International Congress on
Biological, Physical And Chemical Studies

International Congress on Biological, Physical And Chemical Studies - is an international conference platform under open open-access policy. The conference is led by international expert members who take an abjective approach to peer review, ensuring each research paper is reviewed, edited by authors and evaluated on its own scholarly merits and research integration. Publishing and joining on the procedding of the International Congress on Biological, Physical And Chemical Studies will exsure publishing experience and indexing possibilities on various global indexing.

Innovative Surgical Strategies for the Treatment of Complicated Hemorrhoids

Komilov Makhmud Abdurakhmon ugli
Samarkand State Medical University

Relevance. Hemorrhoidal disease remains one of the most common anorectal conditions worldwide, significantly affecting patients' quality of life. Complicated forms, including thrombosis, massive bleeding, and irreducible prolapse, often require surgical intervention. However, conventional hemorrhoidectomy techniques are frequently associated with intense postoperative pain, complications, and prolonged recovery. Therefore, the development and implementation of improved surgical techniques that offer better outcomes with less morbidity is an urgent priority in modern coloproctology.

Materials and Methods. A comparative clinical study was conducted involving 114 patients with Grade III–IV complicated hemorrhoids. The main group (59 patients) underwent an improved hemorrhoidectomy technique under local anesthesia, emphasizing minimal tissue trauma and enhanced wound management. The control group (55 patients) received standard Milligan-Morgan hemorrhoidectomy under spinal anesthesia. Postoperative outcomes including pain intensity, complication rates, healing time, and hospital stay were analyzed.

Results and Discussion. The improved technique resulted in significantly lower complication rates (0% vs. 5.5% in the control group), reduced postoperative pain levels, and shorter hospital stays (11.1 ± 15.8 h vs. 32.9 ± 26.1 h). Patients in the main group showed faster recovery and higher satisfaction. Both groups demonstrated high treatment efficacy and no recurrence during the 6-month follow-up. The improved approach thus offers substantial advantages in terms of postoperative comfort and rehabilitation.

Conclusion. The use of an improved surgical technique for complicated hemorrhoids significantly enhances treatment outcomes by reducing complications, minimizing pain, and accelerating recovery. These findings support the broader implementation of the modified approach in clinical coloproctology and suggest its potential to become a new standard for treating advanced hemorrhoidal disease.