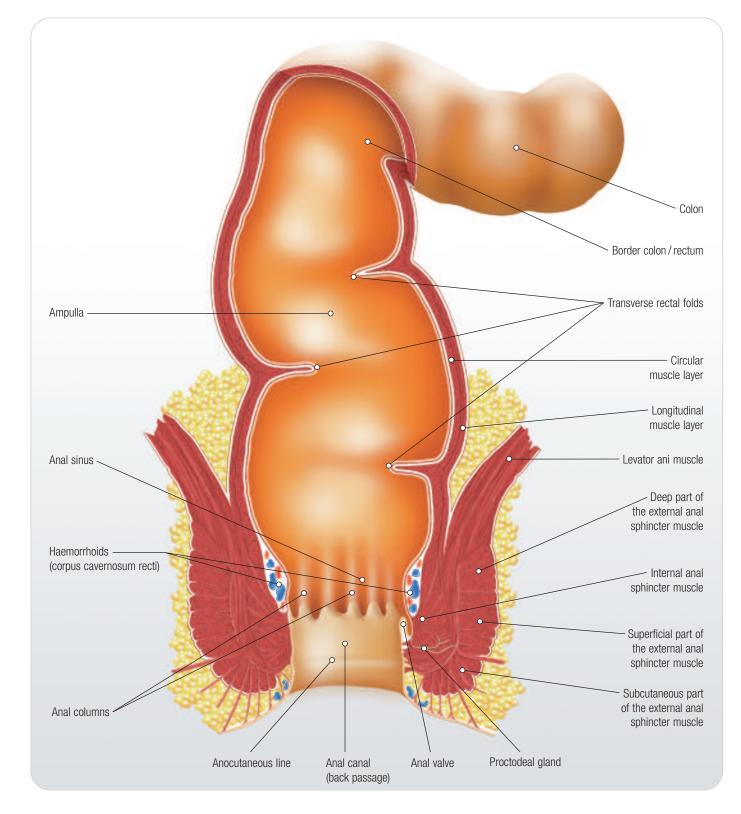
<u>kreus</u>sler

PHARMA

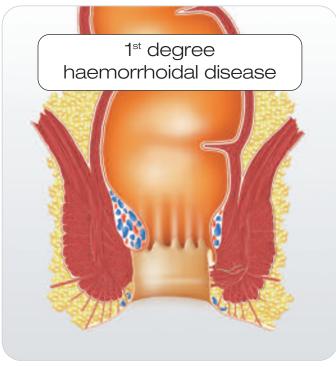
### WHAT ARE HAEMORRHOIDS?

Where the rectum joins the anal canal (back passage), there are cushions of blood vessels that form a ring under the lining (mucosa) of the bowel. Everybody has these cushions and they have an important task – they are responsible for keeping the end of the bowel properly closed. We talk about haemorrhoids as a disease (haemorrhoidal disease, piles) if these blood vessel cushions become enlarged and thus cause symptoms.

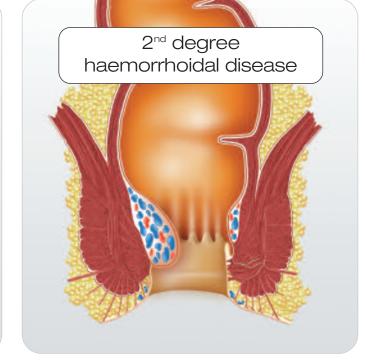
#### ANATOMY OF THE RECTUM



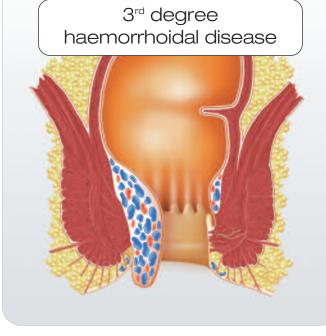
### FOUR DEGREES OF THE CONDITION CAN BE DISTINGUISHED, DEPENDING ON SEVERITY:



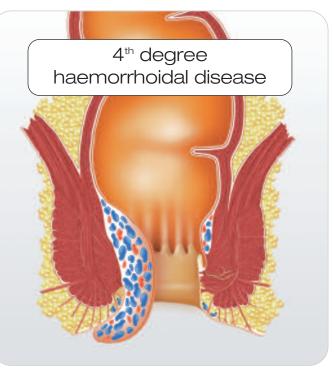
The haemorrhoids are slightly enlarged and bulge into the bowel, but they are not visible outside. They can only be diagnosed by using an instrument (proctoscope).



If the haemorrhoids become larger, they get pushed down out of the anus (= prolapse) when passing stool. The prolapsed haemorrhoids go back inside the anus by themselves afterwards.



