How To Use Rectal Products

The use of rectal products is important in the management of inflammatory bowel disease (IBD). They can provide medication straight to the area of inflammation in your bowel and this is sometimes called ‘topical treatment’.

This document is to provide general hints and tips so you can get the most out of your rectal products.

Medications in rectal product

For IBD, mesalazines and steroids have been made into rectal products. These do not need to be a specific brand.

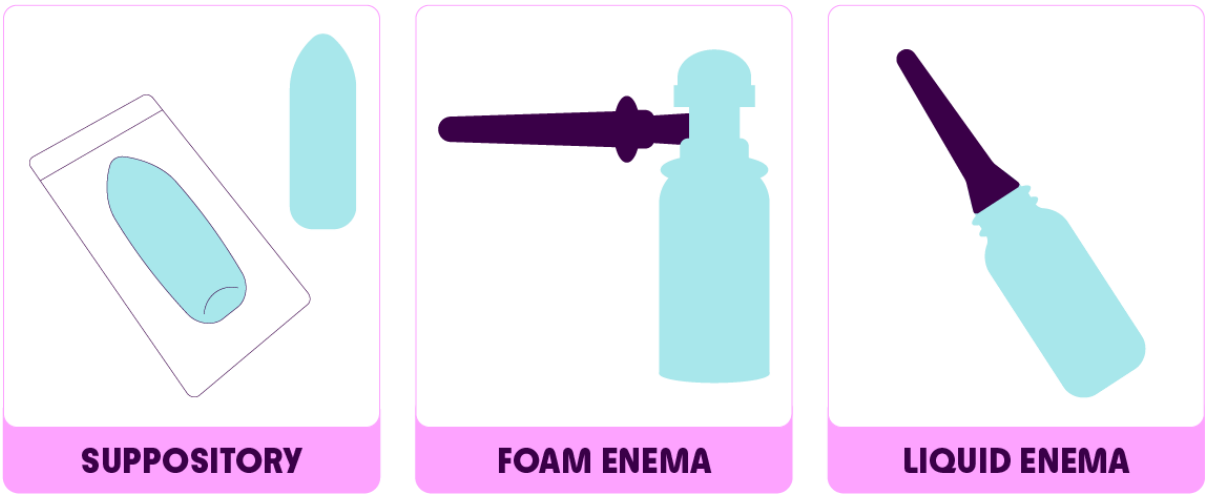
Your team will talk to you about the different rectal treatments and help you decide which treatment is most suitable.

Types of rectal products

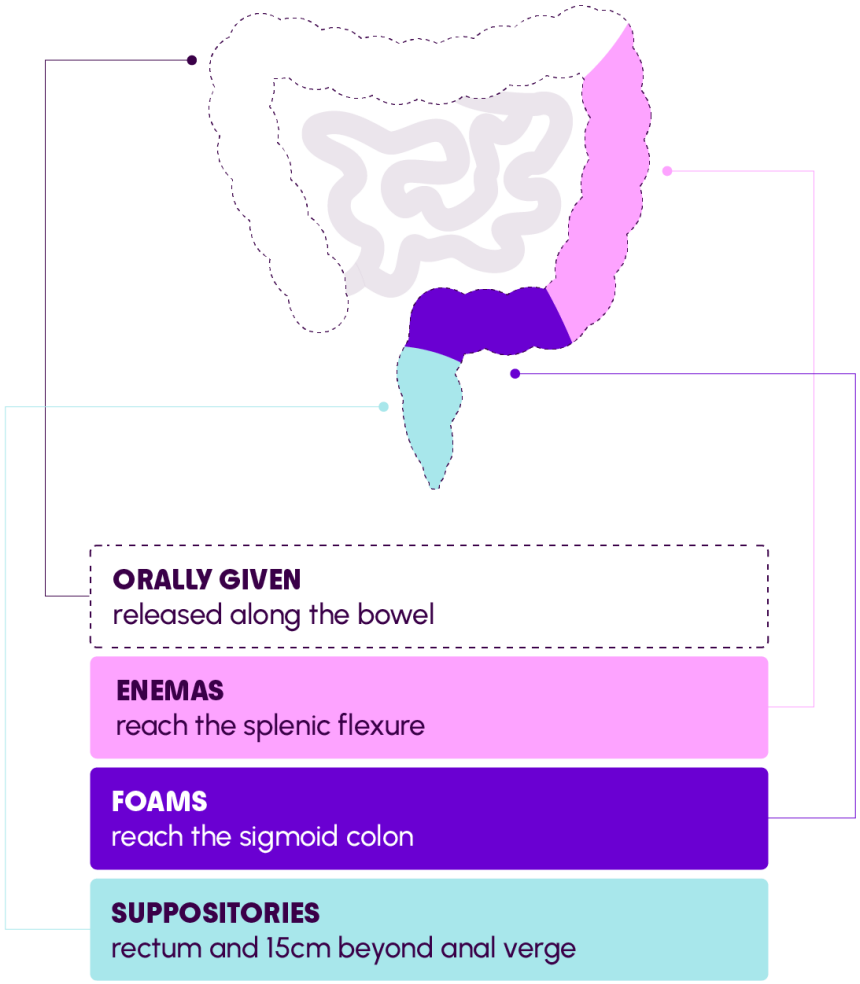
In IBD, suppositories or enemas are used.

