

Hemorrhoid Banding

CRH O'Regan System®

Non-Surgical Hemorrhoid Treatment
Fast. Painless. Proven.

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Intro

Rubber Band Ligation for Hemorrhoids

If you've ever had hemorrhoids, you know how uncomfortable, embarrassing or painful they can be. Hemorrhoids are very common in both men and women and, according to the Mayo Clinic, will affect almost three out of four adults in their lifetime. Many different factors can contribute to hemorrhoids forming, such as straining during bowel movements or not eating enough fiber.

Hemorrhoids, which are swollen veins, may develop internally. Internal hemorrhoids grow inside the lower rectum and can cause bleeding, itching, swelling, soiling and other bothersome symptoms. Prolapsed internal hemorrhoids push through the anal opening and may cause pain or irritation.

Hemorrhoids can also grow externally. External hemorrhoids form under the skin around the anus, causing pain, itching and bleeding. It's possible to have internal and external hemorrhoids at the same time.

If you've tried home remedies or over-the-counter (OTC) creams and have found no relief, hemorrhoid banding treatment might help. Unlike OTC remedies, which only work temporarily, hemorrhoid banding offers a long-term solution. Hemorrhoid banding, also called hemorrhoid ligation, is a non-surgical, painless procedure that a doctor can perform in their office.

It's a straightforward treatment method that involves placing a rubber band around the base of the hemorrhoid. The rubber band prevents blood flow to the hemorrhoid and causes it to wither and eventually fall off on its own.

How Successful Is Hemorrhoid Banding?

The CRH O'Regan System is a hemorrhoid banding method that's proven to be 99% effective.

In general, the success rate of hemorrhoid banding falls between 70% and 97%, but this depends on the technique used and the hemorrhoid grade. The CRH O'Regan System is a hemorrhoid banding method that's proven to be 99% effective. This technique is on par with hemorrhoid surgery but features a much lower complication rate.

What Will I Learn in This Guide?

If you've tried treating your hemorrhoids at home but have had no success, you may be considering hemorrhoid banding treatment, and you probably have some questions. In this guide, we hope to address your concerns and paint a clearer picture of this minimally invasive hemorrhoid treatment. We'll answer questions such as:

- How does rubber band ligation work?
- Is hemorrhoid banding painful?
- How long does it take to recover from hemorrhoid ligation treatment?
- Is hemorrhoid banding worth it?

If you would like to speak to a doctor now about hemorrhoid banding, use our directory to find a CRH O'Regan Physician near you.

Chapter 1

What Is Hemorrhoid Banding?



To understand the hemorrhoid banding procedure, it first helps to know how hemorrhoids form. Hemorrhoids can develop any time a person puts too much pressure on the veins in the rectal area. For example, during a bowel movement, the anal tissue fills with blood to aid the process. If you strain during a bowel movement, you may increase pressure in anal veins, causing these veins to swell or stretch. Usually, this swelling resolves quickly after straining, but sometimes the tissue remains engorged. The swollen tissue is called a hemorrhoid.

Other factors that may cause too much pressure to build include:

- Sitting on the toilet too long
- Pregnancy
- Obesity
- Recurring constipation or diarrhea
- Not eating enough fiber

The risk of developing hemorrhoids also increases if you are between 45 and 65 years old. However, hemorrhoids can happen at any age, and it's not uncommon for young people to experience hemorrhoids. Most people will have a hemorrhoid at some point in their life.

Fortunately, today's patients do not have to live with the discomfort of having hemorrhoids, nor do they have to choose surgery to find relief.

Hemorrhoid banding, or rubber band ligation, is a painless, minimally invasive method used to treat internal hemorrhoids and relieve external hemorrhoid symptoms.



Hemorrhoid banding, or rubber band ligation, is a method used to treat internal hemorrhoids and relieve external symptoms.

According to an article published in the [World Journal of Gastrointestinal Surgery](#), rubber band ligation is one of the most commonly used and cost-effective treatments for internal hemorrhoids. In this chapter, we'll show you how internal hemorrhoid banding works.

The History of Hemorrhoid Banding

Humans have been treating hemorrhoids for thousands of years. Before the invention of rubber band ligation, physicians used a range of [methods to relieve hemorrhoid symptoms](#), including various surgical and ligation techniques. For example, [during the fifth century B.C.](#), Hippocrates wrote about a procedure similar to rubber band ligation, which involved tying hemorrhoids with a thick woolen thread “until they drop off.”

It wasn’t until the 1950s that [Paul C. Blaisdell](#) first described rubber band ligation as we know it today. The procedure was based on Blaisdell’s idea that internal hemorrhoids are easy to access and have few pain-sensitive nerve endings. Due to the procedure’s simplicity, doctors could use rubber band ligation to provide hemorrhoid treatment in their office rather than in a hospital.

