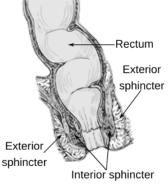
### Last "Butt" Not Least: Herbal/Nutritional Proctology David Winston, RH(AHG) ©2025

Proctology is the branch of medicine that treats diseases and problems of the anus, rectum and large intestine. Common conditions that proctologists (colorectal surgeons) treat include hemorrhoids, anal fissures, Crohn's disease, colon polyps, colorectal cancer, constipation, rectal prolapse, diverticulitis, rectal spasms, ulcerative colitis, fibrosing proctitis, and IBS (gastroenterologists also often treat Crohn's disease, diverticulitis, ulcerative colitis and IBS). In this paper we will focus on diseases/ conditions of the rectum and anus and for more information on IBS, IBD, diverticulitis or constipation I would refer readers to my paper on Herbal/Nutritional Gastroenterology (Winston, 2024). The rectum and anus are the most distal part of the large intestine. The rectum is a muscular tube that measures 5-6" long and acts as a repository for stool from the colon. When the rectum is full it triggers nerves that cause an urge to have a bowel movement. The anus is the opening at the end of the rectum that has two sphincters (internal and external anal sphincters) that keep stool in the colon until it is time to defecate.



**Hemorrhoids** 

### What are hemorrhoids and what causes them?

When the venous drainage of the anus is impaired, the resulting anal/rectal venous congestion can cause swelling of the anal mucosa and hemorrhoids. Studies suggest that in chronic hemorrhoidal disease there is decreased Fibulin 3 and 5, which are elastic proteins that are essential for healthy anal cushion connective tissue (Zhou, et al, 2023). In addition, there are elevated matrix metalloproteinase (MMP) levels. MMPs play an important role in extracellular matrix degradation. Elevated levels of these proteins interfere with normal, reparative and remodeling processes in the anal canal (Zhou, et al, 2023). Hemorrhoidal tissue also has increased levels of endothelial nitric oxide synthase (eNOS) and nitric oxide, which results in vascular dilation and varicosities, elevated VEGF and VEGFR2, which promote increased angiogenesis, local mast cell activation and higher levels of pro-inflammatory compounds such as COX-2, TNF-q, IL-6, IL-8, IL-1β and IFN-y (Zhou, et al, 2023). In humans the anus is approximately 4cm long and midway between each end is the dentate line. Hemorrhoids that develop above (proximately) the midpoint are "internal hemorrhoids" and those below (distal) are external hemorrhoids. Internal hemorrhoids are painless, as they have few nerve endings, but can bleed, while external hemorrhoids can cause itching, bleeding and anal pain. The exact etiology of hemorrhoids is poorly understood but causative factors include constipation with straining, pregnancy, prolonged sitting, regular heavy lifting, obesity, chronic diarrhea, chronic coughing (which increases intra-abdominal pressure), anal sex, pelvic floor dysfunction with the displacement of anal cushions, poor vascular integrity, cirrhosis with ascites and a low fiber diet. Many hemorrhoids are asymptomatic, so the frequency is unclear.

In a study of patients undergoing colonoscopy 38% were found to have hemorrhoids, but of those 55% reported no symptoms (Riss, et al, 2012). People between the ages of 45-65 years old have the highest prevalence of hemorrhoids.

Orthodox treatment of hemorrhoids initially involves "conservative treatment" with a high-fiber diet (25-35g/day), fiber supplements, stool softeners, increased water intake and sitz baths. Topical (rectal) analgesics (such as nifedipine) may also be prescribed. If this treatment is not effective, then office-based surgical procedures such as rubber band ligation or infrared photocoagulation are commonly recommended. The rubber band ligation has been shown to have better long-term success, while the infra-red photocoagulation offers quicker pain relief (Mott, et al, 2018). For severe hemorrhoids (Grade III or IV), a hemorrhoidectomy surgery is used. This procedure often causes significant post-surgical pain, a longer recovery period and the possibility of post-surgical complications. Another technique is Ligasure<sup>tm</sup> which uses diathermy, reduces blood loss and post-operative pain (Nienhuijs & de Hingh, 2009).

### Herbal Treatment of Hemorrhoids

The herbal treatment of hemorrhoids has several components. First it is essential to identify the underlying issues causing the hemorrhoids. Constipation is a likely culprit, relieving constipation and softening the stool is a first step.

<u>Relieve constipation</u> – using soluble fiber (psyllium seed, flax seed, chia seed, sterculia), prune juice, magnesium oxide/citrate, bitters, aperients, Triphala, kiwi fruit. To soften the stool herbs such as Slippery Elm, Marshmallow and Butternut bark can be effective.

