

MIRACLE Academy

قال تعالى (يَرْفَعُ اللَّهُ الَّذِينَ آمَنُوا مِنْكُمْ وَالَّذِينَ أُوتُوا الْعِلْمَ دَرَجَاتٍ)

تفريغ OTC
زميلتكم أنفال النعيمات



لجان الدفعات

Management of Hemorrhoids

Non-Prescription Drugs and Parapharmaceuticals

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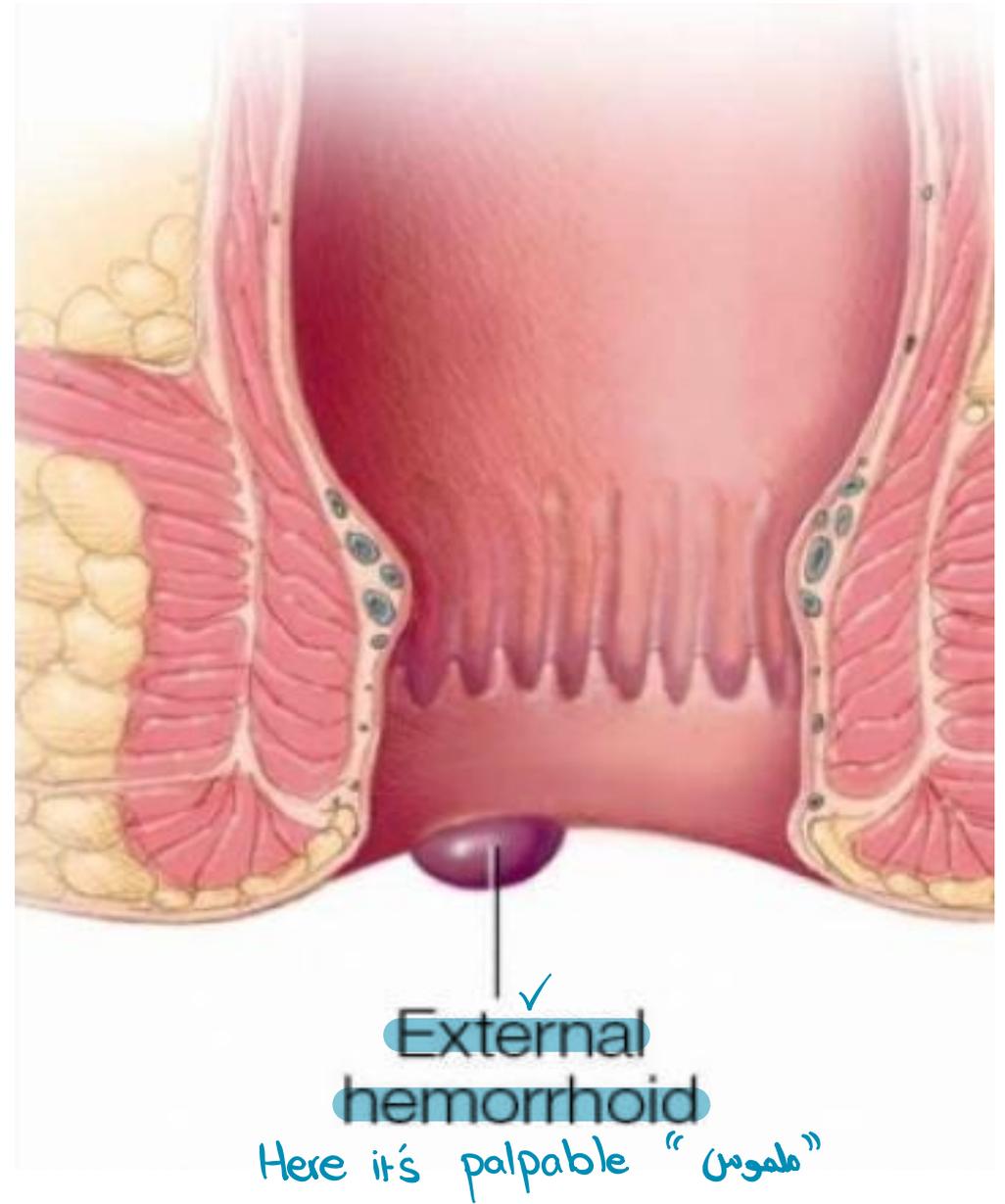
