

Haemorrhoids and Anal Fissures in the Puerperium: Predictive Factors and Effective Treatments

The HAF Study

Caroline Brophy, Gillian A. Corbett, Rebecca Boughton,
Jacqui Clifford, Sophie McCarthy, Linda Kelly,
Myra Fitzpatrick, Ann Hanly, Laoise O'Brien



BACKGROUND

Although haemorrhoids and anal fissures affect over forty percent of women during pregnancy and the puerperium, there is very limited data on their natural course and effective treatment options, particularly in the puerperium. Although severe morbidity is not a feature, affected women can experience significant source of pain, discomfort and anxiety.

AIMS

This study's aim is highlight the incidence of HAF in pregnancy, describe its natural course and identify effective treatments, using this data to empower women and their healthcare providers to manage this condition effectively.

METHODS

A prospective observational study was performed on 184 consecutive antenatal patients over 34 weeks' gestation approached in the general antenatal clinics and inpatient wards (April to August 2021). Data was collected using anonymous patient surveys. The study was approved by the research ethics committee.

RESULTS

The incidence of self-reported HAF in pregnancy was 44.6%(82/184, 72 haemorrhoids, 10 anal fissures). 14.6%(12/82) occurred in the first trimester, 30.5%(25/82) in second trimester and 54.9%(45/82) in the third trimester. Resolution occurred within days in 45%(37/82), persisting for weeks in 26.8%(22/82) and months in 28%(23/82) of cases. 61% of patients assessed and managed the pathology themselves. Management was mainly conservative(76.8%,63/82) and medical(78%,64/82). Just one patient(1.2%) required surgical treatment. Most effective treatments include sitz baths, improved dietary fibre and fluid intake and Scheriproct.

Other topical agents were used by few patients with mixed efficacy (Preparation-H/Instillagel/Xyloproct/Proctasel).

Strategy	Treatment Option	N Used	N Found Effective (Efficacy Rate)
Conservative	Baths – Sitz salt baths	22	20 (91.5%)
	Improved Dietary Fibre	58	51 (87.9%)
	Improved fluid intake	63	55 (87.3%)
	Ice packs	15	12 (80%)
	Manual Reduction	34	24 (70.5%)
Medical	Scheriproct suppositories	17	15 (88.2%)
	Scheriproct topical	38	33 (86.8%)
	Anusol	27	21 (77.8%)
	Laxatives – Fybogel, Lactulose, Movicol	19	14 (73.7%)
	Simple Analgesia	24	16 (66.7%)

CONCLUSION

Haemorrhoids and anal fissures are a significant issue affecting half of pregnancies. Only 39% of women attended a healthcare provider for advice. There is a significant lack of evidence pertaining to the effective management of HAF in pregnancy. This study highlights the need for clarity and formal guidance on this very common condition of pregnancy.