Secondly, it is important to enhance vascular integrity and inhibit inflammation using flavonoid-rich herbs/foods such as Amla, Hawthorn, Blueberry, Rose Hips, Goji Berry, Rosemary, Green Tea, etc.

In addition, relieving pelvic congestion using sitz baths, squatting and herbs such as Horse Chestnut, Ocotillo and Butcher's Broom are an important part of the treatment protocol.

If there is bleeding due to hemorrhoids the following herbs can be used topically and orally to help control it – Tienqi Ginseng, Yarrow, Shepherd's Purse, Witch Hazel.

### **Specific Herbs and Supplements for Hemorrhoids**

<u>Alpha lipoic acid (ALA)</u> – in a preliminary RCT, patients with stage II or III hemorrhoids were given either ALA (200 mg/day) or no treatment for 12 weeks. After the completion of the study, participants taking the supplement had significant reductions in hemorrhoid pain, itching and bleeding, as well as reduced inflammatory markers, such as C-reactive protein and total leucocytes (Sabonovic, et al, 2019).

Dose: 200mg BID

<u>Aromatic Collinsonia leaf, flower, root (Collinsonia canadensis)</u> – was used by the Eclectic physicians for tissue that has lost tonicity with engorgement or edema. It is used to treat BPH, mild mitral valve prolapse, allergic rhinitis, varicose veins and hemorrhoids. It is most effective for hemorrhoids of a recent origin (1 year or less). It can be combined with Horse Chestnut or Ocotillo. The most effective preparation is a fresh tincture of the leaf, flower, stem and root known as Aromatic Collinsonia. Collinsonia is very drying and can worsen constipation, so use small amounts in a larger formula and include yin tonics.

Tea: 1 tsp. dried root/herb, 10 oz. water, decoct 15 minutes, steep covered for 40 minutes take 2-4 oz. 3x/day (the tincture is far better than the tea). Tincture (1:2): .5-1 mL TID/QID

**Box Elder twigs (Acer negundo)** – while I have no experience using the Box Elder twigs, I found an account of their use in the Eclectic Medical Journal. The physician who wrote the report used a tincture made of the dried green twigs. He stated he had used them repeatedly for treating hemorrhoids and found this preparation superior to Collinsonia or Horse Chestnut. Tincture (1:5): 1-2 mL TID

**Butcher's Broom rhizome (Ruscus aculeatus)** – is a European herb used to strengthen the vasculature. It is often used in formulas for treating varicose veins, chronic venous insufficiency and spider veins. It works as an alpha-adrenergic agonist increasing vasoconstriction and improving endothelial function and peripheral vascular function. It can be combined with Horse Chestnut, Collinsonia or Figwort for treating hemorrhoids. Avoid use in people with hypertension. Tincture (1:5 or 1:4): 2-3 mL (40-60 gtt) BID/TID Standardized extract (10-15% saponins): 100 mg twice per day Proprietary extracts: 1 capsule or tablet BID

<u>Chebulic Myrobalan (Terminalia chebula)</u> – is one of the 3 ingredients in the classic Ayurvedic formula Triphala. It has been used as a stand-alone remedy for treating hemorrhoids in traditional Persian medicine (TPM). In a RDBPC trial, patients with hemorrhoids were given the herb or a placebo in capsules for four weeks. The patients receiving the Chebulic myrobalan had significant reductions in pain and hemorrhoid size, as well as reduced constipation compared to the placebo group (Andarkhor, et al, 2019).

Tea (Infusion): 1 tsp. dried, powdered fruits, 8 oz. hot water, steep 15-20 minutes, take 4 oz. TID Tincture (1:5), 30% ETOH, 10% Vegetable Glycerin (rarely used as a tincture)

**Fiber supplements** – fiber supplements act as bulk laxatives and can help prevent or enhance treatment of hemorrhoids by relieving one of the underlying causes – constipation with straining. Multiple studies show that taking Psyllium daily helped reduce hemorrhoidal bleeding, hemorrhoidal congestion and the need for hemorrhoid surgery (Garg, et al, 2017; Murshid, 1997, Perez-Miranda, et al, 1996).

**Figwort leaf or root (Scrophularia marilandica)** – in old English, a "fig" was a slang term for large, red, bleeding hemorrhoids, while wort meant plant, so the name Figwort means large, red, hemorrhoid plant. The herb is often combined with Collinsonia, Horse Chestnut, Wintergreen or Witch Hazel to treat large, painful or bleeding hemorrhoids.