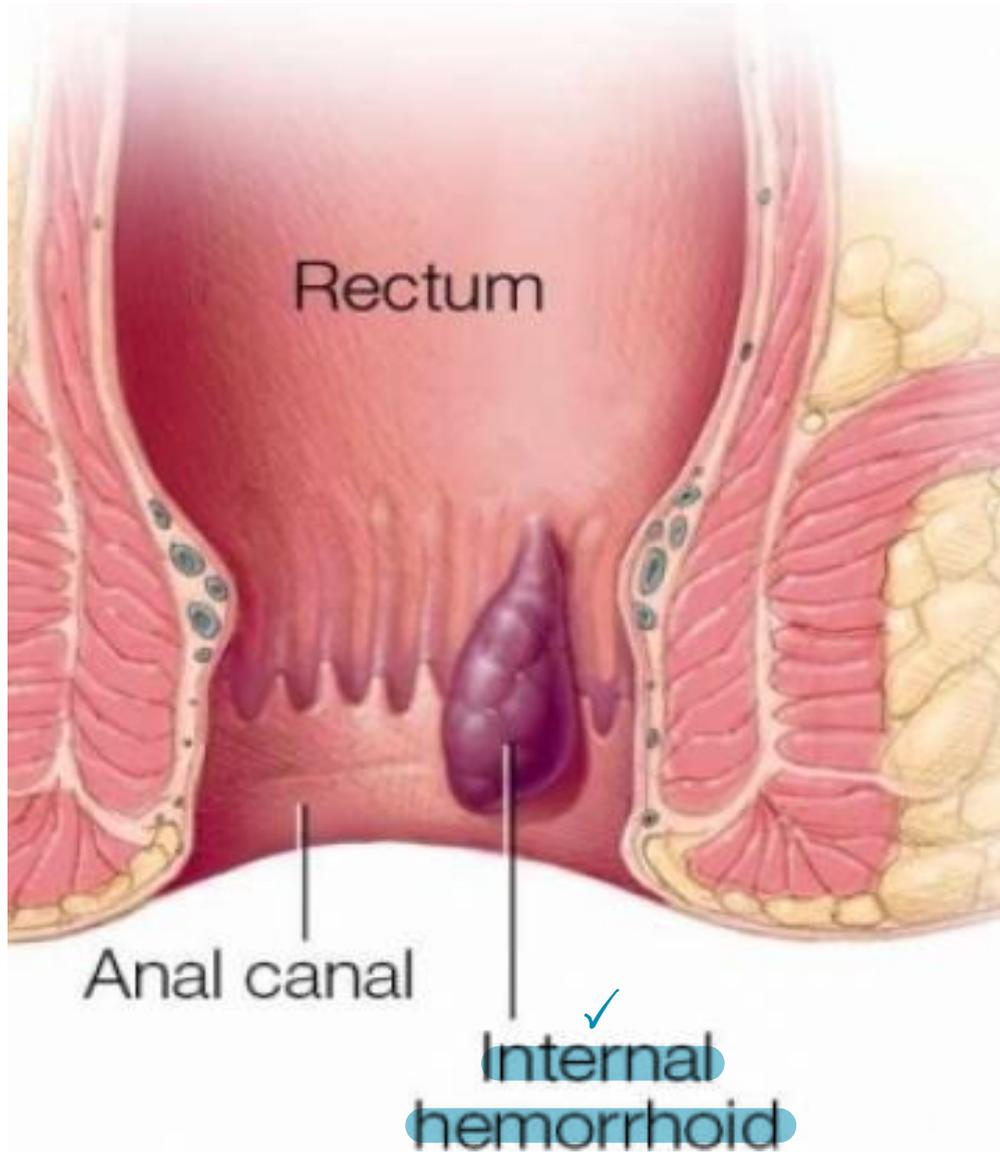
Definition

• **Alternative Names:** Rectal Lump, Piles.

• **Definition:** dilated or enlarged veins in the lower portion of the rectum or anus. *→ This dilation is usually painless UNTIL : 1 + 2*

1 • they may eventually bleed.

