

Haemorrhoidal Artery Ligation Operation (HALO)

Haemorrhoids are a common problem. Many patients can manage their symptoms with attention to diet or a topical treatment when symptoms are minor. For small internal haemorrhoids rubber band ligation can be an effective treatment. For larger haemorrhoids or where simpler treatments haven't been effective a **Haemorrhoidal Artery Ligation Operation**, HALO, may be recommended.

What does the procedure involve?

An enema is usually given an hour or so before the operation to clear the lower part of the bowel. The operation is usually performed under a general anaesthetic. During the operation the blood vessels feeding the haemorrhoids are identified using a special ultrasound probe. These vessels are then sutured to cut off the blood flow to the haemorrhoid.

Usually 3-4 vessels are found. The second part of the operation involves treating the prolapsing element of the haemorrhoid. Areas of haemorrhoidal prolapse are identified sutures are used to hold this up. This part of the operation is known as the **Recto-Anal Repair (RAR)**. The whole operation (HALO-RAR) takes around 45 minutes to complete. External skin tags, if present, are not routinely removed but many do shrink in size after the HALO-RAR procedure.

What are the risks?

There are small risks associated with any operation. Pre-operative assessments are made of any heart or lung conditions, as well as any coexisting medical condition. During the hospital admission patients wear stockings to prevent thrombosis (blood clots).

Bleeding can occur after any haemorrhoid surgery; most patients will notice small amounts of blood, particularly when they open their bowels. Usually this is a small amount but rarely it can be quite a lot, if that occurs patients must seek medical advice.

Infection is very rare; if patients develop increasing pain, fevers or flu-like symptoms they should seek medical advice.

What happens after the operation?

You may feel uncomfortable after the operation but this is far less than experienced by patients undergoing haemorrhoidectomy. You will have some local anaesthetic injected into the area; this will numb the pain for a few hours. The commonest feeling patients describe is a feeling of "being kicked in the bottom".

If the surgeon has placed a dressing pack in the anus this will be removed before discharge.

Patients are allowed to eat and drink as soon as they feel able.

Patients should be able to go home on the same day as the operation.
You will be given painkillers to take by mouth; you should take these regularly to prevent pain coming on.

It may be a little uncomfortable when you first open your bowels after the operation, it is important that you do not avoid going to the lavatory. Any discomfort will get better.
Patients are given a regular stool softener to take for 4-6 weeks and are advised to avoid straining.

For further information see our advice sheet *Caring for Yourself after Anal Surgery* which can be found within the Patient Information section of the Birmingham Bowel Clinic website.

Patients are encouraged to keep mobile after the procedure. They can normally return to normal activities including work and driving after about 48 hours but this may vary. They should avoid heavy lifting or increased physical activities for about 6 weeks.
Patients are normally reviewed in clinic around 6 weeks after the operation but they can be seen sooner if there are problems.

Birmingham Bowel Clinic 2011