Tea (Infusion): 1 tsp. dried herb, 8 oz. hot water, steep for 1 hour, take 4 oz. 3-4x/day Tea (Decoction): 1 tsp. dried root, 10 oz. water, decoct 10-15 minutes, steep 40 minutes, 4 oz. TID Tincture (1:5): 1-2 mL (20-40 gtt.) TID/QID

**Flavonoid-rich supplements** – numerous supplements high in flavonoids have been shown to reduce hemorrhoidal symptoms by improving vascular integrity, pelvic circulation and reducing inflammation. Pycnogenol® has been shown in clinical trials to reduce 3<sup>rd</sup> and 4<sup>th</sup> degree post-partum hemorrhoid symptoms compared to orthodox treatment (Belcaro, et al, 2014) and acute hemorrhoid flares when used orally and topically (Belacaro, et al, 2010). A flavonoid mixture (diosmin, troxerutin, rutin, hesperidin and quercetin) reduced hemorrhoidal symptoms and bleeding after 1 and 6 months (Corsale, et al 2018) and a combination of micronized flavonoids, mixed with vitamin C, Gotu Kola, Bilberry and grape seed extract was given to patients with stage I or II hemorrhoids for one week. After this short treatment 89.8% of the treatment group had a reduction of hemorrhoid severity by at least 1 grade (Gravina, et al 2021).

<u>Gotu Kola (Centella asiatica)</u> – is used orally and topically for tissue that is red, hot or inflamed. In addition to its anti-inflammatory activity, it also enhances circulation. It has been used to treat hemorrhoids, varicose veins and decubitus ulcers. In a RCT, Centella was superior to conventional treatment of patients who had undergone a hemorrhoidectomy, reducing bleeding, pain and speeding healing (Chiaretti, et al, 2021).

Tea (Infusion): 1-2 tsp. dried herb, 8 oz. hot water, steep covered 45 minutes, take 4 oz. 3x/day Tincture (1:2): 1.5-2 mL (30-40 gtt.) TID

<u>**Gum Guggul (Commiphora mukul)**</u> – in Unani-Tibb medicine, this gum resin is used to treat hemorrhoids. In a RCT, patients with 1<sup>st</sup>-2<sup>nd</sup> degree hemorrhoids and constipation were given Gum Guggul resin, 3 g/day (dose form unstated) or standard treatment of lactulose and an anti-hemorrhoidal suppository for 4 weeks. The patients receiving the herb had more significant reductions in constipation, hemorrhoid size, rectal pain, flatulence and dyspepsia (Yousefi, et al, 2013). Tea (Decoction): 1 tsp. powdered dried resin, 10 oz. water, decoct 20 minutes, steep covered 1 hour, take 4 oz. 3x/day Tincture (1:4 or 1:5): 1-2 mL (20-40 gtt) TID Capsules (standardized to Guggalsterones): 100-500 mg TID

<u>Horse Chestnut fruits (Aesculus hippocastanum)</u> – is used in Europe to strengthen and tonify veins, capillaries and arteries. It enhances peripheral circulation and relieves venous stasis that can cause varicose veins and hemorrhoids. I use it in small amounts along with Collinsonia, Figwort or Witch Hazel to treat recent or chronic hemorrhoids. In Europe, extracts from Horse Chestnut (Aescin/escin) are used topically to treat hemorrhoids as well.

Tincture (1:2): .25-.75 mL (5-15 gtt.) TID

Capsules: A standardized product (16-20% Escin) has been used in several studies with a dose of 300 mg of the extract every 12 hours.

**Ocotillo stem bark (Fouquieria splendens)** – is a Southwestern plant used to treat pelvic stagnation. It can be used as part of a formula for pelvic fullness syndrome, uterine fibroids, portal hypertension, BPH or hemorrhoids. As a treatment for hemorrhoids, it works best in people with a constant sense of pelvic fullness, a feeling like you are sitting on a ball, or enlargement of the pelvic lymph nodes. Tincture (1:2): 1.5-2.5 mL (30-50 gtt.) TID/QID

<u>Wintergreen leaf (Gaultheria procumbens)</u> – has analgesic, anti-inflammatory, astringent and diuretic effects. It is useful for urinary tract infections, bacterial prostatitis or GU inflammation with dull, aching pain. The Eclectic physicians also used it for treating large, purple painful hemorrhoids caused by impaired pelvic circulation or constipation, with sacral or lumbar pain. It can be combined with Ocotillo, Figwort and Horse Chestnut.