Suppositories are a solid dose of medication that is inserted into the back passage to treat inflammation in the rectum. Once inserted, they melt and are absorbed.

Enemas are available in foam or liquid; the liquid can often reach areas higher up the left-hand side of your large bowel. They absorb once inserted.



Your team will let you know if you need suppositories, enemas or both depending on where your inflammation is and the severity of your inflammation.



Reference: Hanauer, S.B., Present, D.H., & Rubin, D.T. (2009). Gastroenterology & hepatology, 5 6 Suppl, 4-16

When are rectal products used

Rectal products can be added in at time of increased symptoms (a flare) - this is called treatment escalation. This can be done in addition to oral mesalazine – this is called ‘top and tail management’. If used during a flare, they may need to be continued for a while after your symptoms have improved.

Sometimes patients need to use rectal products regularly too – this is called ‘maintenance treatment’.

Your team will advise you on the best management plan for you.

What time of day to use rectal products

Rectal preparations sometimes give you the feeling that you need to open your bowels again after they have been administered and need time to be absorbed, so try to find a time to administer them when you are able to lie down for at least 15 minutes (but ideally 45 minutes).

If you are asked to administer more than one rectal product, it is best to do at different times of the day, but if not possible, leave at least 20 minutes (but ideally one hour) gap before starting the next product.

Tips for specific products

- Some products come with plastic bags to be used as gloves for administration and disposal. If yours does not, do not worry, this is not needed as washing with soap and then throwing the product in your usual bin is good enough.

- Make sure rectal product wrappers are removed before inserting.

Suppositories

- If the suppository has a rounded and/or pointed end, insert that end first.

Foam enemas

- Foam enemas can be noisy and come out quickly – you can practice on your hand first to get used to the product.

Liquid enemas

- Liquid enemas should be gently shaken before administered and need to be gently squeezed to release the medication.

- Liquid enemas can be difficult to do in one go (due to the volume of liquid) and so can be done in two attempts (leaving at least 15 minutes between each attempt).

How to use rectal products

- Try to empty your bowels and bladder.

- Wash and dry your hands.

- Wrap a pillow with a towel. This is to be put underneath your hip/bottom when you are laying down (this will use gravity to keep the rectal product in plus protect against leaks).

- Undress from your waist down.