Then, in the 1960s, J. Barron modified outpatient hemorrhoid ligation by using rubber bands and a device called [the Barron band ligator](#). The Barron hemorrhoid ligator is a metal device that uses forceps to grasp the

hemorrhoid before placing a rubber band around its base. Since Barron's technique, various types of forceps have been invented to perform rubber band ligation.

Even though Barron's ligation method is generally considered simple and safe, it needed improvement. Doctors found that grasping the hemorrhoid with forceps wasn't always easy and could cause post-procedure pain.

In 1997, laparoscopic surgeon Dr. Patrick J. O'Regan improved hemorrhoid banding instruments by inventing a painless suction device called the CRH O'Regan ligator. Doctors can use the CRH O'Regan ligator to safely band hemorrhoids within seconds in their own office, and without the patient experiencing any pain.

Today, over a million rubber band ligations have been performed using CRH O'Regan technology.

How Does Hemorrhoid Banding Work?

When a doctor uses a ligator to place a tiny elastic band around a hemorrhoid, it cuts off the hemorrhoidal tissue's blood supply. This causes the hemorrhoid to painlessly wither and fall from the living tissue in about a week. The surrounding tissue then forms a small scar as it heals. Once a scar forms where the hemorrhoid used to be, it helps keep hemorrhoids from coming back in the same spot.

When Does a Doctor Recommend Hemorrhoid Banding?

Your doctor may recommend rubber band ligation to treat hemorrhoids that are prolapsed or causing symptoms such as:

- Pain
- Bleeding
- Itching

- Swelling
- Soiling

Hemorrhoids can become itchier or more painful over time if they remain untreated. Any patient who suffers from recurring hemorrhoid symptoms might consider hemorrhoid banding.

Types of Hemorrhoid Banding

Physicians can use several techniques and specialized tools to perform hemorrhoid banding. For example, ligators feature variations in the grip. Some ligators have a pistol grip, while others feature a scissors grip. The mechanisms for capturing the hemorrhoid and releasing the band also vary.

Even though the following procedures all aim to ligate hemorrhoids, they may produce different results since they involve distinct devices and techniques. Here are the various types of hemorrhoid banding:

Traditional Rubber Band Ligation

During a traditional rubber banding hemorrhoid procedure, the doctor clamps the hemorrhoid with metal forceps and pulls it away from the anal wall. Next, the doctor places a rubber band around the hemorrhoid to cut off blood flow, causing it to dry up and eventually fall off. Traditional rubber band ligation takes five to 10 minutes, and patients may require up to three days to recover.

This procedure usually causes post-procedure pain and bleeding, and physicians often prescribe pain medication to help patients get through their recovery. According to the World Journal of Gastrointestinal Surgery, pain is one of the most common complications of traditional rubber band ligation and occurs in about 25% to 50% of patients.

Endoscopic Banding

Endoscopic band ligation involves the use of an endoscope. An endoscope is a thin, flexible tube that a doctor can put tools in, such as forceps. Endoscopes used for hemorrhoid banding have been fitted with a plastic cap containing elastic bands. After the doctor inserts the endoscope into the patient's anus, they will use a suction device or forceps to secure the hemorrhoid before placing the band around the base of the tissue.

Endoscopic banding is more complex and costlier than other types of ligation. Endoscopic banding also typically requires fasting, bowel preparation and sedation. Patients may experience pain after an endoscopic banding procedure.

CRH O'Regan: Modern Hemorrhoid Banding

The CRH O'Regan technique is similar to traditional hemorrhoid banding, except it is less likely to cause pain because it does not involve metal clamps.

For example, one study found that patients had higher pain scores immediately after a traditional banding procedure involving forceps ligation than those who underwent suction ligation. Less than 1% of patients experience significant pain or other complications with the CRH O'Regan System.

The CRH O'Regan method uses a disposable ligator, which is a small plunger device resembling a syringe, to create suction and gently pull the hemorrhoid.



The CRH O'Regan method uses a disposable ligator, which is a small plunger device resembling a syringe, to create suction and gently pull the hemorrhoid. Once the hemorrhoidal tissue enters the device, a rubber band is released and placed around the tissue. There are no pain-sensing nerves where the doctor puts the rubber band.

Unlike other hemorrhoid banding treatments, the CRH O'Regan System does not require preparation, such as fasting or sedation. Nor does the doctor need to use any special instrumentation, and they can complete the treatment with only the CRH O'Regan ligator, examination gloves and lubricant. The procedure is also very fast and usually takes less than a minute, unlike other rubber band ligation procedures. Patients can undergo hemorrhoid banding with the CRH O'Regan System in their doctor's office and return to work on the same day.

If you have multiple hemorrhoids that require treatment, your doctor will schedule a few more visits to perform the CRH O'Regan technique. Typically, your doctor will only place one band per visit to allow sufficient time for healing. Treating multiple hemorrhoids at once increases the risk of complications, so if possible, it's worth it to undergo one treatment at a time.