2 • Hemorrhoids may also become inflamed or may develop a blood clot (thrombus).



Classification

Haemorrhoids

Internal

Inside the rectum.
They are painless but tend to bleed.

النوع مع بعين

Prolapsing internal

An internal structure
has fallen down or
slipped out of place.

An internal
hemorrhoids will
convert into the
prolapsed when it
leaves the rectum
and start appearing
outside the anus

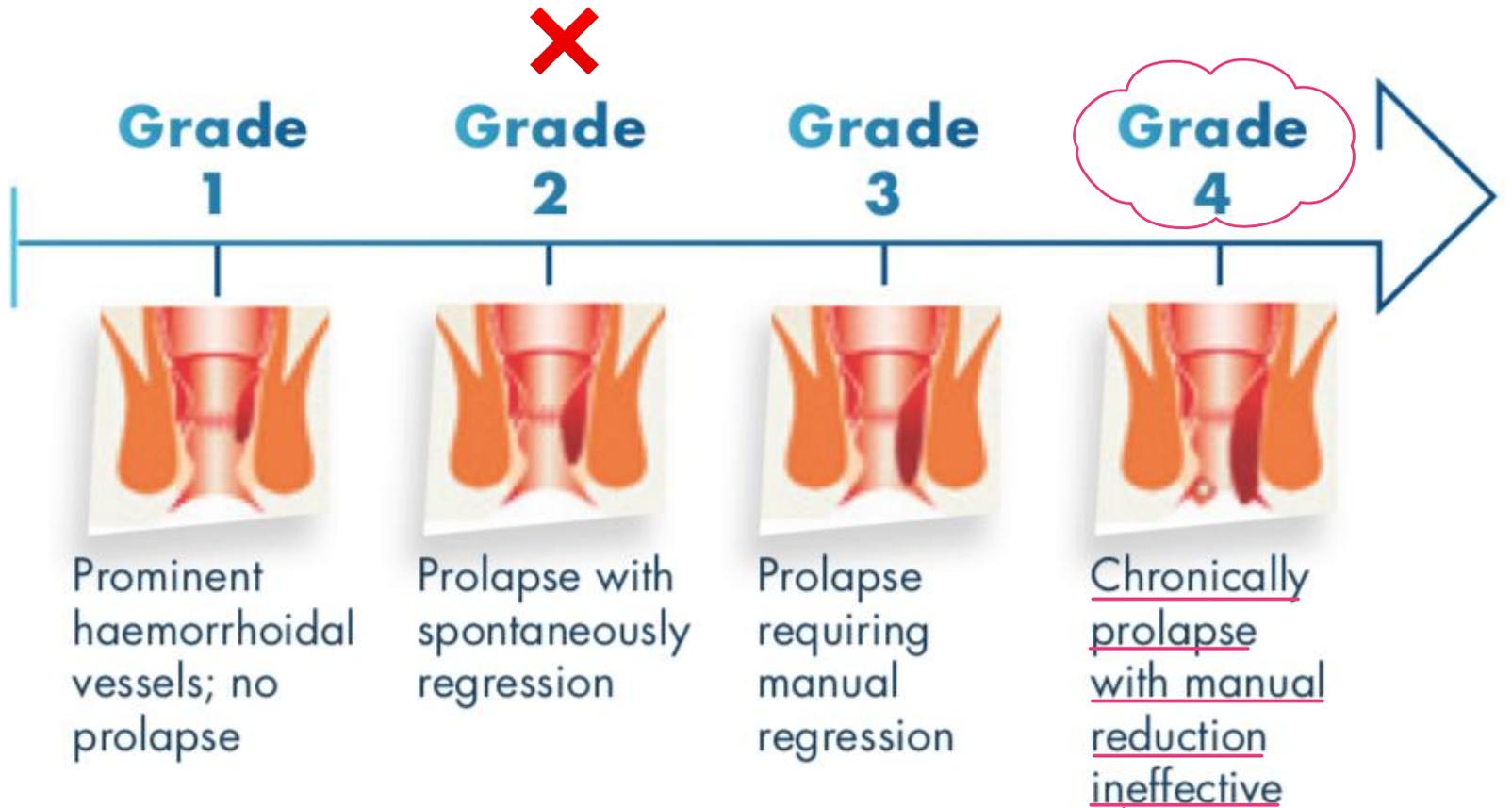
External

Outside the anus and
can be seen and felt.

