## EDITORIAL BY THE EDITOR-IN-CHIEF

## **Dear Readers**

Today's issue offers two review papers on the treatment of atypical patients with haemorrhoidal disease.

The first of the articles describes surgical management of a patient on regular anticoagulant therapy. The strategy of perioperative management in proctological patients treated for haemorrhoids who are on anticoagulants is not precisely defined, and literature reports on this subject are sparse. In this practical article, the author discusses specific anticoagulants and management in selected cases. A growing number of our patients take anticoagulants on a regular basis (1/4 of the adult population regularly use blood thinners), and the management of these patients must be particularly cautious (we are concerned about embolism on the one hand intra- and postoperative bleeding on the other hand).

The second paper presents a treatment strategy for an immunocompromised patient with haemorrhoidal disease, e.g. in the course of HIV infection, chemotherapy, immunosuppressive treatment (after organ transplants or with inflammatory bowel disease), as well as treatment of haemorrhoidal disease in elderly patients with comorbidities that increase the risk of perioperative complications.

I also recommend the first part of an article on bacterial sexually transmitted infections. This paper also touches on the subject of patients with acquired immunodeficiency syndrome. These infections are often associated with anal intercourse, which is why the author of the article draws attention to the important issue of the intimacy of medical history taking and the need to tests sexual partner(s).

I also recommend a paper on an oblique excision of a pilonidal cyst by the Suchorski's method, which is relatively rarely performed. As it is known, the choice of surgical technique for a pilonidal cyst always depends on the extent of the lesion, its location in relation to the intergluteal cleft, as well as the surgeon's experience in a particular method. Suchorski's method is used and mentioned in the literature much less frequently than, for example, Bascom procedure or Limberg's technique. The author of the paper presents indications for this method and its advantages, also referring to other surgical modalities.

I wish you a pleasant reading. Editor-in-Chief Professor Małgorzata Kołodziejczak, MD



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