

Too much time on toilet may cause piles

More commonly known as piles, haemorrhoids are swollen veins in the anus and lower rectum that can cause pain, swelling and bleeding, says gastroenterologist Dr Lo Su Chun Robert

That habit of scrolling through your social media feed or watching videos while on the throne could actually be a health hazard. Sitting for too long on the toilet bowl or straining too hard during bowel movement may lead to piles, or haemorrhoids.

This occurs when the blood vessels in and around the anus are abnormally enlarged with downward displacement of the anal cushion. Being constipated, overweight or pregnant are risk factors, along with age and genetics.

Haemorrhoids can be internal, external, or a mix of both. Internal haemorrhoids develop within the anus, are not sensitive to touch or pain, and can be classified into grade 1 to 4 according to the degree of prolapse, or how far it is protruding. External haemorrhoids originate around the anus, are painful and sensitive to touch.

How can you tell if it's haemorrhoids or a more serious disease?

Symptoms such as bleeding, pain, prolapse and itch are not specific to the condition. Other diseases such as colorectal and anal cancer, polyps, inflammatory bowel disease, diverticular disease, and anal fissure may also cause these symptoms.

You may also have to undergo procedures such as a colonoscopy, which detect colon cancer, to rule this out.

Haemorrhoids are also unlikely to cause loss of appetite or weight, abdominal pain, or a change in bowel habits.

Can the haemorrhoids go away on their own?

Yes, the pain and swelling can usually go away on their own in a few days to a week if you avoid triggers that increase pressure on the veins in the pelvic and rectal regions.



To lower your risk of getting haemorrhoids, try to keep your time on the toilet bowl as short as possible, to a maximum of 10 minutes. **PHOTO: GETTY IMAGES**

A firmer lump may take longer to recede. However, these symptoms are likely to recur and may progress over time especially if there is no change in the triggering factors.

What are the treatment methods for haemorrhoids?

Haemorrhoids can be treated by making lifestyle changes. Ensure your diet is balanced with sufficient fibre and water for soft stool consistency. Limit the time spent on the toilet bowl to a maximum of 10 minutes and avoid straining.

For symptomatic haemorrhoids, a sitz bath (where the anus and buttocks are submerged in a shallow bath of warm water to soothe and reduce swelling), topical ointment, cream, suppository, and medical therapy may temporarily alleviate the symptoms.

For patients with symptomatic internal haemorrhoids that do not respond to conservative management, outpatient non-surgical procedures can be considered.

The most common procedure, rubber band ligation, involves inserting a rubber band around the base of the haemorrhoids to cut off blood supply so that they will fall off.

A small percentage of patients, usually those with grade 3 or 4 internal haemorrhoids, and those with symptomatic or thrombosed external haemorrhoids, may require surgery. Full recovery after surgery may take two to six weeks.



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