It's easy for the patient once it's out, to push it back in.

→ Surgery / OTC Products / Conservative Treatment : *نحن ما رح نتطزمت الهمما* بتحكمننا كيف نعالجه ← في درجات منه

Internal hemorrhoids are graded based on the extent of prolapse:



↳ However, this grade is the most serious one.

Formation of hemorrhoids

Internal anal sphincter

External anal sphincter

Internal hemorrhoid

Pectinate line

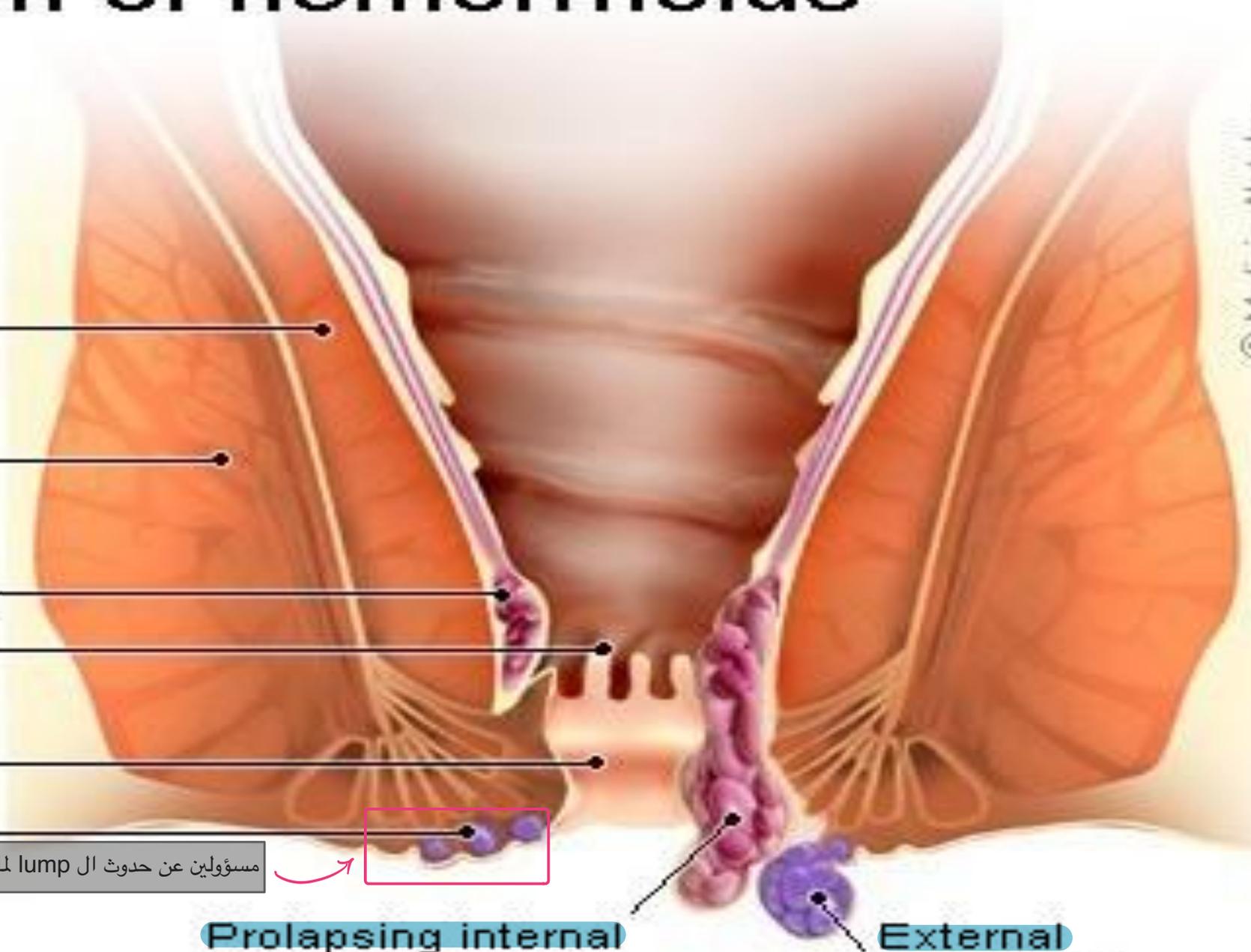
Anoderm

Perianal blood vessel

مسؤولين عن حدوث ال lump لما يتوسعوا.

