

Commissioning Statement:

Condition or Treatment:	Haemorrhoidectomy
OPCS Codes:	<p>H51 Excision of haemorrhoid</p> <p>H511 Haemorrhoidectomy H512 Partial internal sphincterotomy for haemorrhoid H513 Stapled haemorrhoidectomy H518 Other specified excision of haemorrhoid H519 Unspecified excision of haemorrhoid</p> <p>H52 Destruction of haemorrhoid</p> <p>H521 Cryotherapy to haemorrhoid H522 Infrared photocoagulation of haemorrhoid H523 Injection of sclerosing substance into haemorrhoid H524 Rubber band ligation of haemorrhoid H528 Other specified destruction of haemorrhoid H529 Unspecified destruction of haemorrhoid</p> <p>H53 Other operations on haemorrhoid</p> <p>H531 Evacuation of perianal haematoma H532 Forced manual dilation of anus for haemorrhoid H533 Manual reduction of prolapsed haemorrhoid H538 Other specified other operations on haemorrhoid H539 Unspecified other operations on haemorrhoid</p>
Background:	<p>Haemorrhoids are enlarged vascular cushions in the anal canal and may be external or internal. They are the commonest cause of rectal bleeding</p> <p>Definition of degrees of haemorrhoids:</p> <ul style="list-style-type: none"> • First grade: the haemorrhoids remain inside at all times • Second grade: the haemorrhoids extend out of the rectum during a bowel movement but return on their own • Third grade: the haemorrhoids extend out during a bowel movement but can be pushed back inside

	<ul style="list-style-type: none"> • Fourth grade: the haemorrhoid is always outside
Commissioning Position:	<p>NHS North Yorkshire CCG will only commission haemorrhoidectomy (and haemorrhoidopexy) in the following circumstances:</p> <ul style="list-style-type: none"> • Grade I or II haemorrhoids with severe symptoms which include bleeding, faecal soiling, itching or pain which have failed to respond to conservative management for 6 months • Grade III or IV haemorrhoids (i.e. prolapsed) <p>Treatment in all other circumstances is not routinely commissioned and should not be referred unless clinical exceptionality is demonstrated and approved by the Individual Funding Request Panel prior to referral</p>
Referral Guidance:	<p>Exceptional cases can be referred to the CCG's Individual Funding Request Panel for prior approval.</p> <ul style="list-style-type: none"> • HRW/SR GP Practices: https://ifryh.necsu.nhs.uk/ • HaRD GP practices: Referral Form
Effective From:	1 July 2021
Summary of evidence/ rationale:	<p>Grade I or II haemorrhoids may be managed by diet modification, use of laxatives or treated by topical applications. Interventional treatments include rubber band ligation, sclerosant injections, infra-red coagulation or bipolar electrocoagulation using diathermy.</p> <p>Treatment for Grade III and IV haemorrhoids include bipolar electrocoagulation using diathermy, stapled haemorrhoidopexy or haemorrhoidal artery ligation (IPG 525)</p> <p>There is some evidence of longer term efficacy of conventional haemorrhoidectomy over stapled procedure.</p> <p>Short term efficacy and cost effectiveness is similar.</p>
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Additional Information/References:

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