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letter to the Editor

Digital photography in the treatment assessment of grade II-III haemorrhoids

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To the Editor - In the last years digital photography has become a powerful tool for physicians (1-3). Anyway, with the exception of some surgical specialities (4-5), to our knowledge digital photography has still not found a particular significance and practical role in general surgery. Relatively to our experience in coloproctology, the intent of this letter is to introduce the use of digital photography in the treatment assessment of grade II-III haemorrhoids.

Since January to December 2010, we diagnosed by anoscopy a condition of grade II-III haemorrhoids in 107 patients. After the visit, we sent patients home, inviting them to take a digital picture of the anal region immediately after defecation and to come back for a new control with the image. When indicated, we prescribed a medical therapy and invited patients to take the picture before starting and at the end of therapy. All patients provided informed consent to the administration and further analyses of data from their medical records.

After examining the pictures and new clinical status, we confirmed our diagnosis and the previous indication to treatment (rubber-band ligation or surgery) in 76 patients. In 17 cases, the inspection of the picture lead to modify the indication for treatment and patients candidated to ligation underwent stapled haemorrhoidectomy. In 9 cases, we confirmed the previous indication to ligation, but digital pictures better orientated or modified the site of ligation. Five patients previously candidated to surgery, had a good result from therapy and underwent ligation. In conclusion we asume that the use of "personal digital photography" immediately after defecation could be an interesting instrument in the correct approach to patients with grade II-III haemorrhoids, avoiding improper treatments.

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