Since there are three sites where hemorrhoids frequently form, most patients require a total of three treatments, with each appointment scheduled about two weeks apart. Once you complete CRH O'Regan treatment, you can expect a low recurrence rate, similar to that of hemorrhoid surgery. Fewer than 5% of patients experience a recurrence within two years after CRH O'Regan treatment.

Other Procedures Used to Treat Hemorrhoids

Hemorrhoid banding is not the only option for treating hemorrhoids, although it is highly effective and the most common procedure to remove internal hemorrhoids. Doctors may recommend other treatment methods if the hemorrhoids are too small or too large for rubber band ligation.

Other hemorrhoid procedures include:

Conventional Surgery

The surgical removal of a hemorrhoid is called a [hemorrhoidectomy](#). During a hemorrhoidectomy, the doctor [makes incisions in the tissue around the hemorrhoid](#) and ties off the swollen vein inside the hemorrhoid to prevent bleeding. The doctor then removes the hemorrhoid and may or may not sew the area closed. They'll then cover the wound with medicated gauze. Before undergoing a hemorrhoidectomy, the patient may receive general anesthesia to keep them from feeling pain.

Surgeons might use a scalpel, cautery pencil or a laser to perform a hemorrhoidectomy. This procedure is typically done in a surgery center or hospital. Patients can expect surgery itself [to last 40 to 90 minutes](#).

Patients who undergo hemorrhoid surgery will need someone to drive them home from the procedure due to the effects of anesthesia. They'll also need to eat a bland diet for a few days after surgery and use ice packs, warm-water baths and medication to relieve pain. In some cases, doctors give patients antibiotics to prevent an infection.

Hemorrhoid surgery is more expensive than hemorrhoid banding, involves a longer recovery time, has a higher risk of complications and is typically more painful. Some patients may need to stay in the hospital for a few days after the procedure due to pain, and overall, it can take [over a month to recover](#). Doctors usually do not recommend a hemorrhoidectomy unless a patient has very large internal or external hemorrhoids.

Coagulation Therapy

Coagulation therapy, also known as infrared photocoagulation, uses [heat to cut off the hemorrhoid's blood supply](#). During this procedure, the doctor uses a device that creates a powerful beam of infrared light, which then heats the hemorrhoid. The process may take 30 seconds to three minutes.

Doctors might recommend coagulation therapy to treat small hemorrhoids that do not respond to home remedies. This procedure can be completed in a doctor's office, and it may cause pain. The patient might also sense heat during the procedure. Coagulation therapy is expensive, and only one hemorrhoid can be treated at a time.

Sclerotherapy

If patients have hemorrhoids that are too small for rubber band ligation, their doctor might suggest sclerotherapy. During sclerotherapy, the doctor injects the hemorrhoid with a chemical, which causes it to fall off eventually.

Patients commonly experience pain after undergoing sclerotherapy. Sclerotherapy also requires a high level of skill because if the doctor injects the substance into the wrong area, the patient can experience serious complications.

Cryosurgery

During cryosurgery, the doctor freezes the hemorrhoid with a cryoprobe and nitrous oxide or liquid nitrogen. In about three weeks, the hemorrhoid falls off.

Patients usually experience pain after cryosurgery, and there's a risk of infection. Due to the increased complication risks related to this procedure, most doctors choose other forms of hemorrhoid treatment instead.

Stapling

Stapling is a surgical technique used to treat large prolapsed hemorrhoids. During a stapling procedure, the doctor uses instruments to push the hemorrhoidal tissue back to its original location in the anal canal and staple it in place. The process may take anywhere from 15 to 90 minutes.

Although stapling is less painful than traditional surgery, it comes with a greater chance of recurrence, and it's more expensive. Several

complications are associated with stapling, such as the development of excessive scar tissue or trauma to the rectal wall.

Due to the complications associated with stapling and other surgical treatments, it's worth confirming you need surgery with your doctor before moving forward. Hemorrhoid banding is much less invasive and just as effective as surgery.

Is Hemorrhoid Banding Considered Surgery?

Hemorrhoid banding is not considered surgery and does not involve incisions. Instead, hemorrhoid banding is thought to be the most effective non-surgical treatment for internal hemorrhoids.

Can You Band External Hemorrhoids?

External hemorrhoid banding is not effective. External hemorrhoids are located beneath the dentate line, where there are pain-sensing nerves, so they are too sensitive for banding.

Hemorrhoid banding is only used to treat internal hemorrhoids, which are located above the dentate line. However, if you treat internal hemorrhoids with the CRH O'Regan System, it can relieve swelling and symptoms associated with external hemorrhoids. Around 90% of patients with external hemorrhoid symptoms find relief with internal hemorrhoid banding. Protruding internal hemorrhoids may be mistaken for external hemorrhoids.

