Let's Talk About...

Enemas (Large Volume)

What is an enema?

A large volume enema (more fluid than in an ordinary enema from the pharmacy) is a way of putting fluid into the rectum and lower intestine to empty stool (poop or bowel movements). Different problems require different enema fluids. Enemas can treat constipation, fecal incontinence (soiling), or to clean the bowel before a bowel test or surgery.

Enemas and bowel management

Enemas can be part of a bowel management program. A bowel management program is for children who have problems with bowel control. Examples of bowel control problems include constipation or soiling (also called fecal incontinence). The goal of a bowel management program is to clean the colon of stool and prevent accidents. Bowel management programs are different for each child. Your medical team will work with you and your child to find an enema that works.

How will I know which enema to use?

Your child's doctor will let you know which enema is right for your child.

What are the different types of enema solutions?

Normal saline solution: This is a special mixture of salt and water. The salts in this enema pull water from the body into the bowels to soften the stool. Never use just plain water.

Castile soap: Castile is a mild soap made with olive oil and other oils. The castile soap is added to saline. This enema irritates the bowel enough to produce a bowel movement. You can buy castile soap at grocery or health food stores in a bottle.

Glycerin: This additive irritates the lining of the colon to produce a bowel movement. You can buy glycerin in a drugstore in the cosmetic section or online. If you cannot find it, ask the pharmacist.

Fleet (Phosphate Solution): This enema pulls water into the bowel to soften the stool. You can buy the sodium/phosphate solution at a drugstore. It is handy because it is already mixed. Do not give your child more than one phosphate enema a day because there is a risk of "phosphate intoxication" (too much phosphate in the body). Children with kidney problems should use "Fleet" enemas with caution (do not use this unless your child's doctor tells you to).

How do I give an enema?

1. Wash your hands
2. Gather the supplies you need:
   - Normal saline solution
   - Additives ordered by your child's doctor (for example glycerin or castile soap)
   - Enema bag (Kangaroo™ gravity feeding bag)
   - 22 fr. or 24 fr. silicone catheter with a 30 mL balloon
   - 30 mL slip tip syringe (used to inflate the balloon on the catheter)
   - 60 mL catheter tip syringe (used to clean the catheter)
   - Towels or absorbent pads
   - Lubricant (such as KY jelly™ or surgi-lube™)

3 Test the balloon on the silicone catheter.

– Put air in the 30 mL syringe. Connect the syringe to the balloon port on the catheter. Push the plunger till it inflates the balloon.

– Pull the plunger back until it lets all the air out of the balloon.

4 Prepare the solution:

• Saline Solution:

– You can buy this in bottles. It is called saline, saline solution, normal saline, or 0.9% Sodium Chloride Solution, or

– You can mix this up at home. Mix four cups of warm tap water with 1½ teaspoons of table salt. Do not change this recipe. Changing the recipe could be harmful. Never use plain water by itself as an enema.

• Warm the enema liquid to body temperature. If you mix it yourself, use warm tap water. If the enema liquid is in a premixed bottle, you can place the bottle in a hot water bath. Never microwave the enema solution.

5 Clamp the tubing on the enema (feeding) bag.

6 Pour saline (the amount that your child's doctor prescribed) and any additives into the enema bag. Mix well.

7 Open the clamp and let the fluid flow out of the bag and through the tubing. Squeeze the drip chamber in the tubing until it is halfway filled with fluid. Fill the whole tubing with fluid.

8 Place your child on his knees with his head on a pillow and his buttocks up.

9 Lubricate the end of the catheter well with the lubricant.

10 Place the end of the catheter into the rectum four to five inches.

11 Fill the syringe with 20–30 mL of air. Connect the syringe to the small port of the catheter. Push on the plunger and blow up the balloon. Take the syringe off the catheter.

12 Pull gently on the catheter until you meet resistance. Keep pulling gently on the catheter during the enema so the enema doesn't leak out.

13 Connect the enema bag tubing to the catheter.

14 Open the clamp on the tubing. Let the enema flow in over 5–10 minutes. To slow the enema flow, close the roller clamp on the tubing a little or lower the bag a little.

15 Have your child keep the fluid in for 5–10 minutes. Leave the fluid tubing connected to the catheter.

16 Place your child on the toilet. Let the air out of the balloon and let the catheter slip out.

17 Have your child sit on the toilet for 45 minutes to expel the stool.

• If this is an enema that your child will get regularly: after a week, he can adjust the time on the toilet. After a week, he can stay on the toilet only for the time it takes to expel the stool.

18 When finished, rinse the bag with tap water. Flush the catheter with soapy water using the 60 ml syringe.

What do I do if I have a problem with the enema?

• If the enema leaks while giving it:

– Gently pull back on the catheter while giving the enema and while the enema is being held in.

– Make sure you take the air syringe off the catheter after you inflate the balloon.

– Next time increase the air in the balloon by an extra 5 mL.

• If you child has a lot of cramping and discomfort while you are giving the enema:

– Make sure the fluid is body temperature.

– Slow the enema down while you give it.

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