Tea (Infusion): 2-3 tsp. dried leaf, 8 oz. hot water, steep covered for 40 minutes, take 2-3 cups/day Tincture (1:2): 1.5-2 mL (30-40 gtt.) TID-QID

Witch Hazel bark or leaf (Hamamelis virginiana) – is commonly used topically to treat hemorrhoids. The tincture can also be used internally, and is used along with Horse Chestnut, Amla, Hawthorn or Goji berry to tonify veins, capillaries or arteries. A combination of Hamamelis, Collinsonia and Horse Chestnut can offer significant benefits for hemorrhoids of a recent origin. Tea (Infusion): 1/2 tsp. recently powdered dried bark\*, 8 oz. hot water, steep covered for 40 minutes, take 4 oz. 3x/day

Tincture (1:2 or 1:5): 1-2 mL (20-40 gtt.) TID/QID

## **Topical Applications for Hemorrhoids (as well as for anal fissures)**

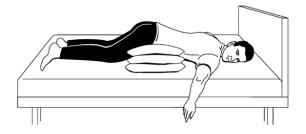
Many herbs can be used in sitz baths, ointments or suppositories to relieve hemorrhoidal pain, itching, bleeding and to shrink engorged tissue. As mentioned in the materia medica for hemorrhoids, Pycnogenol<sup>®</sup>, Gotu Kola, Horse Chestnut and Witch Hazel are commonly used topically as well as orally. Other local applications that have been shown to help alleviate and speed healing of hemorrhoids include Myrtle (Myrtus communis) cream (Malekuti, et al, 2019), Eggplant cream (Donmez, et al, 2020), Leek cream (Mosavat, et al, 2015) and Yarrow cream (Mahmoudi, et al, 2023). In a RDBPC a proprietary cream made from Leeks, Gum Guggul, and Sesame oil was found to reduce anal irritation, bleeding, and pain in people with hemorrhoids (Mehdi, et al, 2021). Rudolf Weiss, MD, felt that cool, wet compresses made from Arnica tincture (1-2 tsp. per ½ liter of water) was highly effective for acute hemorrhoidal inflammation. He also used Oak bark decoction or a Chamomile infusion as compresses. This was followed up with a Witch Hazel ointment (Weiss, 2001). In the 1970's I learned an interesting treatment for hemorrhoids from William LeSassier:

**Potato (Solanum tuberosum)** – the common potato can actually be of significant benefit for treating internal hemorrhoids. A small piece (the size of the last 2 joints of your little finger) of the raw potato is inserted into the rectum before bedtime and then excreted when you defecate the next day. The potato suppository helps reduce irritation, swelling and bleeding.

Most rectal suppositories are made in a cocoa butter base (solid when refrigerated, but it melts at body temperature). Many other vulnerary, anti-inflammatory, astringent or analgesic herbs can be added to the cocoa butter base, including Calendula, Plantain leaf, Aloe gel, Chickweed, St. John's wort, Comfrey leaf or Turmeric, and a few drops of Lavender EO can also be beneficial.

# **Exercises for Hemorrhoids**

Butt-ups are an exercise that was taught to me by Dr. Daniel Jass, MD, a former student of mine and an excellent family practice physician. Get ready for bed, take care of everything you need to do so that once you get into bed, you can stay there. Place 3 regular pillows on the bed where your pelvis will rest. Lay face down with your pelvis on the pillows, your face and feet will be touching the bed, and your pelvic region will be elevated. Stay in this position for 10 minutes. When the time is up, roll over, rearrange the pillows without sitting up and read, or go to sleep. This drains the pelvic region and then for 7-8 hours gravity is not pooling blood in the anal mucosa and veins. This should be done every night, and I have had patients report back that over several weeks long standing hemorrhoids have shrunk and, in many cases, disappeared. Continue this once they have resolved as a preventative therapy, it works!



### **Post-Operative Rectal/Anal Pain**

There are situations where herbal or orthodox conservative treatment is ineffective, and a patient needs anorectal surgery for severe hemorrhoids, anal fissures, anal fistulas or perianal abscesses. Studies show that 65% of these patients experience moderate to severe pain after anorectal surgery (Li, et al, 2023). In a meta-analysis of RCTs of people undergoing anorectal surgery, TCM practices including acupuncture, sitz baths, anal fumigation (steaming) and the use of herbs were shown to help speed healing, and reduce pain and opioid use (Li, et al, 2023). Even simple warm water sitz baths have been found to help relieve post-hemorrhoidectomy pain (Liao, et al, 2024). Medicated sitz baths using 2 formulas (Qingre Zoshi Zhi Tong\* immediately after surgery and then switching to Yiqi FuZhang \*\* after the early healing stage) significantly improved wound healing, pain and edema in patients after anal fistula surgery (Du, et al, 2022). A medical fumigation using a Chinese formula, Hu Huang Burn Liniment, was shown to significantly reduce inflammatory markers (MMP-9, IL-10), speed healing, reduce pain, edema and exudates after hemorrhoidal surgery (Sha, et al, 2022). This product contains Safflower, borneol, Senecio, Du Huo, water Buffalo horn, Huang Bai, Huang Qin and Japanese Knotweed.

