

# PATIENT INSTRUCTIONS FOR RUBBER BAND LIGATION

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## Patient Instructions For Rubber Band Ligation

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### Before the Procedure

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Before your appointment, do one rectal enema at home. Please inform the doctor or the nurse if you are taking any blood thinners, Aspirin, Advil, Aleve, or any related Non-Steroids Anti-Inflammatory medication (NSAID), or if you have any heart problems.

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### What is this procedure?

Rubber Band Ligation is a procedure in which the internal hemorrhoid is tied off at its base with rubber bands, cutting off the blood flow to the hemorrhoid. The hemorrhoid shrinks and scars in. This treatment is for internal hemorrhoids only and cannot be used for external hemorrhoids.

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### Are there alternatives to after Rubber Band Ligation?

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### Surgical Excision

Surgical excision remains the most effective treatment for symptomatic hemorrhoids, but is generally reserved for patients who fail or cannot tolerate an office-based procedure such as Rubber Band Ligation or patients who have external hemorrhoids.



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### What will happen during the procedure?

- At the first session, 1-2 hemorrhoids is ligated in the office.



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- Additional rubber bands procedures can be repeated .
- Most patients will require more than one session.

### Are there after-procedure restrictions for me to follow?

- Sit in a warm bath (sitz bath) for comfort, once or twice a day for 10 – 15 minutes.
- If you need pain medication, take paracetamol 500 mg every six hours as needed.
- Do not use Aspirin, Advil, Aleve or any related Non-Steroids Anti-Inflammatory medication (NSAID) for one week.
- If you develop fever, bleeding, pelvic pain, inability to urinate or painful urination, return to the clinic immediately. If after clinic hours, please go to the Emergency Department.
- It is important to avoid constipation after the procedure. Take the prescribed stool softeners, fiber supplementation, and/or laxative as recommended by the doctor.
- Drink plenty of fluids, maintain a normal diet, and eat food rich in fiber.
- The rubber band placed by the doctor can stay from a few hours to several weeks and will pass spontaneously with the stool. A small amount of blood with the stool is normal. However, if you start passing blood clots or bright blood that doesn't stop, please go to the Emergency Department.

### What can I do to prevent more hemorrhoids?

Avoid constipation. You should have a bowel movement every day or every other day. When you have a bowel movement, you should not have to strain. Your bowel movements consistently should not be hard and ideally should be of the texture of a ripe banana.

Here are some steps you can take to avoid getting constipated or having hard stools:

- Eat lots of fruits and vegetables, which shall help increase increase bowel movements.
- Take fiber powders, wafers, or pills. You should get 20 to 35 grams of fiber a day; including the fiber from your diet.
- You can use stool softeners.
- Drink plenty of water.

### If you have any inquiry or concern after the Rubber Band Ligation procedure?

If you need to reach the doctor during regular business hours (8:00 AM to 5:00 PM) Sunday through Thursday, please call the Contact Center **800 8 CCAD (800 8 2223)** and request to be transferred to the Colorectal Surgery Clinic in the Digestive Disease Institute.

After hours and during weekends, please call the Contact Center **800 8 CCAD (800 8 2223)** and request to speak to the physician On-Call in the Emergency Department, the triage nurse, or come to the Emergency Department if any concerning symptoms.

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Speak with our Contact Center for assistance

 800 8 2223

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