Prolapsing internal hemorrhoid

External hemorrhoid



Epidemiology

- The risk of developing haemorrhoids increases with advancing age and peaks in individuals 45-65 years of age.
- The incidence of haemorrhoids in pregnant women is higher than that of non-pregnant women of similar age.

Hemorrhoids causes

1. ^{بشدت على حالت} Straining or applying pressure during bowel movements
2. Regularly lifting heavy objects
3. Obesity- This will increase the force of excretion of stool
4. Low fiber in diet- This condition will cause constipation
5. Age: Hemorrhoids are most common in people who have crossed the age of 45 to 65 years.
6. Chronic constipation: Straining to move stool puts additional pressure on the walls of the blood vessels.

Hemorrhoids causes

8. **Sitting for too long:** Staying in a seated position for long periods of time can cause hemorrhoids.
9. **Pregnancy:** They occur more commonly in pregnant women because, as the uterus enlarges, it presses on the vein in the colon, causing it to bulge
10. **Diet-** Eating too much spicy and oily food may increase the percentage for hemorrhoids development.

Significance of questions and answers-Duration and previous history

- the pharmacist might consider treating haemorrhoids of up to 3 weeks' duration.
- ✓ It would be useful to establish whether the patient has a previous history of haemorrhoids and if the doctor has been seen about the problem.

Significance of questions and answers-

Hemorrhoids symptoms

1. Painless **bleeding** during bowel movements .
2. Itching or irritation in anal region.
3. Discomfort in rectal area.
4. Swelling around anus due to inflammation of hemorrhoids.
5. Pain is unusual unless thrombosis involving external tissue is present.
6. Burning sensation in rectal while excretion.

الذلم غير شائع في حالات البواسير، إلا إذا حدثت جلطة دهوية في الدسنية الخارجية.

Self-care treatment of Hemorrhoids

Patient with complaints consistent with anorectal disorders (e.g., itching, burning)

Inquire about current medications/CAM therapies: intended uses, previous use, length/effectiveness of use. Obtain applicable medical history

Exclusions for self-treatment (see box)?

Patient pregnant or breast-feeding?

CVD, HTN, thyroid disease, DM, or difficulty urinating (enlarged prostate gland)?

Antidepressant use?

Recommend product for specific symptoms unless contraindicated. Counsel on diet, hygiene & bowel habits. Reevaluate in 1 week

- ### Exclusions for Self-Treatment
- ✓ Anorectal disorders, including hemorrhoids, in patients <12 years
 - ✓ Diagnosed GI diseases associated with colorectal bleeding: ulcerative colitis, Crohn's disease
 - ✓ Family history of colon cancer
 - ✓ Potentially serious anorectal disorder such as abscess/fistula/fissures, neoplasm or malignancy, polyps, or anorectal disorders previously diagnosed by PCP
 - ✓ Anorectal signs or symptoms such as acute onset of severe pain; bleeding; seepage; prolapse; thrombosis; black tarry stools; and moderate-to-severe itching, burning, inflammation, swelling, and discomfort
 - Minor anorectal symptoms that do not respond to 7 days of self-treatment

اتجاه غير طبيعي بين قناة الشرج والجلد بالمقرب فتحت الشرج وغالباً ما يكون ناتجاً عن عدوى في العذة الشرجية.
"PCP:"
Primary Care Provider

المريض اجا عم بشكي من حكة، حرقه (حرارة).

بسأله عن الأدوية الي بيأخذها أو اذا عم يستخدم علاجات الطب التكميلي وشو الهدف من استخدامها وكيف استخدمها آخر مره وشو الفترة الي مشى عليها وبسأله استفاد أو لا.

