



The Gastrointestinal Centre

Dr Mark Thompson

M.B.B.S., F.R.A.C.P.

Dr Animesh Mishra

M.B.B.S.(Hons 1), F.R.A.C.G.P., F.R.A.C.P.

Dr Geoffrey Francis

BSc (Hons), M.B.B.S., F.R.A.C.P.

Assoc. Prof Mohammad Al-Freah

MB; ChB., F.R.A.C.P., MD (King's College London, UK)

CONSENT FOR HAEMORRHOID BANDING

What are haemorrhoids?

Haemorrhoids are dilated veins near the anus. They are extremely common and the most common problem is bleeding. Haemorrhoids can either be inside the body (internal) or on the outside (external). External haemorrhoids can be painful to treat and are best managed by surgical excision. Small to medium internal haemorrhoids can be managed by ligation with a rubber band device at the time of colonoscopy or sigmoidoscopy.

Haemorrhoids can also be treated conservatively (without any procedures). This would involve increasing the water and fibre content of your diet to soften the stools and decrease the need to strain on the toilet. Topical haemorrhoid cream or suppository can also be of use. If this conservative treatment does not relieve the problem then band ligation and surgical excision are the other treatments to consider.

What are the benefits of banding?

- Can be done at the same time as your colonoscopy or sigmoidoscopy
- Quite effective in decreasing the frequency of bleeding
- Does not require an operation

What are the risks of banding?

- Can cause post procedure pain
- Can make the bleeding temporarily worse (in which case haemorrhoid surgery may be needed)
- There is a small chance of clotting within the haemorrhoid
- There is a small chance of infection at the site of treatment
- Occasionally the side effects are severe enough that you will need the band removed

What are the limitations of banding?

- Banding is not a permanent cure, the haemorrhoids can recur (in which case banding can be repeated)
- Banding is not appropriate for very large internal haemorrhoids or external haemorrhoids (in these situations either conservative management or surgery would be suggested)

See over for further information



The Gastrointestinal Centre

Dr Mark Thompson

M.B.B.S., F.R.A.C.P.

Dr Animesh Mishra

M.B.B.S.(Hons 1), F.R.A.C.G.P., F.R.A.C.P.

Dr Geoffrey Francis

BSc (Hons), M.B.B.S., F.R.A.C.P.

Assoc. Prof Mohammad Al-Freah

MB; ChB., F.R.A.C.P., MD (King's College London, UK)

Post banding advice

- Use stool softeners such as Agarol
- Keep up your fluid intake (at least 2 litres per day)
- Avoid straining or heavy lifting
- Please call us if pain or bleeding worsens

Costs?

- If you have health insurance: no gap will be charged
- If you do not have health insurance: there will be an out of pocket expense to pay for the haemorrhoid banding equipment (which is single use)

I hereby consent to the use of my personal information for the purposes indicated below:

- To assist other medical practitioners or institutions who may treat me in the future but only to the extent necessary to treat the particular condition for which I have consulted The Gastrointestinal Centre. This may include a requirement to forward relevant prior information including anaesthetic records.
- To inform next of kin identified in my admission form of the outcome of treatment or to obtain consent to necessary treatment when I am not able to provide such consent.
- To enable The Gastrointestinal Centre to provide access to my information to the health fund of which I am a member if requested by the health fund.
- To enable The Gastrointestinal Centre to obtain any medical records including pathology and radiology results.

I have read and understand the procedure description overleaf and agree to haemorrhoid banding being performed.

NAME:(Please print)

SIGNATURE:

DATE:.....

F:\GIC TEMPLATES\CONSENT Haemorrhoid Banding.doc