



ORIGINAL RESEARCH PAPER

Surgery

A COMPARATIVE STUDY OF OPEN V/S CLOSED HEMORRHOIDECTOMY

KEY WORDS:

Hemorrhoidectomy, Milligan-Morgan's open hemorrhoidectomy, Ferguson's hemorrhoidectomy

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ABSTRACT

INTRODUCTION: Hemorrhoids are the one of the commonest diseases and found almost in 50% of people over the age of fifty. Open and closed hemorrhoidectomy are traditional techniques for hemorrhoids. Both techniques are fairly effective and having no serious drawback. So a comparative study of both techniques was planned to compare outcomes of hemorrhoidectomy as post operative pain and bleeding.

MATERIAL AND METHOD: The present study was conducted on 28 females and 52 males in Department of Surgery, Mahatma Gandhi Medical College & Hospital, Jaipur. A random sampling was done to divide the patients for undergoing Milligan-Morgan's open and Ferguson's closed techniques.

RESULT AND DISCUSSION: Post operative pain was observed slightly higher in closed hemorrhoidectomy while post operative bleeding was higher in open hemorrhoidectomy. A non-significant relationship was observed when both the groups were compared for both parameters.

CONCLUSION: It is concluded that open and closed both types of hemorrhoidectomies are simple, safe and effective methods for treatment of hemorrhoids.

INTRODUCTION

Haemorrhoids are the one of commonest diseases.¹ It is found in almost 50% of the people over the age of fifty, who suffer from the disease in some or other form.² Hemorrhoids play a significant physiologic role in protecting the anal sphincter muscles and augment closure of the anal canal during moments of increased abdominal pressure to prevent incontinence and contribute 15-20% of the resting anal canal pressure.³

Symptoms from hemorrhoids are similar to other diseases and the differential diagnosis should include anal fissures, rectal prolapsed, abscesses and fistulas and neoplasia. Pain generally indicates a process that is distal to the dentate line such as a fissure or thrombosed hemorrhoids. Bleeding is non-specific and can result from a fissure, polyps, inflammatory bowel diseases or cancer. Hemorrhoidal bleeding is common, but it is less common for patients with anemia.⁴

There are various methods for management of hemorrhoidal diseases are present including conventional close technique of Ferguson and open technique of Miligan and Morgan.^{5,6}

The present study was planned to compare the outcomes of both these hemorrhoidectomy techniques.

MATERIAL AND METHODS

The present study was conducted on 40 patients of each symptomatic internal and external hemorrhoids presenting with bleeding per rectum, admitted in Department of Surgery, Mahatma Gandhi Medical College & Hospital, Jaipur (Rajasthan).

An informed consent was taken from all the patients or their attendants who participated in the study after apprising them the nature and objective of study.

Simple random sampling was done to divide patients in two groups. Patients were randomly divided into two groups (Group-I and group-II) by allotting them number 0 1 to 80 serially. All patients with odd numbers were grouped in group I and underwent for open hemorrhoidectomy while the patients with even serial number were grouped in group II and underwent for close hemorrhoidectomy. Both the procedures were done under spinal anesthesia.

OBSERVATION TABLE

DISTRIBUTION OF SUBJECTS ACCORDING TO GENDER

S.No.	Gender	Closed	Open	Total
1	Male	13	15	28
2	Female	27	25	52

DISTRIBUTION OF SUBJECTS ACCORDING TO POST OPERATIVE COMPLAINTS

S.No.	Post Operative Complaints	Closed	Open	p-Value
1	Pain	16	08	0.088*
2	Bleeding	03	05	0.709*

*NS (non significant)

RESULT AND DISCUSSION

Post operative pain was observed slightly higher in closed hemorrhoidectomy. A non-significant relationship (p=0.088) was observed when both the groups were compared for post operative pain. While it was observed that post operative bleeding was higher in open hemorrhoidectomy. Post operative bleeding also showed a non significant relationship (p=0.709).

Arbman G⁷ et al in 2000 studied pain in term of visual analog scale in both groups and observed similar parameter for pain in both groups.

Randomized study done by Johanson⁸ et al in 2006 did not notice any difference in pain and complications in both procedures.

CONCLUSION

It is concluded that open and closed both types of hemorrhoidectomies are simple, safe and effective methods for treatment of hemorrhoids.

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