\*\*Yiqi FuZhang contains 30 g. Sophora, 15 g. White Peony, 6 g. Licorice and 15 g. Sepiella/Cuttlefish, which promotes healing, the elimination of pus and toxins and improves circulation.

### **Rectal Spasms**

<u>Acute Rectal Spasms (proctalgia fugax)</u> – can be very uncomfortable, they can occur without warning, cause intense rectal pain, occasionally loss of bowel control and last from seconds to minutes. The spasm is caused by cramping of the pelvic floor muscles, anal sphincter muscles or rectal muscles. A more chronic condition, Levator syndrome (Levator ani syndrome), can last for several days at a time and is felt higher in the pelvis than proctalgia fugax.

The cause of either condition is unknown but chronic stress is seen as a predisposing factor. Other triggers for rectal spams include orgasm, constipation with straining, excessive peristalsis and menses. Another potential underlying factor is magnesium deficiency. In several studies, up to 68% of Americans do not get adequate magnesium or are magnesium deficient (Workinger, et al, 2018; King, et al, 2005). Diagnosing hypomagnesia is difficult, as serum magnesium levels do not reflect tissue levels. Symptoms of hypomagnesia can include muscle spasms (including rectal spasms), bruxism, hypertension, anxiety, venospasm, torticollis, bladder spasms, cardiac arrythmias and menstrual cramps.

### Herbs and Supplements for Rectal Spasms

<u>Cyperus tuber/Xiang Fu (Cyperus rotundus)</u> – is used in TCM for pain and spasm in the stomach, large intestine, small intestine, rectum, uterus, bladder or testes. It combines well with Horse Chestnut, Kava, Kudzu or Silk Tassel.

Tea: 1 tsp. powdered, dried tubers, 8 oz. water, decoct 10-15 minutes, steep covered 1 hour, take 2 cups/day

Tincture (1:5), 50-60% ETOH Dose: 2-3 mL (40-60 gtt.) TID/QID

Extract granules (5:1): 1 g., once per day mixed in water

<sup>\*</sup>Qingre Zaoshi Zhi Tong contains 20 g. Chinese Coptis, 20 g. Phellondendron, 12 g. Gentiana macrophylla, 12 g Atractylodes chinensis, 20 g Talc, 30 g. Sophora, 15 g. White Peony and 6 g. Licorice. This formula clears damp heat, drains dampness and removes toxins.

<u>Horse Chestnut seeds (Aesculus hippocastanum)</u> – have analgesic, anti-inflammatory, antispasmodic and circulatory enhancing activity. It is commonly used to treat hemorrhoids, rectal irritation, proctitis and rectal spasms. For rectal spasms I frequently combine it with Cyperus, Platycodon or Kava.

Tincture (1:2), 60% ETOH Dose: .25-.75 mL (5-15 gtt.) TID

Capsules: A standardized product (16-20% Escin) has been used in several studies with a dose of 300 mg. of the extract every 12 hours.

<u>Kava root (Piper methysticum)</u> – has significant antispasmodic activity and can help relieve rectal, bladder or vaginal (vaginismus) spasms. I use it with Horse Chestnut, Cyperus and Wild Yam. Tea: 1-2 tsp. dried, powdered root, 8 oz. water, decoct 15 minutes, homogenize it in a blender, and steep 1 hour. To enhance absorption and flavor, mix it with coconut milk and pineapple juice. Take 4 oz. 4x/day

Tincture (1:4 or 1:5): 2-4 mL (40-80 gtt.) TID/QID

Capsules: Standardized to 60 mg. Kavalactones - 2-4/day

<u>Kudzu root/Ge Gen (Pueraria montana var. lobata)</u> – Kudzu has significant antispasmodic activity and in TCM, the combination of Kudzu, Cyperus and Platycodon is commonly used to help relieve rectal and intestinal spasms.

Tea (Decoction): 1-2 tsp. dried root, 12 oz. water, decoct 15-20 minutes, steep 1 hour, take 2-3 cups/day

Tincture (1:5): 3-5 mL (60-100 gtt.) TID/QID Extract granules (5:1): 2 g., 1-2 times per day mixed in water Capsules: 5:1 extract 1-2 500 mg. capsules TID

<u>Magnesium</u> – as mentioned previously, hypomagnesia may be a cause of proctalgia fugax, and taking a bioavailable form of magnesium can, over time, reduce or prevent these painful spasms. I prefer magnesium bisglycinate as an absorbable form of the mineral. Dose: 250 mg BID

<u>Platycodon root/Jie Geng (Platycodon grandiflorus)</u> – is commonly used in TCM for respiratory conditions. In Chinese medicine the organs are paired, and the lungs and large intestine have an affinity embryologically. So not only can Jie Geng be used for lung heat and wind (spasms) patterns, it can also be part of a formula for IBS, and rectal spasms. I combine it with Kava, Kudzu, Cyperus or Horse Chestnut.

