CHRONIC PILES OR HEMORRHOIDS 101

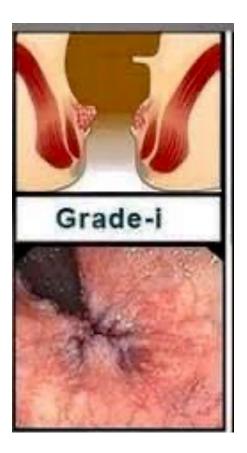
Piles are swollen veins in the lower anus and rectum. This swelling can cause localized inflammation of other tissues. Piles is another term for hemorrhoids. Piles are the result of swollen veins in the lower anus and rectum. They can cause tissue growths in and around the anus and can lead to significant discomfort. These growths can vary in size and location.

Internal Piles versus External Piles

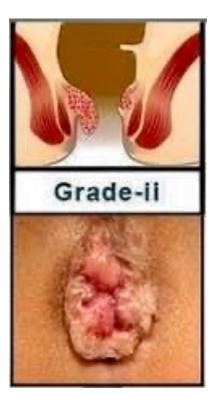
Internal piles occur within the rectum and are usually not visible during an external examination. However, in some cases, an external pile may grow to protrude outside of the anus. The medical term for this is prolapsed hemorrhoid.

Medical professionals grade internal piles on a four-point scale.

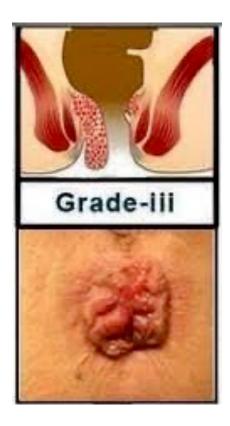
• **Grade I:** The growth does not cause symptoms and does not protrude out of the anus.



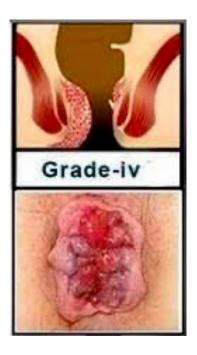
• **Grade II:** The piles may prolapse from the anus but return inside independently.

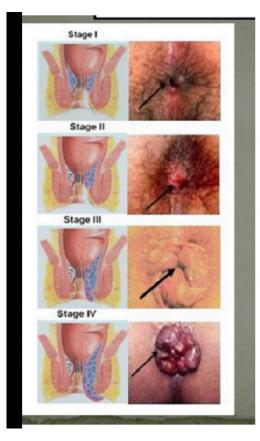


• **Grade III:** The piles prolapse and only recede within the anus with manual intervention.



• **Grade IV:** The piles prolapse outside of the anus and a person cannot push them back in.





The internal haemorrhoid protrudes out of the canal but doesn't prolapse completely. There is a chance of bleeding.

The haemorrhoid bulges out of the anal canal while straining during stool or even flatus comes out, but spontaneously returns back inside to their original position once the straining has subsided.

The haemorrhoid may protrude out from the anal canal without any straining and requires you to push them inside manually.

The internal haemorrhoid always stays protruded or prolapsed.



The effect of a drug is usually determined by the amount taken. When taken in small quantities, the drug acts as a stimulant. If taken in huge quantities, then the drug acts as a sedative. Taking the drug in excessive quantities is disastrous and kills. This Booklet is going to give you an insight on the World's Most Lethal Drugs, some of which are used in High Profile Assassinations such as Met-amphetamine, Arsenic Poisoning, Cyanide Poisoning, Polonium 210, Cocaine, Nicotine and VX Agent, Whenever you want to indulge yourself into using any drug, always endeavor to know the facts of the drug in full detail. Once you become a High Profile Personality either by the Nature of your Job or through Affiliations, one of the dangers that you will face in your life is the Risk of Food Poisoning or Being Poisoned with Lethal Drugs that are aimed at leaving you dead without being easily detected. To avert this, most High Profile Personalities have resorted to only eating at places that they trust for instance at home. Sometimes, while at home, the High Profile Personality always eats food from the same bowl as the Spouse or Chef. If not, a Food Tester is procured to test the food for poisoning in advance. This is because; there have been instances where Celebrity Spouses / Chefs have been paid to poison them at home.