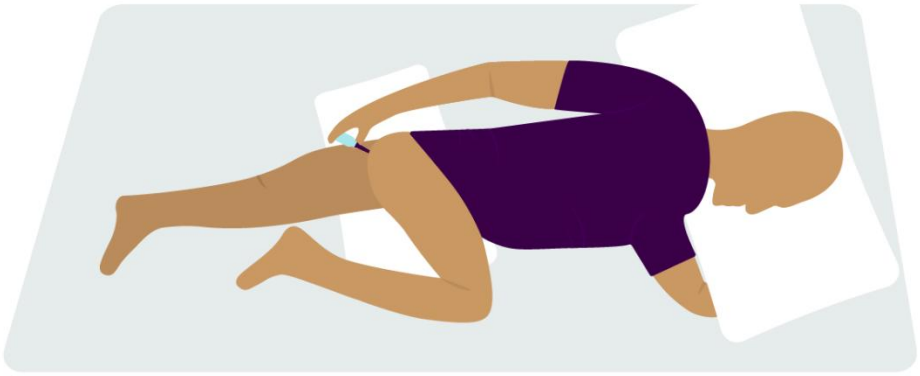
- If you prefer to use your right hand, then laying down on the left-side will be easier for administration and absorption. If you prefer using your left hand, it may be easier to insert the rectal product standing up and then lie down on your left-hand side straight away.

- Some products already have a lubricant coating and running the tip of the product under warm water can activate it (see patient product information). If

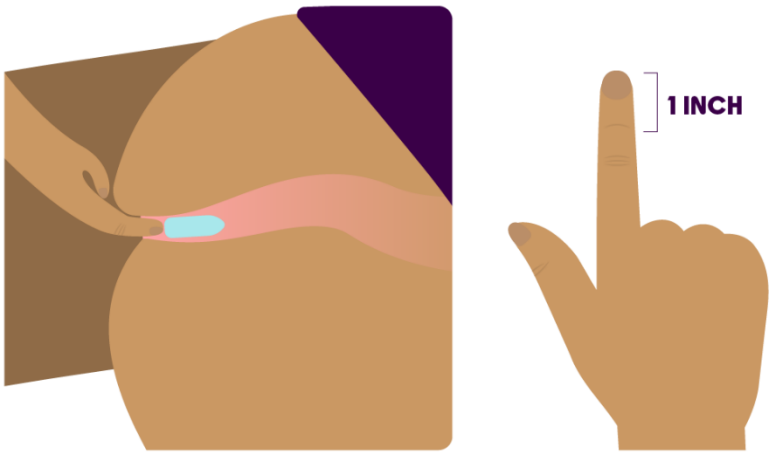
you still find it awkward or painful, you can add lubricating gel to the tip to make it easier to insert.

- If laying down, place your top leg over and in front of your bottom leg (this opens the back passage, making it easier to insert the rectal product).

- If standing up, place your left leg up on edge of bed or seat (this opens the back passage making it easier to insert the rectal product).
- Spread your buttocks and from behind insert the rectal product into the back passage.



- The back passage is narrower at the beginning. Once the product passes this narrow part, it is in the correct place. This normally means you have to push the product in for about 1 inch.



- If using an enema: once the liquid/foam is in, gently withdraw the nozzle.
- If using a suppository: this will remain in place until it is naturally absorbed.
- If standing, now lie down.
- Ensure you are comfortable, relaxed, and lie down on your side for no less than 15 minutes. Gently squeezing your legs and bottom together can help keep the rectal product inside.
- Once completed, re-wash your hands.

What are the side effects of rectal products?

As the rectal products are acting locally in your bowel, side effects are not often seen. However, you may get:

- Diarrhoea
- Nausea
- Vomiting
- Abdominal discomfort
- Bloating (mainly with the foam enema (due to the gas in
- the canister)
- Rectal bleeding (at start of treatment due to insertion)

If you have any concerns, discuss this with your IBD team.

How long should rectal products take to work?

If you do not see an improvement within 2 weeks, please discuss with your IBD team.

With thanks to Sheffield Teaching Hospital - PIL Treating inflammatory bowel disease Topical mesalazine (Enema and Suppository). April 2016

Written by
Fiona Rees

Checked by
Alex Hall, Lisa Younge, Pearl Avery, Tracey Tyrrell, BSG IBD committee November 2025