إذا كانت وحدة حامل بعطيها أدوية موضعية للبواسير، لكن إذا كان من الأفضل انها تستخدم أدوية internally بنعطيها منتجات فيها مواد واقية ماعدا الجليسرين

بسأل اذا عنده مشاكل في القلب، ضغط، مرض في الغدة الدرقية، سكري، صعوبة في التبول (تضخم البروستات)

Because we won't be able to use vasoconstrictor products

For example: Itching/ burning → inflammation → Anti-inflammatory agent of hemorrhoids. Key: CAM, complementary and alternative medicine; CVD, cardiovascular disease; DM, diabetes mellitus; GI, gastrointestinal; HTN, hypertension; PCP, primary care provider.

أول ما يس بدو برشح الحمام برشح مباشرة بدون تأجيل، وهاد الديو برشح يساعد في تخفيف ال Constipation يقلل من سبب حدوث ال

Haemorrhoids Treatment

- Aims of treatment :

- Relieve symptoms and ^{الحفاظ على السكون المرغوب} maintain remission.
- prevent complications.

- The treatment for hemorrhoids is different depending on the severity of the problem. Most of the time, the treatment is ^{علاج تحفظي} conservative and performed at home.

- **Treatment timescale** : If symptoms have not improved after 1 week, patients should see their doctor.

- In severe or persistent cases, there may be a need for surgical intervention, following assessment at the GP surgery

Non-pharmacological therapy

1. Soak regularly in a warm bath to relax the muscle and reduce the muscle tension and pain

2. Keep the anal area clean to avoid infection.

- + ✓ high fiber diet,
- ✓ avoid ignoring going to the restroom,
- ✓ avoid sitting for a long time,
- ✓ avoid straining,
- ✓ avoid (spicy, oily) food.

"OTC"

Non-prescription medication for hemorrhoids

- The FDA has identified several ingredients as safe and effective to alleviate burning, discomfort, inflammation, irritation, itching, pain, and swelling.
- These products are simply palliative; they are not meant to cure hemorrhoids or other anorectal disease.

مشابهة حالتها معك - يعني
Recurrency
- تكرار حدوث المرض -

Product selection guidelines

Knowledge of:

1. Type, location and severity of anorectal disorder.
2. Past medical history.
Recurrency
Other medical condition
3. Medications or allergies.
4. Ability to apply or insert medications
5. Other factors as diet and daily activity

Local anaesthetics

- Work by blocking nerve- impulse transmission.
- Safe and effective : (benzocaine) 5%-20%, (lidocaine) 2%-5% (e.g., Xylocaine) , and (tetracaine) 0.5%-1%.
- They relieve symptoms of pain, itching, burning, discomfort.
- Products should not be applied to ^{Broken} abraded skin as this will increase absorption systemically.

دکت هو اسم ولفه آخر لا lidocaine



Vasoconstrictors

- **Decrease mucosal perfusion by causing vasoconstriction** in the ano-rectal area after **topical application**.
- For temporary relief of itching, discomfort , and irritation.
- They are **structurally related to catecholamines** as ephedrine and phenylephrine.

Vasoconstrictors

- Patients with diabetes, thyroid disease, heart disease, hypertension, or enlarged prostate, as well as those taking antidepressants, antihypertensive agents, or cardiac medications, should not use hemorrhoidal agents with vasoconstrictors without first consulting their primary care provider.

بنكون خايفين من ال systemic absorption لهدول ال vasoconstrictors بالتالي رح نتفاقم الحالة (يرتفع الضغط، يرتفع مستوى السكر، يرتفع ال HR).

Protectants

- Provide a physical barrier, forming a protective coating over skin or mucous membranes.
- for temporary relief of itching, irritation, discomfort, and Burning..
+ they're helpful to prevent the development of any infection / inflammation.
- Products include aluminum hydroxide gel, lanolin, (external use only).
- Systemic absorption is minimal, thereby systemic adverse effects are uncommon.



Astringents

الها تأثير قابض



- **Lessen mucus and other secretions and protect underlying tissue** through a local and limited protein coagulant effect .
- ✓ They provide temporary relief of itching, discomfort , irritation, and burning.
- ✓ Products considered to be safe and effective include bismuth salts , witch hazel , (external use only) .

Topical steroids

"associated with inflammation"

- Hydrocortisone, in concentrations of no more than 1%, is the only corticosteroid approved for nonprescription use in anorectal preparations.
- ↓ Inflammation, ↓ swelling, ↓ itching and hence ↓ pain.
- The use of such products is restricted to those over 18. Treatment should not be used continuously for longer than 7 days.