A split second decision can make a difference between life and death. So always be on the lookout as sometimes, you may be lax in your alertness and that is the only time that your enemy needs to do whatever that it is that they wanted to do.

External piles form small lumps on the outside edge of the anus. They are very itchy and can become painful if a blood clot develops because the clot can block blood flow. Thrombosed external piles, or hemorrhoids that have clotted, require immediate medical treatment.

Symptoms of Piles / Haemorrhoids

In most cases, the symptoms of piles are not serious. They normally resolve on their own after a few days. However, many people with piles may not experience any symptoms.

An individual with piles may experience the following symptoms:

- A hard, possibly painful lump may be felt around the anus. It may contain coagulated blood. Piles that contain blood are called thrombosed external haemorrhoids.
- After passing a stool, a person with piles may experience the feeling that the bowels are still full.
- Bright red blood is visible after a bowel movement.
- The area around the anus is itchy, red, and sore.
- Pain occurs during or after the passing of a stool. Piles can escalate into a more severe condition.
- Bloody stools

Serious symptoms can include:

- Excessive anal bleeding, also possibly leading to anemia
- Infection
- Fecal incontinence, or an inability to control bowel movements
- Anal fistula, in which a new channel is created between the surface of the skin near the anus and the inside of the anus
- A strangulated haemorrhoid, in which the blood supply to the haemorrhoid is cut off, causing complications including infection or a blood clot.

Signs & Symptoms Depending on Hemorrhoid Type.

Signs and symptoms of hemorrhoids usually depend on the type of hemorrhoid.

External hemorrhoids

These are under the skin around your anus. Signs and symptoms might include:

- Itching or irritation in your anal region
- · Pain or discomfort
- Swelling around your anus
- Bleeding

Internal hemorrhoids

Internal hemorrhoids lie inside the rectum. You usually can't see or feel them, and they rarely cause discomfort. But straining or irritation when passing stool can cause:

- Painless bleeding during bowel movements. You might notice small amounts of bright red blood on your toilet tissue or in the toilet.
- A hemorrhoid to push through the anal opening (prolapsed or protruding hemorrhoid), resulting in pain and irritation.

Thrombosed hemorrhoids

If blood pools in an external hemorrhoid and forms a clot (thrombus), it can result in:

- Severe pain
- Swelling
- Inflammation
- A hard lump near your anus

CAUSES

Piles result from increased pressure in the lower rectum. The blood vessels around the anus and the rectum will stretch under pressure and may swell or bulge, forming piles. Hemorrhoids can develop from increased pressure in the lower rectum due to:

- Straining during bowel movements / when passing stool.
- Sitting for long periods of time on the toilet.
- Having chronic diarrhea or constipation.
- Being obese.
- Being pregnant.
- Having anal intercourse.
- Eating a low-fiber diet.
- Regular heavy lifting / lifting heavy weights.

Risk Factors

Certain factors may increase a person's risk of developing piles, including:

• **Pregnancy:** Up to 50% of people experience hemorrhoids during pregnancy. This is due to increased pressure on the pelvis, a person having a higher blood volume, and a higher incidence of constipation. When you're pregnant, because the baby's weight puts pressure on the anal region.

- Age: Piles are more common in older adults. Around half of people over the age of 50 develop piles. As you age, your risk of hemorrhoids increases. That's because the tissues that support the veins in your rectum and anus can weaken and stretch.
- Weight: Research suggests that being overweight may increase a person's chance of developing piles.
- **Diet:** Eating a diet low in fiber may increase the likelihood of a person having piles.

