

Background

Without intervention, hemorrhoid disease is typically a chronic relapsing problem for patients. Definitive intervention however by hemorrhoidectomy techniques frequently have significant complications or involve painful and often prolonged recovery periods. Clinical experience with the O'Regan band ligator has had a very favorable outcome profile but there are limited data available in support of this observation.

Objectives

To evaluate the procedure, performance characteristics and clinical follow-up of a large group of patients with hemorrhoids who were treated with the CRH O'Regan banding ligator (BL).

Methods

This is a single center retrospective analysis of an 8-year database of 6690 patients treated using the BL for symptomatic internal hemorrhoids. Treatment protocol for initial visit was: record history, check by rectal and anoscope, grade the hemorrhoids, and apply the first band whenever possible. Subsequently two bands were applied a week apart. Position of the band was checked digitally after each application and adjusted if too low or patient discomfort was reported.

Band placements were: left lateral right posterior, and right anterior-the largest first and same order in all patients. NTG cream 0.13% was used twice daily for 6 weeks if anal spasm or fissure were present (4616/6690). NTG was then continued for three months after healing to decrease recurrence. At the end of the banding treatments patients were examined (digitally and anoscopy). All patients were put on a high fiber diet and advised not to spend more than 2 minutes on the toilet.

Results



Table 1 – Results

ID	#
# of patients	6690
Average age (years)	49.3
#bands	20286
Average# bands	3.03
Recurrence	8%
Partial recurrence	5%
Average follow up months	42
STDEV FU months	23
Hep, HIV, Herpes, Warts	132
Anal Ca	7
Pruritus ani	143
Nitroglycerin	4616
Diltiazem	381
FOBT -ve	2076
FOBT +ve	114
Latex allergy	61

Table 2 – Complications

Complication	#	% per patient	% per band
Death	0	0%	0.00%
Severe PO bleed	24	0.36%	0.12%
Severe PO pain	10	0.15%	0.05%
PO Urine hesitancy	4	0.06%	0.02%
PO Urine retention	0	0.00%	0.00%
PO Sepsis	0	0.00%	0.00%
PO stricture	0	0.00%	0.00%
PO Loss of Work	2	0.03%	0.01%
TOTAL	40	0.60%	0.20%

- 49% of those treated were women. The age of onset of symptomatic hemorrhoids was significantly earlier in women (39.7 vs. 46.2 for men) as was the presence of external hemorrhoids, and opting for removal of skin tags.
- 20,286 bandings were performed with an average of 3.03 per person.
- Grade 1 hemorrhoids were found and treated in 1%, grade 2 in 92%, grade 3 in 94% and grade 4 in 87%.
- 83% of patients experienced complete relief of hemorrhoids. 5% developed a partial recurrence and 8% had a full recurrence over a mean follow-up period of 42 months.
- Inadequate fiber intake (less than 30-35grams(G) daily for men or 25 G for women) was associated with recurrences.

Conclusion

The CRH O'Regan banding ligator is safe, effective and painless and has a favorably low complication profile.

This favorable profile should be validated by other centers, but this technique appears to offer a new opportunity for effective and definitive intervention for treatment of symptomatic hemorrhoids.