Tea: 1 tsp. dried root, 10 oz. water, decoct 10-15 minutes, steep 45 minutes, take 4 oz. 3x/day Tincture (1:5), 50-60% ETOH Dose: 2-3 mL (40-60 gtt.) TID Extract granules (5:1): 1 g., 1-2 times per day mixed in water

<u>Silk Tassel leaf (Garrya wrightii, G. fremonti, G. flavescens, G. elliptica)</u> – has analgesic and antispasmodic activity. It is an anticholinergic which helps to relax smooth muscle tissue, including the rectum. It is far safer than many other anticholinergics like Datura, Henbane or Belladonna. It can be used for spasmodic diarrhea, gallbladder spasms, flatulent colic and rectal spasms, along with Kava, Kudzu, Wild Yam or Horse Chestnut.

Tea (leaves): 1 tsp. dried leaves, 8 oz. hot water, steep 20-30 minutes, take 2 oz. up to 5 times per day Tincture (1:2 or 1:5: Leaf - 1-2 mL up to 5 times per day, Root - 10-15 gtt. up to 5 times per day

**Wild Yam rhizome (Dioscorea villosa)** – is mistakenly thought of as a "woman's herb". While it does contain the steroid diosgenin, diosgenin cannot be converted in humans into any functional hormones. The specific indications for Dioscorea are intestinal and hepatic/biliary colic. It not only relieves flatulent colic, it reduces intestinal, rectal, gallbladder and uterine spasms. Tea: 1-2 tsp. dried c/s root, 12 oz. water, decoct 15-20 minutes, steep for 1 hour, take 2-3 cups/day

Tincture (1:5 or 1:2): 1.5-2 mL (30-40 gtt.) TID/QID

### **Fecal Incontinence**

In TCM a leaky jing gate can cause urinary or fecal incontinence. This inability to control bowel movements is embarrassing, can make people isolate and contribute to a severely decreased quality of life. There are many causes of this issue, including birth defects, acute or chronic diarrhea, spinal injuries, Crohn's disease, ulcerative colitis, gastric ulcers with bleeding, large internal hemorrhoids (which can prevent the anal sphincters from properly closing), diabetes, MS, long-term chronic constipation, rectal prolapse or a rectocele. Risk factors that can promote the development of this condition include old age, having been pregnant and dementia.

Treating fecal incontinence depends on the underlying cause. Damage to the rectal muscles from surgery, birth defects, trauma and nerve damage from surgery or disease (MS, diabetes, Parkinson's disease, stroke, dementia) may not readily respond to treatment.

Herbs that enhance nerve regeneration (such as St. John's wort, Prickly Ash, Gotu Kola and Red Ginseng) may offer modest benefits. If the underlying issue is constipation or diarrhea, treating the cause is necessary (see Winston, 2024). In TCM a leaky jing gate is treated with astringing tonics such as Schisandra, Shan Zhu Yu/Chinese Dogwood fruit, Psoralea seed, Eurayle seed and Chinese Rose hips. In India, the Ayurvedic formula Triphala, with 2 parts Amla to 1 part Chebulic and Beleric myrobalans is often used. Other herbs that can be useful for a leaky jing gate include Agrimony, Wild Geranium, Witch Hazel and Indian Madder root.

Western herbs such as Marshmallow and Slippery Elm can help both constipation and diarrhea. If flatulence with stool leakage occurs using carminatives (Ginger, Cardamom, Cinnamon, Sage, etc.), bitters and digestive enzymes can reduce gas production.

Exercises to reduce fecal incontinence include pelvic floor training (Kegal exercise) and yoga (bridge pose, squat pose, mountain pose). Biofeedback training has also been reported to have benefits for some people with this condition.

### Anal Fissures

Anal fissures are small tears in the anal mucosa. Most often they are caused by constipation and straining or passing large or hard stools. They can cause pain and bleeding during bowel movements. Most resolve within a few weeks if caused by an isolated event, but constant constipation or straining can prevent their healing. Like with hemorrhoids, the first treatment is resolving constipation (increase soluble fiber, water intake and take stool softeners such as Butternut bark, magnesium, kiwi fruit or prunes).