Are You Awake During Hemorrhoid Banding?



The CRH O'Regan System does not require sedation because **it is fast, painless and can be done in a doctor's office.**

If you receive CRH O'Regan treatment, you will be awake during hemorrhoid banding. The CRH O'Regan System does not require sedation because it is fast, painless and can be done in a doctor's office.

If you have more questions about hemorrhoid banding and how it works, please [contact a CRH O'Regan Physician near you.](#)

Chapter 2

What to Expect With Hemorrhoid Banding

In general, hemorrhoid banding is a quick, safe and simple procedure that rarely causes serious complications. You can expect to recover quickly from hemorrhoid banding and continue with your usual routine. However, your experience will depend on the technique your doctor uses.

The first step to hemorrhoid banding is to **meet with your doctor** and determine if this treatment method is right for you.



If your doctor performs hemorrhoid banding using CRH O'Regan technology, you can return to work immediately after the procedure as long as your job does not involve strenuous activity. The CRH O'Regan System does not require preparation or sedation and takes very little time, so you can easily fit it into your schedule.

In this chapter, we'll discuss what you can expect during and after hemorrhoid banding, including side effects and recovery time. If you have questions along the way, please use our directory to find and contact a local CRH O'Regan physician.

Is Hemorrhoid Banding Painful?

During hemorrhoid banding, your doctor will place the band above the dentate line where there are no pain-sensing nerves, so the procedure itself is painless. However, some ligation techniques may cause more pain post-procedure than others.

For example, traditional methods using forceps involves grasping the hemorrhoid with metal. While this may not cause pain during the procedure, patients may experience pain after hemorrhoid banding.

For most patients, the CRH O'Regan method does not cause any pain during the procedure or recovery. Rather than using a metal clamp to grasp the hemorrhoid, the CRH O'Regan ligator uses gentle suction to draw the hemorrhoid into the device before applying the rubber band. According to a study of over 6,500 patients, only 0.5% of the patients treated with the CRH O'Regan System reported bleeding or severe pain after the procedure. With other types of hemorrhoid banding, 4% to 29% of patients reported significant pain post-procedure.

What Are the Side Effects of Hemorrhoid Banding?

After hemorrhoid banding using the CRH O'Regan method, you might experience a dull ache or feeling of fullness in the rectum during the first 24 hours after the procedure. Usually, over-the-counter medications such as acetaminophen or ibuprofen relieve these symptoms. You may also experience slight bleeding with bowel movements, when the hemorrhoid falls off and a few days after it leaves your body.

Since your doctor will only place one band at a time, other side effects are extremely rare. Less than 1% of patients report significant bleeding, severe pain or urine hesitancy.

How Long Does It Take to Recover From Hemorrhoid Banding?

The hemorrhoid banding recovery time depends on the individual and the

technique used. Generally, after the hemorrhoid falls off within a few days, it may take one to two weeks for the live tissue to fully heal. You can help your recovery by avoiding straining.



With **CRH O'Regan treatment**, you can expect a fast recovery and you will not have to follow a strict regime.

With CRH O'Regan treatment, in particular, you can expect a fast recovery, and you will not have to follow a strict regime. In other words, you can go back to work or resume normal activities immediately after the procedure. You'll only want to avoid heavy lifting and vigorous exercise on the same day of treatment.

What Should You Do After Banding a Hemorrhoid?

During your time of healing after hemorrhoid banding, you won't have to do too much. Hemorrhoid banding aftercare mainly involves avoiding heavy lifting and strenuous activities. It also helps to eat high-fiber foods to prevent constipation and avoid straining during bowel movements.

To help you feel better faster after a hemorrhoid banding procedure, here are some general aftercare tips:

- Do not lift anything that may cause you to strain for two to three weeks.
- Avoid strenuous exercise until your doctor says it's all right.

- Try to walk every day to increase blood flow and support bowel health.
- Eat high-fiber foods to make bowel movements more comfortable and prevent constipation.
- Avoid straining with bowel movements as you recover.
- Place your feet on a small step stool when you sit on the toilet to make bowel movements easier.
- Take over-the-counter pain medication to relieve a feeling of fullness in the rectal area.
- Talk to your doctor if you have any questions about the medications you take.
- To soothe pain, sit in a shallow bath of warm water for about 20 minutes three times a day and after bowel movements, and pat the area dry.
- Apply a cold pack to the area for 10 or 20 minutes every one to two hours for three days after the procedure.
- To decrease swelling, lie on your stomach with a pillow under your hips.
- Unless told otherwise by your doctor, avoid placing anything in your rectum as you recover.
- Get adequate sleep and rest when you feel tired.

