

## Patient care information

# Rectal bleeding

#### Is blood in the stool a sign of a serious gastroenterological condition?

You should never have blood in the stool. If you encounter it, you should see a doctor straight away. Even if you have wiped too vigorously, you should ask yourself, why hasn't this happened before; why is it happening just now? It may be the case that something has changed in your gastro-intestinal tract.

If you have had a little fissure, like a little paper cut down there, most of the time, that's fine. If you have a hemorrhoid that doesn't bother you or bleeds on occasion, that's probably okay also but perhaps get it addressed properly. But what if that blood actually came from a little bit further inside? It could be colitis or specifically inflammatory bowel disease, perhaps some malignancy, the list is long. Some infections like shigella, campylobacter and E. Coli can lead to bloody diarrhea. Then there is diverticular disease, little pockets that form in the colon that get inflamed, bleed and give pain and fever.

There are lots of little or big things that it could be, but the important thing is not to ignore it. No blood is acceptable.



#### Is the colour of the blood important?

When you see blood, its colour is important. If it's bright red, it tells us it is most likely coming from the later end of the GI tract. Then the colour becomes darker until it is jet black, when the blood is coming from higher up because it has been digested. You might think it was a hemorrhoid, but unless you've had it checked, you won't know if it's something else.

Even if you have hemorrhoids, it's still important to exclude everything else in the colon because it may well be something more sinister further up.

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### For many, blood in the stool is an embarrassing matter. How do you reassure patients when they are wary of visiting you?

It's definitely not dinner conversation, but I get this all the time, especially from young women and men who are embarrassed, and they think they are facing a colonoscopy. But rest assured, my job deals with poo. Bowel habits are normal to us. Whatever you can say about your bowel function—the colour, shape, size, consistency, volume of your stool—will not be a surprise because I've heard it all before.

In addition to what you may say, I am also interested in what you may not be saying, perhaps because you are still too embarrassed to talk about it or think it may be a silly question. There are no silly questions and with everyone having access to the internet; everyone has googled their symptoms and most have the worst thoughts in their heads. I want to know what they are.

The more information you give me the faster I will be able to address your concern and solve your problem. There's nothing to be embarrassed about; there's no one better to talk to than a doctor because it's our job.

#### What advice do you have to help prevent or deal with this problem?

Depends on the diagnosis made but in everyday life, Diet and lifestyle are the only things you can really change.

If you want to stop hemorrhoids: first, don't get constipated, put more fiber in your diet. The toilet is not your library so don't sit too long looking at your phone—and don't push. There's only so much pressure you can take and your body can deliver a lot of pressure.

If you know you have hemorrhoids, there's a way to manage them and stop them from getting worse and they don't have to involve surgery; if you know you have diverticular disease, lots of fluid and fibre will keep them from getting "clogged" and keep divertculitis at bay; if you know you have a colitis, first; ensure you have a firm diagnosis. Dont assume it is IBS or something else and simply manage your diet. See your doctor. Some conditions need specific medical management. In short; don't assume you know what it is until you've been checked. The most important thing is to exclude the serious stuff and find out the cause of the blood.



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