Once the underlying cause is being dealt with, sitz baths with Calendula, Plantain leaf and Witch Hazel can be useful, as well as herbal suppositories made with cocoa butter, Hypericum oil, Gotu Kola, Plantain leaf, Aloe gel, Comfrey leaf or Yarrow, and essential oil of Lavender can speed healing and relieve pain, bleeding and itching.

### Anal Pruritis (pruritis ani)

Rectal itching is not a serious condition but can be incredibly uncomfortable and embarrassing at times. In addition to itching, there can be irritation, burning or soreness. Several conditions we have already discussed, such as hemorrhoids and anal fissures, can cause pruritis ani. Other causes can include poor anal hygiene, chronic diarrhea, skin conditions such as psoriasis or eczema, anal infections, including Candida albicans or HPV, topical or dietary irritants, pinworms (mostly in young children) and poorly controlled diabetes. Treatment consists of determining the underlying cause (if possible) and treating it. Improved anal hygiene (cleaning well after a bowel movement, a bidet is useful and less irritating than toilet paper) is important and the use of sitz baths (with Calendula, Plantain leaf, EO of Lavender) can help heal irritated tissue.

For rectal itching, Hypericum oil with menthol and EO of Lavender can give quick relief. For anal Candida albicans infections topical applications of the dandruff shampoo Selsun Blue can also provide relief.

#### **Bibliography**

Andarkhor, P., Sadeghi, A., et al, Effects of Terminalia chebula Retz. in Treatment of Hemorrhoids: A Double-Blind, Randomized Placebo-Controlled Clinical Trial, Eur J Integ Med, 2019 Sep(30):100935

Belcaro, G., Cesarone, M.R., et al, Pycnogenol Treatment of Acute Hemorrhoidal Episodes, Phytother Res, 2010 Mar;24(3):438-44

Belcaro, G., Cotellese, R., et al, Pycnogenol<sup>®</sup> Supplementation to Relieve Symptoms After Hemorrhoidectomy, Minerva Surg, 2024 Jun;79(3):309-14

Belcaro, G., Gizzi, G., et al, Pycnogenol<sup>®</sup> in Postpartum Symptomatic Hemorrhoids, Minerva Ginecol, 2014 Feb;66(1):77-84

Bharat, G., Botanicals an Alternative Treatment Approach for Hemorrhoids-A Review, Ind J Pharmaceutics, 2014 Jan-June;5(1):37-42

Chiaretti, M., Charetti, A.I., et al, Centella asiatica in the Conservative Treatment of Anal Fissure and Hemorrhoids in Comparison with Flavonoids, EC Gastroenterol and Digest Sys, 2021;8;11:03-11

Corsale, I., Carrier, P., et al, Flavonoid Mixture (Diosmin, Troxerutin, Rutin, Hesperidin, Quercetin) in the Treatment of I-III Degree Hemorrhoidal Disease: A Double-Blind Multicenter Prospective Comparative Study, Int J Colorectal Dis, 2018 Nov;33(11):1595-1600

Dönmez, C., Yalçin, F.N., et al, From Nutrition to Medicine: Assessing Hemorrhoid Healing Activity of Solanum melongena L. via In Vivo Experimental Models and its Major Chemicals, J Ethnopharmacol, 2020 Oct;261:113143

Du, W., Chen, W., et al, Clinical Study on the Treatment of Complex Anal Fistula by Phased Chinese Herbal Sitz Bath Based on "Fuzheng Quxie" Theory, Altern Ther Health Med. 2024 Feb;30(2):50-5

Eshgi, F., MD, Hosseinimehr, S.J, Ph.D, et al Effects of Aloe vera Cream on Posthemorrhoidectomy Pain and Wound Healing: Results of a Randomized, Blind, Placebo-Control Study, J Alternat Complement Med, 2010;16(6):647-50

Garg, P., Singh, P., Adequate Dietary Fiber Supplement and TONE can Help Avoid Surgery in Most Patients with Advanced Hemorrhoids, Minerva Gastroenterol Dietol, 2017 Jun;63(2):92-6

Gravina, A.G., Pellegrion, R., et al, Evaluation of the Efficacy and Safety of a Compound of Micronized Flavonoids in Combination with Vitamin C and Extracts of Centella asiatica, Vaccinium myrtillus, and Vitis vinifera for the Reduction of Hemorrhoid Symptoms in Patients with Grade II and III Hemorrhoidal Disease: A Retrospective Real-Life Study, Front Pharmacol, 2021 Dec 14;12:773320

Kang, Z., Yu, Y., Research Progress on the Application of Chinese Herbal Medicine in Anal Fistula Surgery, Am J Transl Res, 2024;16(8):3519-33