After a CRH O'Regan procedure, you'll only need to avoid strenuous activities and heavy lifting the day of your treatment, and you can go back to your usual activities the next day. If you wish, you can soak in a warm bath with a tablespoon of salt to gently clean the anal opening as you heal.

Regardless of the type of hemorrhoid banding procedure you have, it's

essential to call your doctor if you experience any problems during your recovery. Be sure to keep your follow-up appointments as well, so you can make the most of your treatment.

How Long Does It Take a Banded Hemorrhoid to Fall Off?

A banded hemorrhoid usually falls off in **two to four days**.



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What Does a Hemorrhoid Look Like When It Falls Off?

Since the hemorrhoid will shrink and dry up, you likely won't notice it when it leaves your body, usually during a bowel movement. You may see the rubber band in the toilet, although it's only a few millimeters wide. Typically, patients do not notice anything when the hemorrhoid falls off other than minor bleeding with their bowel movement.

Can You Drive After Hemorrhoid Banding?

Yes, you can drive after hemorrhoid banding treatment. As mentioned, the procedure does not require sedation, so there's no need to ask someone to drive you home from the doctor's office.

Can You Eat After Hemorrhoid Banding?

Yes, you can eat after hemorrhoid banding. Unlike hemorrhoid surgery, which requires patients to eat low-residue foods until they heal, you can eat your usual diet immediately after the procedure. However, doctors recommend including high-fiber foods in your diet to make stool softer and prevent constipation. Since high-fiber foods make it easier to pass stool, you'll reduce the chance you'll strain during bowel movements, which can help keep hemorrhoids from coming back.



Try to include high-fiber foods to prevent constipation.

It's recommended to consume 14 grams of fiber per 1,000 calories. Examples of high-fiber foods include:

- Fruits: Pears, apples, raspberries and prunes
- Vegetables: Green peas, collards, potatoes with the skin and winter squash
- Beans: Navy, pinto and kidney beans
- Grains: Bran or shredded wheat cereal, whole-wheat pasta or bran muffins

It also helps to limit foods with little or no fiber, such as cheese, ice cream, meat and processed foods. Also, make sure to drink plenty of liquids

unless your doctor directs you to do otherwise. Drinking adequate fluids helps fiber work properly in your body.

If you struggle to get adequate fiber through the food you eat, you can use fiber supplements to increase your intake. You can also add two tablespoons of oat or wheat bran to your breakfast every morning.

Can You Sit After Hemorrhoid Banding?

Yes, you can sit after hemorrhoid banding. However, it's recommended that you try not to stay seated for more than two to three hours at a time during the first couple of days after the procedure.

Can You Take a Bath After Hemorrhoid Banding?

You can safely take a bath or shower immediately after hemorrhoid banding. As mentioned above, doctors recommended soaking in a warm bath to keep the area clean as you recover.

Can Hemorrhoids Come Back After Banding?

Hemorrhoids can come back after banding, but they are less likely to recur with banding than other treatments. With the CRH O'Regan System, fewer than 5% of patients have a recurrence within two years. Hemorrhoid banding is considered the most effective non-surgical treatment for internal hemorrhoids and long-term results.

No matter the type of hemorrhoid treatment you receive, you can take steps to prevent future hemorrhoids by increasing your fiber intake and avoiding excessive straining.

Can a Hemorrhoid Fall Off By Itself?

A hemorrhoid will not fall off by itself. While the symptoms of small hemorrhoids may temporarily subside without treatment, the hemorrhoids can come back. Usually, if a hemorrhoid has progressed to

cause noticeable symptoms, it won't fall off or go away on its own. If you have hemorrhoid symptoms, it's best to talk to your doctor and determine the right treatment for your condition.

How Can I Prevent Hemorrhoids?

Although rubber band ligation helps keep hemorrhoids from coming back, there are lifestyle changes you can make to prevent hemorrhoids. Here are tips to help prevent a recurrence of hemorrhoids:

- Eat high-fiber foods: Increase your fiber intake by eating healthy, fiber-rich fruits, vegetables, beans, nuts and whole grains. Fiber makes it easier for your body to pass stool and keeps you from having to strain during bowel movements. If you're not able to get adequate fiber from food, consider taking a fiber supplement.
- Drink more water: Women should have about 11.5 cups of fluids each day, and men should have about 15.5 cups, according to the Mayo Clinic. It's essential to stay hydrated to decrease your risk of constipation, which is a common cause of hemorrhoids. Drinking plenty of water will also help keep your stools soft as you increase your fiber intake.
- Exercise: Aim to get 20 to 30 minutes of aerobic exercise every day. Exercise can prevent hemorrhoids because it keeps waste moving through your body. When you're sedentary, your bowels slow down, and you're more likely to experience constipation.
- Don't sit on the toilet too long: While it may be tempting to spend more than a few minutes in the bathroom with a book or smartphone, it's important not to stay seated for too long. Sitting on the toilet increases pressure in the rectal region, which can lead to hemorrhoids — especially if you strain. Aim to be out of the bathroom in two minutes or less. If you need more time, leave the bathroom and return to try again later.