At this stage, the haemorrhoids no longer go back inside after passing stool: they have to be pushed back by a finger. Also, heavy physical effort and a long walk may make them prolapse.



It is no longer possible to push the haemorrhoids back with a finger. The haemorrhoids remain outside the anus. Specialists call this fixed anal prolapse.

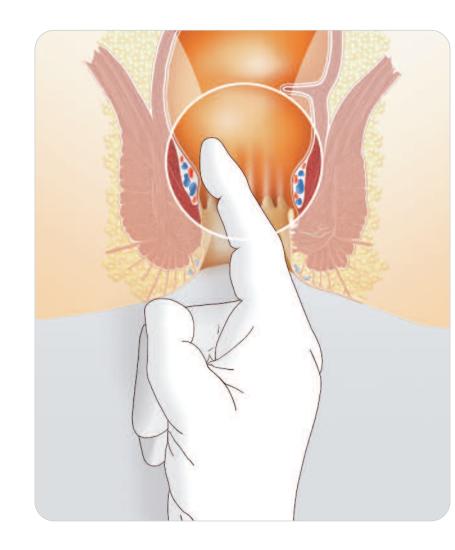
#### WHAT ARE THE SYMPTOMS OF HAEMORRHOIDAL DISEASE?

- Bright red bleeding (drops of blood in the toilet bowl, coating of blood on the stools or on the toilet paper)
- Itching, burning, stabbing pains, wetness
- Inflamed skin around the anus (eczema)
- Foreign body sensation, feeling of incomplete emptying of the bowels

- Protrusion of the haemorrhoids from the anus (prolapse)

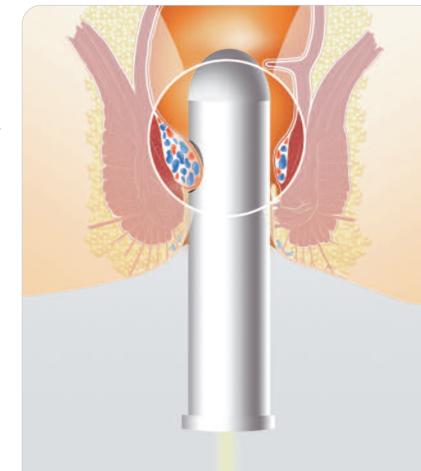
- Uncontrolled leakage of stool (faecal incontinence) in severe cases

# HOW DOES THE DOCTOR DIAGNOSE HAEMORRHOIDAL DISEASE?



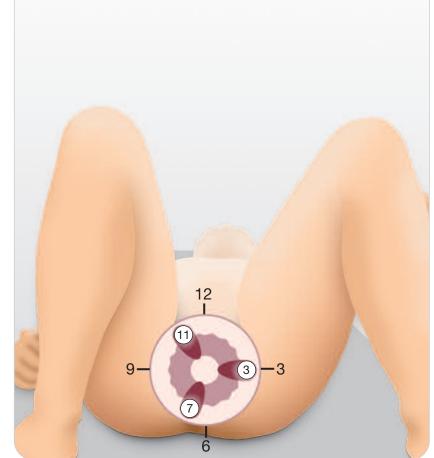
RECTAL EXAMINATION (PALPATION) WITH THE FINGER:

The doctor will insert a finger to palpate the rectum. In that way the doctor can feel any knobbly changes or any narrowing and can check the tone of the muscles that close the anus. It is not usually possible to actually feel haemorrhoids, so it might then be necessary to look inside the back passage with an instrument.



PROCTOSCOPY / RECTOSCOPY: The examination of the anal canal and rectum is performed with special instruments (proctoscope or rectoscope). These are narrow, stiff tubes of different lengths that are carefully inserted into the anal canal or rectum. The doctor can then examine the

inside of the last part of the intestine for any abnormalities and check whether you have haemorrhoids.



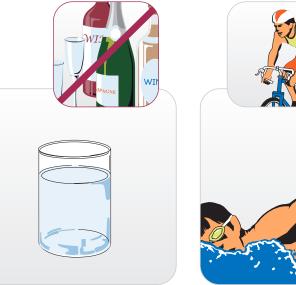
SITE:

Haemorrhoids are typically found at the 3 o'clock, 7 o'clock and 11 o'clock positions when the patient is in the lithotomy position on the examination table.

