

**COMPARATIVE STUDY OF POST-OPERATIVE OUTCOMES OF
OPEN VERSUS CLOSED HEMORRHOIDECTOMY**

By

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ABSTRACT

Background and Objectives:

Hemorrhoids are specialized, highly vascularized cushions within the normal anal canal. Hemorrhoidectomy is considered as an effective treatment for III degree and IV degree hemorrhoids. The conventional Milligan-Morgan open hemorrhoidectomy remains the more commonly performed operation. Ferguson's closed hemorrhoidectomy has gained considerable attention because of the less pain, faster wound healing and better patient compliance. Nonetheless, randomized controlled trials have reported conflicting results regarding post-operative outcomes between two methods.

Aim of this study was to compare the post-operative outcomes following hemorrhoidectomy by the Milligan-Morgan's open and Ferguson's closed technique.

Methods:

This study was conducted with 60 patients who underwent hemorrhoidectomy, by dividing them into 2 equal groups. Group A underwent open hemorrhoidectomy and group B underwent closed hemorrhoidectomy. Post-operatively, patient in each group were studied in terms of post-operative pain, wound healing, bleeding, complications and length of hospital stay and the results were analysed and tested with statistical methods.

Results:

In our series of 60 cases, peak incidence was found at 46years of age and more common in males (5.67:1). Difference in pain between the 2 groups was found statistically significant (P value <0.05). 29 (96/67%) patients had completely healed wound from group B

(closed) at 3rd week compared to 5 (16.67%) from group B. 7 (23.3%) patients in closed group had complications, in contrast to 25 (83.3%) in open group. Mean hospital stay was 5.23 days for closed group and 6.23 days for open group.

Conclusion:

. In our study, we found that patients who underwent Ferguson's closed hemorrhoidectomy had less post-operative pain, bleeding, complications, early healing of wound and early back to routine work compared to Milligan-Morgan's open hemorrhoidectomy group.

Key words: Milligan-Morgan Hemorrhoidectomy, Ferguson Hemorrhoidectomy, Bleeding per-rectum, Anal Pain, Wound Healing.