

Self-administration of a phosphate enema

This leaflet explains how to administer your medication (enema) which is important for your procedure. If you have any further questions or concerns, please do not hesitate to contact the endoscopy team.

What is a phosphate enema

An enema is fluid that is placed in the rectum through the anus (back passage) to clear the bowel. The phosphate enema that you have been given is a single dose disposable enema that will clean the section of your bowel that will be examined during the procedure.

Why do I need to have a phosphate enema?

It is important to have clear views of the lower part of your colon which is needed to help with diagnosis of your bowel symptoms.

What are the alternatives?

Oral bowel preparation is an alternative, but these are usually used for investigations such as colonoscopy or barium enema in which an investigation is requested to look further into the colon.

Are there any side effects?

Rare side effects are:

- Rectal bleeding
- Blistering
- Burning
- Itching

If you are breastfeeding it is advised that breast milk is expressed and discarded for at least 24 hours after having the enema as the main ingredients contained in the enema may pass into the breast milk.

When to use the enema

Use the enema about 60 minutes before leaving home for the examination. This will allow more than enough time for the enema to work, and travel will not be a problem. Give yourself plenty of time to relax. You should still use the enema even if you have recently passed a bowel motion.

If you are unable to give yourself the enema, we do have facilities to do this in the Endoscopy Departments. You do not need to contact us, but please come 15 to 20 minutes early for your appointment. On arrival, please let a member of staff know that you will require assistance.

If you have a colostomy or ileostomy, please contact the Endoscopy Unit for advice. The contact information is at the end of this leaflet.

How to use the phosphate enema

The enema can be used at room temperature, or you may wish to warm it slightly by placing the bottle in (tepid) water; this should be at body temperature



After washing your hands, lie on your left side with your knees pulled upwards towards your chest; draw your right leg up more than the left.

Remove the orange protective cap from the tube. Insert the tube gently into your anus (back passage) so that about three quarters of the tip is inside with the tip pointing towards your navel. Slowly squeeze the contents of the bottle into your back passage. You should stop if you feel resistance to the fluid and try angling the tube differently. If resistance remains then stop. Forcing the fluid may cause an injury. Gently remove the tube from the back passage. It is quite normal to experience some leakage of the enema liquid from the rectum. It is also normal for some residue to remain in the bottle.



Remain lying on your left side for 1 to 5 minutes until you feel a strong urge to open your bowels. Be prepared to expect frequent loose bowel movements within 5 minutes of having the enema. This is normal and shows that the medicine is working. Remain near a toilet until the effects have worn off.

You may feel a little unsteady after the enema, so make sure that you do not get up too quickly to go to the toilet. Very rarely, some people feel faint when they try to get up. If this happens, lie back down until the feeling passes.

Discard the used bottle in a plastic bag, place in the bin and wash your hands. Drink plenty of clear fluids, such as water, after your enema as this will help to satisfy your thirst until the procedure has been done.

Contact information

Please contact a member of the team with any queries, at the Hospital site of your procedure from Monday to Friday from 8.30am – 5pm.

Huddersfield Royal Infirmary Endoscopy Unit: 01484 355868

Calderdale Royal Hospital Endoscopy Unit: 01422 223920

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براہے مہربانی مندرجہ بالا شعبے میں ہم سے رابطہ کریں۔

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