

eXroid Electrotherapy: a low risk treatment for all grades of internal haemorrhoids

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Purpose

Haemorrhoids can cause significant morbidity, and place a significant burden on the NHS. Low dose direct current electrotherapy is a NICE approved, out-patient based treatment option for haemorrhoids. This study aimed to prospectively analyse patients presenting to 10 clinics around the United Kingdom.

Methods

All patients undergoing electrotherapy treatment over 21 months were included in this prospective observational study. Patient demographics, haemorrhoid grade, disease duration, previous treatments tried, and complications/return to normal activity were captured via an online patient management system and subsequent patient questionnaire.

Results

812 consecutive patients (503 men, 309 women; median age 54yrs, range 18-96) were treated between March 2019 and November 2020, with confirmed grades 1-4 haemorrhoids, and including patients taking oral anticoagulants (including those taking warfarin with INR<3). >50% had used topical treatments and 28% had at least one previous intervention, including banding (137;17%), sclerotherapy (58;7%), Rafaelo (53;7%) and haemorrhoidectomy (53;7%). The commonest presenting symptoms were bleeding (65%), prolapsing (63%), swelling/soreness (49%) and itching (35%). 58% of patients (471) had had symptoms for >5yrs. Mean number of electrotherapy treatments/patient undertaken was 1.45. Treatment was well-tolerated, with 0% serious adverse events (SAEs), and with return-to-normal activity reported in <24 hours in >90% of patients returning their questionnaires (n=234).

Conclusions

Direct current electrotherapy treatment is a safe option for patients seeking treatment of haemorrhoids, irrespective of grade, and including those taking anticoagulants. It is associated with 0% SAEs, compared with the common treatment options of rubber band ligation and haemorrhoidal artery ligation, which have published SAEs of 1% and 7% respectively.

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