King, D.E., Mainouse, A.G., et al, Dietary Magnesium and C-Reactive Protein Levels, J Am Coll Nutr, 2005 Jun;24(3):166-71

Li, P., Yu, G., et al, Meta-Analysis of the Traditional Chinese Medicine Care Model in Relieving Postoperative Pain in Patients with Anorectal Diseases, Heliyon 9 (2023) e22310

Liang, Y., Tankun R., et al, Natural Products with Potential Effects on Hemorrhoids: A Review, Molecules, 2024;29:2673

Liao, W-C, Cheng, Y-Y, et al, Effects of Early Warm Water Sitz Bath on Urinary Retention and Pain After Haemorrhoidectomy: A Randomized Controlled Trial, Int J Nurs Stud, 2024 Jun:154:104765

MacKay, D., Hemorrhoids and Varicose Veins: A Review of Treatment Options, Alt Med Rev, 2001;6(2):126-40

Mahmoudi, A., Seyedsadeghi, M., et al, Therapeutic Effect of Achillea millefolium on the Hemorrhoids; A Randomized, Double-Blind, Placebo-Controlled Clinical Trial, J Herb Med, 2023 Jun;39:100657

Malekuti, J., Mirghafourvand, M., et al, Comparison of the Effect of Myrtus communis Herbal and Anti-Hemorrhoid Ointments on the Hemorrhoid Symptoms and Quality of Life in Postpartum Women with Grade 1 and II Internal Hemorrhoid: A Triple-Blinded Randomized Controlled Clinical Trial, J Complement Integ Med, 2019 Aug 21

Mehdi, Z., Fatemeh, P., et al, Efficacy and Safety of Hemoheal Cream in Patients with Hemorrhoids: A Randomized Double-Blind Placebo Controlled Clinical Trial, J Tradit Chin Med, 2021 Apr;41(2):301-7

Mosavi, S.H., Ghahramani, L., et al, Topical Allium ampeloprasum subsp Iranicum (Leek) Extract Cream in Patients with Symptomatic Hemorrhoids: A Pilot Randomized and Controlled Clinical Trial, J Evid Based Integrat Med, 2015 Jan

Mott, T., Latimer, K., et al, Hemorrhoids: Diagnosis and Treatment Options, Am Fam Physician, 2018 Feb 1;97(3):172-79

Murshid, K.R, Hemorrhoids! Don't Call the Surgeon Yet, Saudi J Gastroenterol, 1997 May;3(2):94-5

Nienhuijs, S., de Hingh, I., Conventional Versus LigaSure Hemorrhoidectomy for Patients with Symptomatic Hemorrhoids, Cochrane Database Syst Rev, 2009 Ja 21;2009(1):CD006761

Perez-Miranda, M., Gomez-Cedenilla, A.G., et al, Effect of Fiber Supplements on Internal Bleeding Hemorrhoids, Hepatogastroenterology, 1996 Nov-Dec;43(12):1504-7

Pitesa, R., Yuen, W.Y.R., et al, Flavonoids and Post Haemorrhoidectomy Recovery: A Systematic Review and Meta-Analysis, ANZ J Surg, 2024 Sep;94(9):1480-90

Riss, S., Weiser, F.A., The Prevalence of Hemorrhoids in Adults, Int J Colorectal Dis, 2012 Feb;27 (2):215-20

Šabanović, M., Jašić, M., et al, *Alpha Lipoic Acid Reduces Symptoms and Inflammation Biomarkers in Patients with Chronic Hemorrhoidal Illnesses*, Int J Vitam Nutr Res, 2018 Dec;88(5-6):281-90

Sha, Q., Cheng, M., et al, Effects of Huhuang Burn Liniment on Wound Healing and Changes in IL-10 and MMP-9 in Patients with Mixed Hemorrhoids, Am J Transl Res, 2022;14(10):7434-42

Weiss, R., Weiss' Herbal Medicine, Classic Edition, Stullgart, Thieme, 2001

Workinger, J.L., Doyle, R.P., et al, Challenges in the Diagnosis of Magnesium Status, Nutrients, 2018 Sept 10;1202, 33 pp

Yousefi, M., Mahdavi, M.R.V., et al, Clinical Evaluation of Commiphora mukul, a Botanical Resin, in the Management of Hemorrhoids: A Randomized Controlled Trial, Pharmacogn Mag, 2013 Oct;9(36):350-6

Zhou, M., Jin, W., et al, Traditional Chinese Medicine in the Treatment of Hemorrhoids-A Review of Preparations Used and Their Mechanism of Action, Front Pharmacol, 2023 Oct 19; 14:1270339