

Spell it out

Instead of being embarrassed about rectal bleeding seek help, says Soumen Das

It often begins innocently. A streak of blood on the toilet paper. A few drops in the commode. Some discomfort while passing stool. Most people shrug it off, thinking "It's just piles." They tell themselves it's nothing serious, perhaps because the word piles is so common, so familiar, that it seems harmless. But like many other stories in our lives, the truth often hides behind what seems ordinary. And sometimes, what we dismiss lightly may be the very thing that ought to demand our closest attention.

Familiar excuse

In Bengal's old neighbourhoods, at tea-shop *addas* or family meals, the word "piles" is uttered with a mix of casualness and embarrassment. It's considered a nuisance, not a threat. People buy over-the-counter ointments, use home remedies or ignore it altogether. That is where the danger lies. Rectal bleeding may indeed come from piles. But it can also signal something far more serious — such as colorectal cancer, polyps, fissures, ulcerative colitis or even infections. The everyday setting may often hide an impending storm. The common must never blind us to the uncommon.

Why it happens

Rectal bleeding means appearance of blood in the lower digestive tract. It may be bright red, maroon or sometimes mixed with stool. The causes can range from minor to major.

- Haemorrhoids, better known as piles. Leakage from swollen veins in the rectum, often caused by chronic constipation or straining
- Anal fissures. Small tears caused by hard stool
- Polyps. Small growths that may turn cancerous over time
- Colorectal cancer. A growing health concern in India, especially as lifestyles change
- Inflammatory bowel disease. Chronic conditions like ulcerative colitis or Crohn's disease
- Infections. Not very common but possible.



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The truth is simple — bleeding is a symptom, not a diagnosis. Treating it as "just piles" is like mistaking every cough for a cold, without considering pneumonia or tuberculosis.

Looming shadow of colorectal cancer

Colorectal cancer was once thought to be a "Western disease". Not anymore. Across Indian cities, doctors are seeing younger patients presenting with this cancer, often at advanced stages. The reason? Changing diets, reduced fibre intake, a sedentary lifestyle, obesity, smoking and alcohol —

all play a role. But the biggest factor is delay. Patients ignore early signs, attributing them to piles. By the time they reach a doctor, the disease may have spread. This delay is tragic because colorectal cancer, when caught early, is among the most treatable cancers. Early diagnosis can mean simple surgery and complete cure. Late diagnosis can mean chemotherapy, radiation and lifelong struggle.

Simple tests that can save lives

If you or someone you know notices rectal bleeding, the path is clear — see a doctor. The

evaluation is not complicated.

- History and examination. A doctor will ask about duration, frequency, associated symptoms (pain, weight loss, change in bowel habits)
- Digital rectal exam. A quick, painless check with a gloved finger
- Proctoscopy or colonoscopy. Simple scopes that allow doctors to see inside the rectum and colon to identify piles, fissures or tumours
- Biopsy if needed: If a suspicious growth is seen, a tiny piece is sent for lab analysis.

These steps can draw the line between reassurance and early life-saving intervention.

When to worry

Certain signs should immediately ring alarm bells.

- Bleeding accompanied by weight loss
- Change in stool pattern (constipation alternating with diarrhoea)
- That feeling of incomplete evacuation
- Family history of colorectal cancer
- Bleeding that persists despite treatment for piles.

In this case, see a doctor as soon as possible.

Lifestyle and prevention

While not all bleeding is preventable, risk factors can be reduced with lifestyle changes.

- Include fibre in your diet. Eat fruits, vegetables and whole grains
- Stay hydrated
- Exercise daily. Even a 30-minute walk keeps digestion smooth
- Avoid smoking and excess alcohol
- Go for screening. A colonoscopy is advised after 50, earlier if there is family history.

These are small, everyday habits, but it is the small choices that often shape destiny.

Stay aware, stay healthy

We live in a time when health information flows freely, yet myths remain. Many still believe that rectal bleeding in a young person cannot be cancer. Many fear the stigma of tests. Many delay because they feel embarrassed. But embarrassment has never saved a life. Awareness and timely action do. Rectal bleeding is not a verdict, it is a signal. It may be harmless. Or it may be the body whispering before it screams.

So next time you come across a case of rectal bleeding, don't assume it is "just piles". See a doctor, get examined and know the cause. Because sometimes, saving a life begins with not ignoring the smallest of signs.

The writer is a surgical oncologist based in Calcutta