

ABSTRACT

INTRODUCTION

A large proportion of world's population are troubled by haemorrhoids related perhaps to the inconsistency of the human diet and to the social obligations demanded by civilisation. Surgery has also been practised from the earliest time. All patients with hemorrhoids cannot be treated with only one procedure. Each of them to be evaluated separately by clinical examination & investigations & treated accordingly. In this study, we are evaluating patients with second degree haemorrhoids, treated with various treatment modalities like banding, and surgical excision ligation and comparing efficacy of each of them.

AIM OF THE STUDY : To study the clinical presentation of haemorrhoids, To compare Barron banding and Surgical excision Ligation by following parameters. Post operative complications like pain, bleeding, and retention of urine, Duration of hospital stay postoperatively, 3) To reduce the time of work to the minimum. To provide a cost effective, cheap, efficient, better, non surgical management of haemorrhoids

Techniques analysed in this study: Rubber band ligation, Surgical excision ligation.

Inclusion criteria: Patients diagnosed as having II^o haemorrhoids. Haemorrhoid patients with symptoms. Data collected includes about the demographic data, symptoms pertaining to haemorrhoids, duration, comorbidities, Treatment history In this study, we have included 120 cases of haemorrhoids who attended government rajaji hospital, Madurai during the six month period from February 2016 to August 2016.

THE STUDY GROUPS: Group I: Rubber band ligation Group II : Hemorrhoidectomy

SUMMARY & CONCLUSION:

The experience in the series of 120 patients with Second degree haemorrhoids treated at Government Rajaji Hospital, Madurai during the period of February 2016 to August 2016 have been reviewed. By analysis of the data obtained, the results are studied and the following findings are noted. Common age group 30-50 yrs. Mean- 40 yrs. Male preponderance. Common clinical feature being bleeding, constipation & pain, Results regarding management as follows:

Band ligation is the best initial treatment option for second degree haemorrhoids compared to other methods with acceptable cure rates

Advantages: Less painful. No bowel preparation required. No anaesthesia. Less complications. Cheaper. Overall Cure rate – 80%

Disadvantages: External pile mass & skin tags cannot be treated. Secondary hemorrhage may occur. In Surgery (hemorrhoidectomy) cure rate for second degree haemorrhoids was 71 %, but it remains the gold standard treatment for third and fourth degree haemorrhoids and the patients for whom other less invasive options failed to cure the disease.

Advantages: External pile mass & skin tags can be removed. For second degree Cure rate – 71% Disadvantages: Painful procedure. Anaesthesia required. More bleeding. Longer duration of stay.