- Go when you get the urge: Go to the bathroom as soon as you get the urge to make a bowel movement. If you wait too long, the stool could become dry, hard and more difficult to pass, leading to constipation and straining.

If you have more questions about hemorrhoid prevention, please contact your doctor or visit our blog.

Chapter 3

Deciding If Hemorrhoid Banding Is Right for You

Hemorrhoid banding is a safe and effective way to treat hemorrhoids.

If you have hemorrhoid symptoms that won't go away, no matter what you do, it may be time to talk to your doctor about hemorrhoid banding. Your doctor will examine you and recommend the best treatment considering the hemorrhoid grade. Hemorrhoids are grouped into different grades based on how much they protrude out of the anal canal. The various grades include:

- Grade I hemorrhoids do not protrude, and they may or may not bleed.
- Grade II hemorrhoids protrude during bowel movements but go back on their own.
- Grade III hemorrhoids protrude and must be manually pushed back in.
- Grade IV hemorrhoids protrude and cannot retract.

Hemorrhoid banding is most commonly used to treat Grade I to Grade II hemorrhoids. However, doctors can utilize hemorrhoid banding technology

like the CRH O'Regan ligator to eliminate Grade III hemorrhoids, though it may require more than three treatments.

This chapter will talk about the benefits of hemorrhoid banding and if it's worth it for you. If you wish to speak to a local doctor about hemorrhoid banding, please search our directory of CRH O'Regan physicians.

Is Hemorrhoid Banding Worth It?



Hemorrhoid banding can be worth it if your hemorrhoids bother you and if you want **a simple treatment** that works for most people.

Millions of people have hemorrhoids, but many suffer from them for years before seeking treatment. Although internal hemorrhoids usually aren't dangerous, they can recur and cause pain or irritation. If left untreated, hemorrhoids can also progress into more advanced grades.

For example, hemorrhoids can become thrombosed, which can lead to swelling, inflammation and severe pain. Thrombosed hemorrhoids occur when blood collects in an external or internal hemorrhoid and forms a clot.

Internal hemorrhoids can also prolapse if left untreated and extend beyond the anus. Prolapsed hemorrhoids might collect mucus and stool particles, which can lead to itching and discomfort.

If you have hemorrhoids that cause bleeding or do not improve after a

week of home care, it's a good idea to talk with your doctor. Your doctor will rule out other diseases and use the appropriate treatment to bring you relief.

If you have hemorrhoids that are prolapsed or cause bleeding, itching, swelling or soiling, your doctor might recommend hemorrhoid banding. Hemorrhoid banding can be worth it if your hemorrhoids bother you and if you want a simple treatment that works for most people.

Keep in mind that not all hemorrhoid banding techniques are exactly the same. If you have the option, consider the CRH O'Regan System, which has been called the best treatment available for hemorrhoids. Benefits of the CRH O'Regan System include:

- Painless: Modern hemorrhoid banding technology, like the CRH O'Regan System, leads to much less pain post-procedure than previous methods. The procedure itself is painless.
- Safe: The CRH O'Regan System is considered a safe procedure and rarely leads to complications. When doctors treat one hemorrhoid when using the CRH O'Regan ligator, patients can expect a less than 1% complication rate.
- Fast: A CRH O'Regan procedure takes about a minute, unlike other rubber band ligation methods, which may take five to 30 minutes. You can be in and out of the doctor's office on the same day of your treatment without having to take time off of work.
- Effective: The CRH O'Regan System is more than 99% effective and can treat about 95% of patients with hemorrhoids. With the CRH O'Regan System, you can find fast relief when other options didn't work.
- Disposable: The CRH O'Regan System is disposable, meaning there's less risk of cross-infection. Healthcare-associated infections (HAI) account for almost 2 million infections each year, and patients

can acquire HAI in any type of medical facility. You can enjoy greater peace of mind if your doctor treats your hemorrhoids with a single-use CRH O'Regan ligator.

- Cost-effective: Since you can receive hemorrhoid banding treatment in a doctor's office, you don't have to worry about costs relating to a hospital stay, and you also don't have to miss time or pay at work.
- No preparation required: The CRH O'Regan System does not require fasting or any other type of preparation. You won't have to revolve your week around your procedure or feel uncomfortable leading up to your appointment.
- No sedation needed: The CRH O'Regan System does not require anesthesia, so you can drive yourself home or get back to work the same day of your treatment. You also don't have to worry about any of the complications associated with anesthesia.

Overall, the CRH O'Regan System allows you to get rid of your hemorrhoids quickly, easily and painlessly so that you can get on with your life.

When Should You Consider Hemorrhoid Surgery?

