A pragmatic multicentre randomised controlled trial comparing stapled haemorrhoidopexy with traditional excisional surgery for haemorrhoidal disease: the eTHoS study

Angus JM Watson,^{1*} Jonathan Cook,² Jemma Hudson,³ Mary Kilonzo,⁴ Jessica Wood,^{3,5} Hanne Bruhn,³ Steven Brown,⁶ Brian Buckley,⁷ Finlay Curran,⁸ David Jayne,⁹ Malcolm Loudon,¹⁰ Ramesh Rajagopal,¹¹ Alison McDonald^{3,5} and John Norrie^{3,5}

¹NHS Highland, Department of Surgery, Raigmore Hospital, Inverness, UK ²Oxford Clinical Trials Research Unit, University of Oxford, Oxford, UK

³Health Services Research Unit, University of Aberdeen, Aberdeen, UK

⁴Health Economics Research Unit, University of Aberdeen, Aberdeen, UK

⁵Centre for Healthcare Randomised Trials, Health Services Research Unit, University of Aberdeen, Aberdeen, UK

⁶Sheffield Teaching Hospitals NHS Foundation Trust, Sheffield, UK

⁷Department of Surgery, University of the Philippines Manila, Manila, the Philippines

⁸Central Manchester University Hospitals NHS Foundation Trust, Manchester, UK ⁹Leeds Teaching Hospitals NHS Trust, Leeds, UK

¹⁰NHS Highland, Department of Surgery, Belford Hospital, Fort William, UK

¹¹Glan Clwyd Hospital, Betsi Cadwaladr University Health Board, North Wales, UK

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^{*}Corresponding author angus.watson@nhs.net

Plain English summary

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Plain English summary

aemorrhoids (or 'piles') are swellings of blood vessels inside the anus. Common symptoms include bleeding, pain, itch and swelling. Haemorrhoids are graded in severity based on symptoms and size, from grade I (small piles with mild symptoms) to grade IV (large piles and major symptoms).

Traditional surgery for haemorrhoids, called traditional haemorrhoidectomy (TH), involves removal of haemorrhoids and is generally used for larger piles. Newer surgical techniques have been created as a result of an increased understanding of haemorrhoids; the treatment stapled haemorrhoidopexy (SH) was conceived over 15 years ago. Its potential advantages include less pain and a quicker return to normal activities. In this study, we wanted to compare SH with TH.

Patients could take part in the study if they had grades II–IV piles and had not had surgery before.

In this study we randomly allocated patients to receive either SH or TH. During the course of the study we asked participants about their quality of life, symptoms, recurrence of their piles and if they received further treatment. We compared the results of the different operational procedures. Within the first 6 weeks after surgery, participants who had received SH had a better quality of life because they had less pain, but over 24 months, the TH group had better quality of life, fewer symptoms and fewer further procedures.

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