### WHAT CAN YOU DO AGAINST HAEMORRHOIDAL DISEASE?







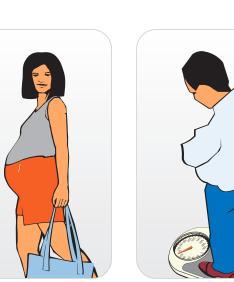
Eat a balanced diet with plenty of roughage, avoid strongly spiced food

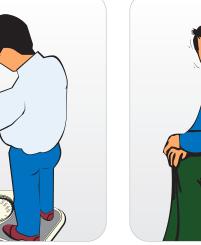
Drink enough fluids (at least 2 litres a day); alcohol and coffee in moderation

Regular physical exercise; pelvic floor exercises



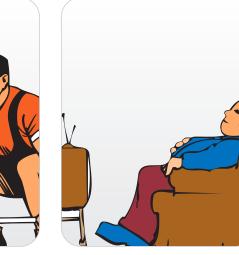
In the early stages of disease: use of suppositories, creams, anal tampons and warm sitz baths (symptomatic treatment)











Strong pushing when passing stool, constipation

Haemorrhoids are caused or exacerbated by congenital weakness of connective tissue and various risk factors such as:

The wrong toilet habits (e.g. reading on the toilet)

Lifting heavy loads

Lack of physical exercise

- Congenital weakness of connective tissue

Overweight

Reduced function and relaxation of connective tissue in the haemorrhoid,



**RISK FACTORS:** 

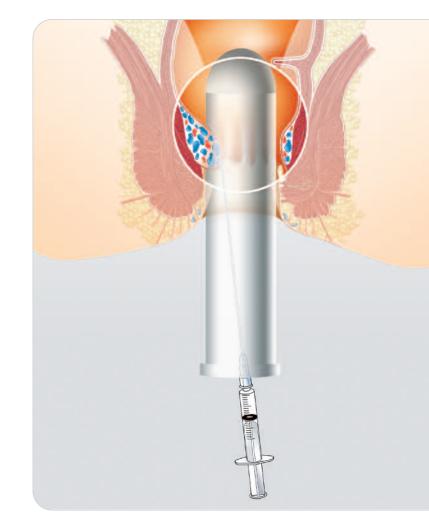
– Risk factors

Pregnancy



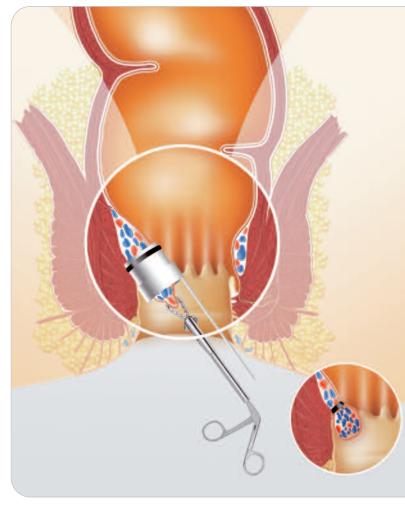
## TREATMENT OF HAEMORRHOIDAL DISEASE

Commonly used methods of treatment for 1<sup>st</sup> and 2<sup>nd</sup> (3<sup>rd</sup>) degree haemorrhoidal disease:



#### SCLEROTHERAPY (OBLITERATION):

Sclerotherapy is a highly effective method that can be performed on an outpatient basis. Through the opening of a proctoscope the doctor injects a liquid "sclerosing" agent directly into the (submucosal) haemorrhoids or into the region around the supply vessels. This has the desired effect of causing a reaction in the tissues, the haemorrhoids shrink and become fixed to the underlying tissue. Treatment is easy and painless when performed expertly. That is because the human body has no pain nerves in the area where the injection is given and so you cannot feel anything.



BANDING (RUBBER BAND LIGATION): Banding involves grasping the haemorrhoids with special forceps or a suction instrument and then binding them round with an elastic band. This shuts off the blood supply to the haemorrhoids and the sealed-off tissue dies. The dead tissue drops off after about four to ten days and is passed out with the stools.



**OPERATION:** 

If you go to the doctor early enough, in most cases you can avoid an operation. In very advanced stages, however, the haemorrhoids have to be removed under anaesthetic by an operation.

#### Extract translated from the German SPC

Chemische Fabrik Kreussler & Co. G
Rheingaustraße 87–93
65203 Wiesbaden
Germany
Phone: +49 611/9271-0
Fax: +49 611/9271-111

Aethoxysklerol 3 % Active substance: lauromacrogol 400 (polidocanol)

Qualitative and quantitative composition Aethoxysklerol is a sclerosant based on lauromacrogol 400 and contains the following amounts of active substance: 2 ml Aethoxysklerol 3 % contain 60 mg lauromacrogol 400 (polidocanol). Excipients