Hemorrhoid surgery is usually the last resort for patients because it is painful and expensive and involves a long recovery time. However, your doctor might recommend a hemorrhoidectomy if you have painful and recurring external hemorrhoids, large protruding hemorrhoids or problematic internal hemorrhoids that do not respond to non-surgical treatments.

Chapter 4

Hemorrhoid Banding FAQs



Although we covered the basics in this guide, you may have more questions. We understand there's a lot to learn about rubber band ligation and how the process works. In this chapter, we'll answer common questions patients have about hemorrhoids and hemorrhoid banding. If more questions pop up along the way, [contact a CRH O'Regan Physician](#) in your area, or [browse our blog](#) for helpful information.

General Hemorrhoid FAQ

Hemorrhoidal disease is complex, so it's always best to consult your doctor when you have medical concerns. In the meantime, here are answers to some general hemorrhoid questions:

What Do Hemorrhoids Look Like?

External hemorrhoids appear on the anus. You may not always be able to see external hemorrhoids even though they exist outside of your body. If you can see external hemorrhoids, they may look like red lumps [that appear in bunches around the anus](#).

A protruding internal hemorrhoid bulges outside of the anal opening and appears as a red, moist lump. If you have a thrombosed hemorrhoid, you may notice a bluish color around the hemorrhoid.

Can I Pop a Hemorrhoid?

You may be tempted to pop a hemorrhoid with a pin or your finger to relieve the pain it's causing. However, it's [not a good idea to pop a hemorrhoid](#) for several reasons.

First, it's hard to see a hemorrhoid on your own, and you could accidentally injure the surrounding tissue.

Secondly, if you have not yet gone to a doctor, there's no way to be sure the lump is a hemorrhoid or something else.

If you pop a hemorrhoid, you'll cause an open wound in an area that's vulnerable to bacteria, and this could lead to an infection.

Lastly, popping a hemorrhoid is extremely painful.

If you're experiencing hemorrhoid pain, your best bet is to contact your doctor.

Do Hemorrhoids Burst?

A hemorrhoid can burst if it becomes thrombosed. A thrombosed hemorrhoid will not burst in the way a pimple pops. Instead, it will secrete blood if it becomes too full. Thrombosed hemorrhoids cause intense pain before they burst, so most people seek medical attention before this happens.

If a hemorrhoid bursts before you get to a doctor, make an appointment to have the area checked out as soon as possible. In the meantime, you can help keep the area clean and relieve pain by [taking a sitz bath](#).

Can Stress Cause Hemorrhoids?

Stress cannot directly cause hemorrhoids, [but it can lead to constipation](#), one of the main causes of hemorrhoids. When someone feels stressed, they may be more likely to eat unhealthy foods, sleep less, skip exercise or forget to drink enough fluids. All of these factors can cause constipation and strain during bowel movements, which may lead to hemorrhoids.

What Can Hemorrhoids Be Mistaken For?

Various conditions can cause hemorrhoid symptoms such as itching, pain and rectal bleeding. Other causes of hemorrhoid-like symptoms include:

- Anal fissures
- Rectal abscess
- Polyps or tumors
- Rectal prolapse
- Inflammatory bowel disease
- Pruritus ani

Your doctor will take the necessary steps to determine the cause of your symptoms and the appropriate course of action.

Do Hemorrhoids Cause Colorectal Cancer?

Hemorrhoids do not cause colorectal cancer or increase the risk of getting colorectal cancer. However, since cancer and hemorrhoids can both cause bleeding, it's crucial to get evaluated by a doctor if you experience rectal bleeding.

Are Hemorrhoids a Disease?

When someone experiences symptoms from hemorrhoids, they are considered to have hemorrhoid disease. By definition, a disease is an impairment of the normal state of a living animal. Diseases such as hemorrhoids cause bothersome signs and symptoms.

Does Walking Help Hemorrhoids?

Walking increases blood flow throughout your entire body, which can help tissues in the rectal area heal. Walking also stimulates bowel function and can help prevent constipation. By walking at least 30 minutes a day, you can help manage and prevent hemorrhoids.

Does Sitting Make Hemorrhoids Worse?

Sitting on the toilet for long periods can cause hemorrhoids and make them harder to treat. When you sit on the toilet, you put excess pressure on anal veins because there is no support beneath you. To prevent and help treat hemorrhoids, avoid sitting on the toilet for more than two minutes at a time.

Hemorrhoid Banding FAQ

Now that we've addressed a few general hemorrhoid questions, here are answers to common questions regarding hemorrhoid banding:

How Common Is Hemorrhoid Banding?

Rubber band ligation is the most **commonly used non-surgical** hemorrhoid treatment in the world.



Rubber band ligation is the most commonly used non-surgical hemorrhoid treatment in the world. Regarding the CRH O'Regan System, thousands of

physicians nationwide treat patients with this banding technique.

