

SHIP8 Clinical Commissioning Groups Priorities Committee

No. 40

Policy Recommendation: Management of Haemorrhoids

Date of issue: September 2018

The SHIP Clinical Commissioning Groups (CCGs) reviewed the evidence and received Consultant Clinician advice on the management of haemorrhoids and considered this according to the ethical framework.

The Committee heard that the majority of cases would resolve spontaneously with advice regarding diet and bowel habits. The Committee's consensus option was that the guidance proposed in the NHSE Evidence Based Interventions Consultation reflected good practice. Consequently the Committee recommends that:

- Surgical interventions for Grade 1 and 2 haemorrhoids should not be commissioned except where there is a coagulation deficit e.g. use of Warfarin or NOACs and the repeated bleeding is causing anaemia.
- Persistent grade 1 or 2 haemorrhoids which have not responded to dietary changes and conservative measures may be managed with banding or injections in an outpatient setting.
- Skin tags are considered cosmetic and removal is not routinely commissioned and will not normally be funded. Such skin tags should be considered in the context of a benign skin lesion and clinicians should refer to this policy for criteria for prior approval.
- Surgical removal of recurrent grade 3 or 4 haemorrhoids with persistent pain should be available with the most suitable procedure being decided by the surgeon.

Notes:

Whilst the panel recognised the considered expert advice of NICE in their recommendation the panel also had a duty to prioritise spending of a finite resource locally and made a decision which it felt gave the most equitable and effective use of investment.

Statement Review Date: September 2023

Whilst the panel recognised the considered expert advice of NICE in their recommendation the panel also had a duty to prioritise spending of a finite resource locally and made a decision which it felt gave the most equitable and effective use of investment