Complications

Complications of hemorrhoids are rare but include:

- Anemia: Rarely, chronic blood loss from hemorrhoids may cause anemia, in which you don't have enough healthy red blood cells to carry oxygen to your cells.
- Strangulated Hemorrhoid: If the blood supply to an internal hemorrhoid is cut off, the hemorrhoid may be "strangulated," which can cause extreme pain.
- Blood Clot: Occasionally, a clot can form in a hemorrhoid (thrombosed hemorrhoid). Although not dangerous, it can be extremely painful and sometimes needs to be lanced and drained.

When to contact or see a doctor

- A person should seek medical assistance if their piles persist for more than one
 week of home treatment or if they experience consistent bleeding from their
 rectum. If you have bleeding during bowel movements or you have
 hemorrhoids that don't improve after a week of home care, talk to your doctor.
- Don't assume rectal bleeding is due to hemorrhoids, especially if you have changes in bowel habits or if your stools change in color or consistency. Rectal bleeding can occur with other diseases, including colorectal cancer and anal cancer.
- Seek emergency care if you have large amounts of rectal bleeding, lightheadedness, dizziness or faintness.

Diagnosis

A doctor can usually diagnose piles after carrying out a physical examination. The doctor will examine the anus of the person with suspected piles and may ask the following questions:

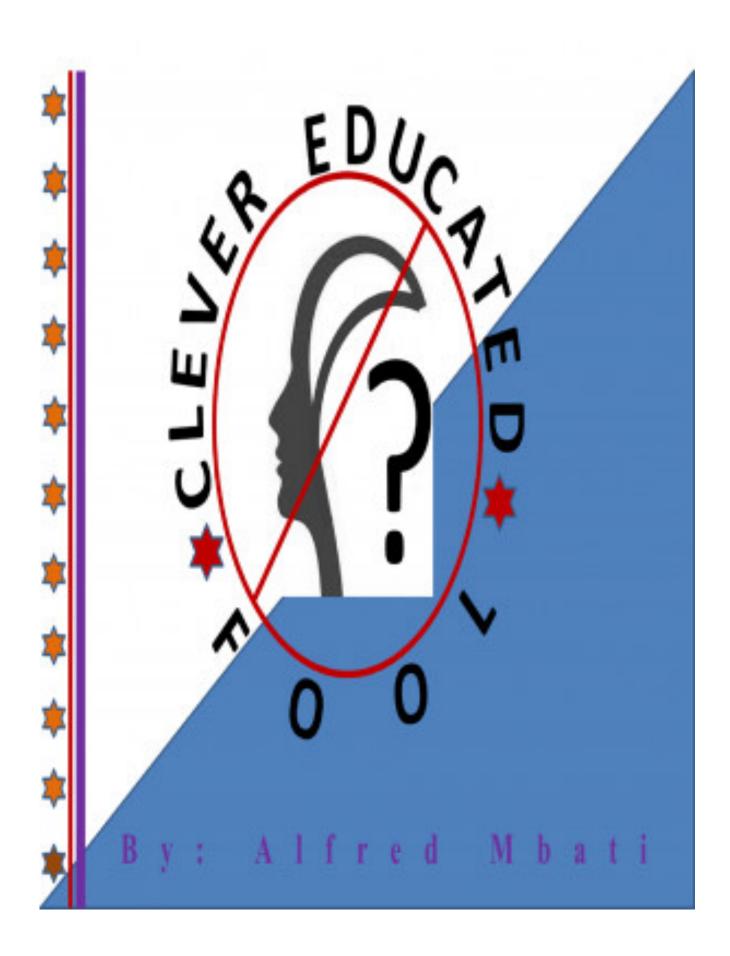
- Do any close relatives have piles?
- Has there been any blood or mucus in the stools?
- Has there been any recent weight loss?
- Have bowel movements changed recently?
- What color are the stools?

For internal piles, the doctor may perform a Digital Rectal Examination (DRE) or use a proctoscope. A proctoscope is a hollow tube fitted with a light. It allows the doctor to see the anal canal up close. They can take a small tissue sample from inside the rectum for analysis.

The physician may recommend a colonoscopy if the person with piles presents signs and symptoms that suggest another digestive system disease, or they are demonstrating any risk factors for colorectal cancer.

