

HeLP®

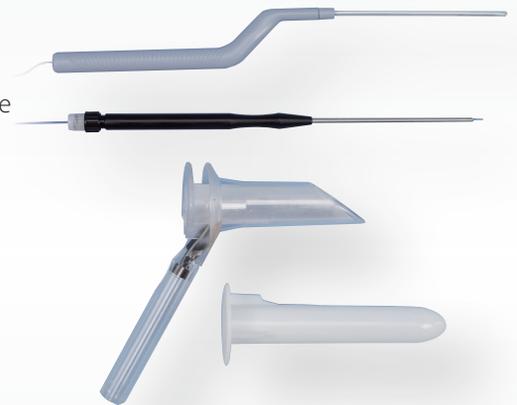
(Hemorrhoid Laser Procedure) – ambulatory for hemorrhoids

The perfect solution for patients fearing invasive painful surgical or semisurgical techniques in this delicate matter. This Hemorrhoid Laser Procedure, called HeLP®, is biolitec's innovation for painless treatment of hemorrhoids. The HeLP® Doppler probe identifies the branches of the superior hemorrhoidal arteries above the dentate line whereas the special HeLP® handpiece photocoagulates and closes the superior hemorrhoidal arteries. It is an ambulatory approach and serves you with a fast outpatient procedure.

It is surely the simplest among other techniques and does not comprise tissue removal, but only the closing of the artery, with no internal suture or stitches. Using the HeLP® Kit with disposable guidance Doppler probes and selective laser energy delivered by fiber optic handpiece, the hemorrhoidal arteries above the hemorrhoidal cushions are identified and treated accordingly.

The Benefits of HeLP®:

- Specially developed for simple and safe out-patient treatment of hemorrhoids
- Enables the use of a minimally invasive surgical procedure that is effective and precise
- Minimal side-effects and discomfort post treatment
- Faster post-operative recovery than surgical methods
- Anaesthesia or analgesia generally not required
- Excellent short- and long-term results
- Clinically proven, with high levels of patient acceptance and satisfaction



LITERATURE

Patients and methods: Terminal branches of the superior hemorrhoidal artery in the anal canal, if precisely identified through a Doppler signal, can be closed with the use of this laser. A specially designed proctoscope allows introducing a Doppler probe whose function is to identify hemorrhoidal arteries. Above the dentate line, the terminal branches of the superior hemorrhoidal artery are recognized through a clockwise rotation of the proctoscope and progressively photocoagulated through a laser optic fiber. The procedure does not require anesthesia and can be performed as an ambulatory treatment.

Results: Thirty patients (16 men) with second to third grade symptomatic hemorrhoids have been treated with the described technique. The procedure proved to be successful at 3 months' follow-up in 92% of cases. No major adverse effects or complications were reported. In two cases surgical hemostasis was necessary. Minor pain that required medication was reported in three cases.

Conclusions: The hemorrhoidal laser procedure (HeLP®) represents a new nonexcisional, mini-invasive treatment for patients suffering from second and third degree hemorrhoids without severe mucosal prolapse. Thermal occlusion of the hemorrhoidal arteries causes a progressive shrinkage of hemorrhoidal cushions. The procedure does not require anesthesia.

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