Ethanol 96%, potassium dihydrogen phosphate,

injections Indications For the treatment of first and second degree haemorrhoidal disease. Contraindications Sclerotherapy of haemorrhoidal disease Sclerotherapy of haemorrhoidal disease is absolutely contraindicated in patients with:

untreated)

disodium phosphate dihydrate (Ph. Eur.), water for

Adverse drug reactions - known allergy to lauromacrogol 400 or any of the Sclerotherapy of haemorrhoidal disease other ingredients of Aethoxysklerol When treating haemorrhoidal disease, local adverse - acute severe systemic disease (especially if reactions such as burning, pain, discomfort, and pressure sensation were observed during and after - acute inflammations in the anal region. injection, especially in the 11 o'clock position in men Depending on severity, sclerotherapy of haemorrhoidal (prostate region). These reactions are of a temporary

febrile states

very poor general health

known hypercoagulability.

allergies

disease

disease may be relatively contraindicated in patients nature and may last 2-3 days in rare cases. Sclerotherapy of haemorrhoids is painless if the proper technique is used since there are no sensitive nerve fibres in the region of injection. - bronchial asthma or known strong predisposition to In addition, the following adverse reactions were observed with the frequencies seen below (information - chronic inflammatory bowel disease (e.g. Crohn's given according to MedDRA (Medical Dictionary for Regulatory Activities)): *Very common* ( $\geq$  10 %); *common* ( $\geq$  1 % – < 10 %); uncommon ( $\geq 0.1 \% - <1\%$ ); rare ( $\geq 0.01 \% - <0.1\%$ );

very rare, including isolated cases (< 0.01 %). Immune system disorders Very rare: anaphylactic shock, angioedema, urticaria (generalised), asthma (asthmatic attack) Nervous system disorders Very rare: loss of consciousness, confusional state dizziness

Cardiac disorders Very rare: palpitations Vascular disorders Very rare: syncope vasovagal, circulatory collapse **Gastrointestinal disorders** Uncommon: proctitis, anal pruritus Very rare: nausea Skin and subcutaneous tissue disorders

Uncommon: dermatitis allergic, urticaria contact, skin reaction Reproductive system and breast disorders Very rare: erectile dysfunction General disorders and administration site conditions Common: burning sensation mucosal, injection site pain, discomfort, sensation of pressure Uncommon: induration

Rare: necrosis (local, rarely with extension into the surrounding tissue), injection site haemorrhage, injection site thrombosis (intrahaemorrhoidal) Very rare: pyrexia Investigations Very rare: blood pressure abnormal

Special warnings and precautions for use All Aethoxysklerol products contain 5 % (v/v) alcohol. This must be taken into account in patients with previous alcoholism. Aethoxysklerol products contain potassium, but less than 1 mmol (39 mg) potassium per ampoule. Aethoxysklerol products contain sodium, but less than 1 mmol (23 mg) sodium per ampoule.

Aethoxysklerol in pregnant women. Studies in animals showed reproductive toxicity, but no teratogenic potential. Therefore, Aethoxysklerol must not be used during pregnancy unless clearly necessary. Breast-feeding Sclerotherapy of haemorrhoidal disease Investigations on the possible excretion of lauro-When treating haemorrhoidal disease, care must be macrogol 400 in the breast milk have not been per-

taken not to damage the internal anal sphincter muscle in order to avoid incontinence problems. When treating an 11 o'clock haemorrhoid in men, the quantity injected must not exceed 0.5 ml Aethoxysklerol 3 % because of the proximity to other structures (urethra and prostate).

Pregnancy and breast-feeding

There are no adequate data from the use of

Pregnancy

during breast-feeding, it is advisable to suspend breast-feeding for 2-3 days. **Classification for supply** Medicinal product subject to medical prescription.

July 2009

formed in humans. If sclerotherapy is necessary

Date of revision of the text

#### Dosage and method of administration

The injection must be strictly submucous and given directly into the haemorrhoid or above (cranial to) it into the surrounding tissue of the feeding vessels.

During one treatment session, a total of 3 ml Aethoxysklerol 3 % should not be exceeded. Depending on the findings, a maximum of 1.0 ml per haemorrhoid is administered as a strictly submucous injection. When treating an 11 o'clock haemorrhoid in men, the quantity injected must not exceed 0.5 ml. Depending on the degree of haemorrhoidal disease, several repeat treatments may be required.

Aethoxysklerol 3 % is available as solution for injection in packs of 5 ampoules of 2 ml each.



Chemische Fabrik Kreussler & Co. GmbH. Rheingaustraße 87-93, 65203 Wiesbaden, Germany, www.kreussler.com

Dr. Petra Gliem in cooperation with ART NOUVEAU Werbeagentur GmbH, Sonnenberger Straße 52, 65193 Wiesbaden, Germany www.artnouveauwerbeagentur.de