Can I Band My Own Hemorrhoids?

A trained doctor must perform hemorrhoid banding, and you should never attempt this procedure yourself. Many DIY treatments can be dangerous or simply ineffective, so it's usually best to consult your doctor first.

How Much Does Hemorrhoid Banding Cost?

Compared to hemorrhoid surgery, hemorrhoid banding is a cost-effective solution. However, it's important to note that the cost of hemorrhoid treatment varies depending on the technique used. The CRH O'Regan System is one of the most affordable treatments available and covered by most insurers.

If you have questions about hemorrhoid banding costs, please call the office where you plan to get treated for the most current pricing. You can also reach out to a local physician qualified to use the CRH O'Regan System and inquire about copays and treatment costs.

The CRH O'Regan System is one of the most affordable treatments available and covered by most insurers.

Can Hemorrhoid Banding Fall off Too Soon?

Typically, the banded hemorrhoid won't fall off for at least two days, but if you find the rubber band floating in the toilet in less than 48 hours, there's no need to panic. Sometimes rubber bands come off in less than two days but still produce the desired results. If your band comes off in less time than you expected, you may want to speak to your doctor for reassurance.

How Long After Hemorrhoid Banding Can I Poop?

Pooping does not need to be postponed after hemorrhoid banding, and you can go to the bathroom as you usually would. Doctors recommend moving your bowels as soon as you need to.

Although it's safe to pass stool immediately after a banding procedure, it's still critical you try not to strain after treatment to allow the area to heal. Your doctor may recommend taking a stool softener to prevent constipation and straining.

Can You Work After Hemorrhoid Banding?

Unless your job involves strenuous tasks, you don't have to worry about missing work with hemorrhoid banding. We only recommend avoiding vigorous activities on the day of CRH O'Regan treatment. Most patients with office jobs can go back to work immediately after their appointment.

We recommend avoiding vigorous activities on the day of CRH O'Regan treatment.



What Kind of Doctor Does Hemorrhoid Banding?

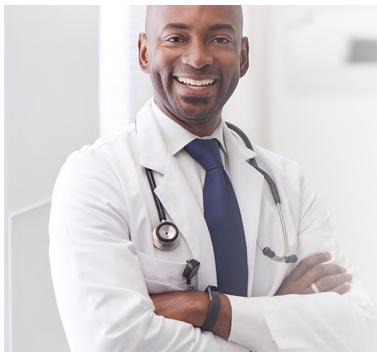
Gastroenterologists typically perform hemorrhoid banding. However, not all doctors have the equipment or experience to perform hemorrhoid banding. Doctors who offer CRH O'Regan treatment, for example, must first be trained to use CRH technology.

If you're ready to look for a qualified gastroenterologist in your area, consider the following:

- How much experience the doctor has treating hemorrhoids
- If the doctor clearly explains the procedure
- If the doctor is willing to discuss all treatment options

If you want to learn more about the CRH O'Regan System from a trained doctor, our physician search tool will send you in the right direction.

Find a CRH System Hemorrhoid Banding Doctor Today



At [CRH Medical Corporation](#), we are dedicated to helping patients find complete relief from hemorrhoids through the CRH O'Regan System.

Hemorrhoids can be disruptive, embarrassing and frustrating to deal with. For some patients, hemorrhoids are painful and make regular activities feel like a chore. You do not have to revolve your life around hemorrhoid discomfort, nor do you need to suffer in silence — lasting relief from hemorrhoids is available to you.

If you have persistent, irritating hemorrhoids that don't seem to go away, no matter what you do, it may be time to think about hemorrhoid banding treatment. This fast, effective and painless procedure brings long-term results in little time.

At [CRH Medical Corporation](#), we are dedicated to helping patients find complete relief from hemorrhoids through the CRH O'Regan System.

If you're ready to learn more about the CRH O'Regan System, search our directory to [find a certified physician near you](#).

Thank you



Hemorrhoids can cause pain, itching, embarrassment and general discomfort. Although hemorrhoid symptoms can sometimes go away on their own or with over-the-counter treatment, they can also come back. For some patients, nothing seems to make hemorrhoids go away.

If you're suffering from stubborn hemorrhoids but don't want to get surgery, you might consider hemorrhoid banding. Hemorrhoid banding is fast, safe and effective. The CRH O'Regan technique, in particular, is more than 99% effective.

Not sure if hemorrhoid banding treatment is right for you? This guide can help you make the right choice. In this guide, we'll answer questions such as:

- What is hemorrhoid banding?
- What are the side effects?
- How long is the recovery time?
- Is hemorrhoid banding painful?
- Is this procedure worth it?

If you still have questions after reading this guide, we encourage you to contact a CRH O'Regan physician or reach out to us at CRH Medical Corporation.

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