Internal Hemorrhoid Non Surgical Treatment GI Clinic North Houston

Internal Hemorrhoid Non Surgical Treatment

INFRARED COAGULATION – Internal Hemorrhoid Non Surgical Treatment

New In Office Treatment – GI Clinic North Houston

Hemorrhoids Non Surgical Treatment Patient Education (pdf read...)

Hemorrhoids Non Surgical Patient Treatment – Technology (pdf read..)
Offer your patients relief from the bleeding and discomfort of internal hemorrhoids—right in your office, with a fast, safe, non-surgical procedure that’s easy to learn and use...

Patient-preferred modality
In more than 20 years of clinical experience, a majority of patients chose infrared coagulation over other hemorrhoid treatments. This non-surgical procedure can significantly shorten recovery time, allowing patients to return to normal activities almost immediately.

Safe and effective
Millions of patients with hemorrhoids have been treated with superior results. A paper by a leading practitioner has concluded that infrared coagulation is the "optimal nonoperative hemorrhoid treatment." Complications are rare, and there have been no reported incidents of sepsis or stricture.

State-of-the-art user-friendly technology
• Easy to learn and use—no extensive training required
• Takes only seconds to perform
• Instantaneous coagulation without smoke or odor—even in a wet field
• Less pain, fewer complications than rubber band ligation
• No disinfection required—eliminates cross-contamination

Affordable technology with a high return on investment
• Excellent reimbursement from Medicare and private insurers
• Simple quick procedure generates a high return on a very affordable initial investment

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Research – Internal Hemorrhoid
Clinical Applications – Optimal Nonsurgical Treatment of Hemorrhoids
Optimal Nonsurgical Treatment of Hemorrhoids: A Comparative Analysis of Infrared Coagulation, Rubber Band Ligation, and Injection Sclerotherapy

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Despite an abundance of nonsurgical hemorrhoid therapies, none has been consistently more efficacious. By combining data from multiple clinical trials in a meta-analysis, the present study compared the efficacy and complications of infrared coagulation, injection sclerotherapy, and rubber band ligation to determine the optimal nonsurgical hemorrhoid treatment. All published clinical trials comparing the three methods were identified by computer search and review of appropriate English language journals. Five trials studying 863 patients satisfied all inclusion criteria. Results demonstrated that similar numbers of patients were asymptomatic 12 months after treatment, regardless of initial therapy. However, significantly fewer patients undergoing rubber band ligation required additional treatment because symptoms had recurred. Although rubber band ligation demonstrated greater long-term efficacy, it was associated with a significantly higher incidence of posttreatment pain. In contrast, infrared coagulation was associated with both fewer and less severe complications. Thus, when all factors are considered, infrared coagulation may in fact be the optimal nonsurgical hemorrhoid treatment.

Numerous nonsurgical treatments have been proposed for the management of first-degree (nonprolapsing) and second-degree (prolapsing but spontaneously reducing) hemorrhoids. These include cryotherapy, laser therapy, bipolar diathermy, infrared photocoagulation, injection sclerotherapy, and rubber band ligation (1, 2). Despite a number of randomized comparative clinical trials, no single therapy has been shown to be consistently better (3-10). The absence of a clear advantage among the various modalities may indicate that they are equally effective. Alternatively, previous trials may have lacked sufficient statistical power to demonstrate any true differences. The problem of inadequate statistical power can be overcome by performing a meta-analysis—a statistical technique that allows for the combination of data from multiple clinical trials so as to pool their results (11). This study, using a metaanalysis, compares the therapeutic efficacy of infrared photocoagulation and injection sclerotherapy with rubber band ligation in the treatment of first- and second-degree hemorrhoids. Furthermore, we examine the complications of each therapy in order to determine the optimal method for the nonsurgical treatment of hemorrhoids.


REFERENCES

15. Goodisman SM. Have you ever meta-analysis you didn't like” Ann Inter Med 1991:114:244-5.
Hemorrhoids

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