Ingredient	Concentration per Dosage Unit (%)	Frequency of Use (Maximum Daily Dosage)
Corticosteroids Hydrocortisone	0.25-1	<u>Up to 3-4 times/day</u>



Counterirritants

- Counterirritants such as *menthol* are sometimes included in antihaemorrhoidal products on the basis that their stimulation of nerve endings gives a sensation of cooling and tingling, which distracts from the sensation of discomfort. *Menthol* and *phenol* also have antipruritic actions.



How to use OTC products

- Ointments and creams can be used for internal and external haemorrhoids and should be applied in the morning, at night and after each bowel movement.
- An applicator is included in some packs of ointments and creams, and patients should be advised to take care in use to avoid any further damage to the perianal skin.
- Suppositories can be recommended for internal haemorrhoids. A suppository should be inserted in the morning, at night and after bowel movements

حق لو كات خارجي بنعمو قامل + كريمات
لذات ممانك يوت داخلي وطلع لبنا
"prolapsed"

Follow the following methods for the prevention of hemorrhoids

- ✓ Dietary changes
- ✓ Drink more liquids and eat more leafy green vegetables, which will make stools bulkier and softer to relieve constipation.
- ✓ Some people with constipation or hard stools may benefit from increasing the amount of fiber in their diet.

Follow the following methods for the prevention of hemorrhoids

- ✓ Don't stop the urge الرجيئة في الذهاب للممام

If you feeling to go for toilet than immediately you should go, we should not avoid excretion and shouldn't ignore it.

Follow the following methods for the prevention of hemorrhoids

✓ Exercise

Doing exercise and maintain body health will reduce pressure on veins, which can occur with long periods of standing or sitting.

BUT, we have to avoid lifting exercises.

■ **Stool softeners**, If a **laxative** causes watery, runny stools, it could cause an infection in the anus and should not be used.

↳ Try to avoid them as much as possible & if ^{Constipation} needed try to choose laxatives that do not cause watery, runny stool (if possible).

Follow the following methods for the prevention of hemorrhoids

✔ Sitting restrictions

Sitting too long, particularly on the toilet, can increase the pressure on the veins in the anus.

PATIENT EDUCATION FOR Anorectal Disorders (continued)



Nonprescription Medications

- Anorectal products contain local anesthetics, vasoconstrictors, protectants, astringents, keratolytics, and/or analgesics/anesthetics/antipruritics. Select products containing only ingredients needed to relieve specific symptoms.
 - See Table 18-3 for guidelines for applying anorectal products.
 - See Table 18-4 for recommended dosages.
 - Use only selected vasoconstrictors (ephedrine and phenylephrine), protectants (not glycerin), and astringents (calamine and zinc oxide) inside the rectum.
 - Use only products approved for external use if patient is pregnant. If internal use is required, protectants with the exception of glycerin, may be used.
 - If patient has a history of cardiovascular disease, diabetes, hyperthyroidism, hypertension, or difficulty urinating due to prostate problems, avoid topical products containing vasoconstrictors.
 - If patients are taking medications to treat hypertension or depression, then avoid the use of any anorectal product containing vasoconstrictors without first consulting your primary care provider.
 - Anorectal products containing ephedrine sulfate or phenylephrine may cause nervousness, tremor, sleeplessness, nausea, and loss of appetite.
 - Appropriate use of anorectal products should reduce or relieve symptoms within a few days of self-treatment.
- Patient preferences should be considered, especially when specific products may be used to treat the same symptoms, when there is a choice between an ointment and a suppository, and when generic products are available.
-  Stop using the anorectal product and contact a primary care provider as soon as possible if insertion of a product into the rectum causes pain.
-  Contact a primary care provider if symptoms worsen, new symptoms such as bleeding develop, or symptoms do not improve after 7 days of self-treatment.
-  Certain people may develop allergic or hypersensitivity reactions to products containing recommended concentrations of approved ingredients. Discontinue product and contact a primary care provider as soon as side effects develop, such as a rash or increased itching, redness, burning, or swelling in the anorectal area.