NOTE:-

A doctor will initially recommend some lifestyle changes to manage piles. A change in diet can help keep the stools regular and soft. This involves eating more fiber, such as fruit and vegetables, or primarily eating bran-based breakfast cereals. A doctor may also advise the person with piles to increase their water consumption. Losing weight may help reduce the incidence and severity of piles. To prevent piles, doctors also advise exercising. Exercising is one of the main therapies for piles.



Treatments

- · Eating foods that are high in fiber
- Taking a stool softener or a fiber supplement
- Drinking enough fluids every day
- Not straining during bowel movements
- Not sitting on the toilet for long periods of time
- Taking over-the-counter pain relievers
- Taking warm baths several times a day to help relieve pain.
 This could be a regular bath or a sitz bath. With a sitz bath, you use a special plastic tub that allows you to sit in a few inches of warm water.
- Using over-the-counter hemorrhoid creams, ointments, or suppositories to relieve mild pain, swelling, and itching of external hemorrhoids

In most cases, piles resolve on their own without the need for any treatment. However, some treatments can help significantly reduce the discomfort and itching that many people experience with piles.

Prevention

The best way to prevent hemorrhoids is to keep your stools soft, so they pass easily. To prevent hemorrhoids and reduce symptoms of hemorrhoids, follow these tips:

- Eat high-fiber foods. Eat more fruits, vegetables and whole grains.
 Doing so softens the stool and increases its bulk, which will help you avoid the straining that can cause hemorrhoids. Add fiber to your diet slowly to avoid problems with gas.
- Drink plenty of fluids. Drink six to eight glasses of water and other liquids (not alcohol) each day to help keep stools soft.

Consider fiber supplements. Most people don't get enough of the recommended amount of fiber — 20 to 30 grams a day — in their diet. Studies have shown that over-the-counter fiber supplements, such as psyllium (Metamucil) or methylcellulose (Citrucel), improve overall symptoms and bleeding from hemorrhoids.

If you use fiber supplements, be sure to drink at least eight glasses of water or other fluids every day. Otherwise, the supplements can cause or worsen constipation.

- **Don't strain.** Straining and holding your breath when trying to pass a stool creates greater pressure in the veins in the lower rectum.
- Go as soon as you feel the urge. If you wait to pass a bowel movement and the urge goes away, your stool could dry out and be harder to pass.
- Exercise. Stay active to help prevent constipation and to reduce pressure on veins, which can occur with long periods of standing or sitting. Exercise can also help you lose excess weight that might be contributing to your hemorrhoids.
- Avoid long periods of sitting. Sitting too long, particularly on the toilet, can increase the pressure on the veins in the anus.

Medications

Several medicinal options are available to make symptoms more manageable for an individual with piles:

- Pain relievers: Over-the-counter pain relievers such as aspirin and ibuprofencan reduce discomfort.
- **Stool softeners:** Stool softeners and laxatives can make passing stools easier, which can reduce pain from piles.
- **Corticosteroids:** Corticosteroid creams and ointment can reduce inflammation, pain, and itching.

Surgical Options

If a person has severe prolapsed piles or internal piles that are bleeding, surgery may be necessary. Surgical procedures for piles include:

- **Banding:** The doctor places an elastic band around the base of the pile, cutting off its blood supply. The hemorrhoid will typically fall off within a week.
- Sclerotherapy: A doctor will inject medicine into the hemorrhoid to make it shrink and eventually shrivel up. This is effective for grade II and III hemorrhoids and is an alternative to banding.
- **Infrared coagulation:** During this procedure, a surgeon will use an infrared light device to burn the hemorrhoid tissue.
- Hemorrhoidectomy: This type of surgery involves the total removal of hemorrhoid tissue. It is the most effective option for completely removing piles, but there is a risk of complications, including difficulties with passing stools.
- **Hemorrhoid stapling:** During this procedure, a surgeon will use staples to block blood flow to the hemorrhoid tissue.



