SUCRALFATE SUSPENSION ENEMAS

Why do I need sucralfate enemas?
After radiotherapy, fragile blood vessels can develop in any part of the bowel and may bleed. Other common symptoms include diarrhoea and urgency. This is called radiation proctitis. It is self-limiting in most people. Symptoms in a very small percentage of people becomes troublesome and chronic which warrants treatment with sucralfate. Research shows that improvements may be seen as early as 1 week after initiation of treatment. The recommended dose is one enema TWICE daily for at least FOUR weeks but may be continued as advised by your consultant.

What is sucralfate and how does it work?
Sucralfate is a medication (licensed in the EU) usually used for ulcers in the stomach. Following research, sucralfate enemas have also been shown to be effective in treating radiation proctitis. Sucralfate forms a protective layer over the bowel walls and protects the fragile blood vessels from breaking. Sucralfate enemas may also increase the rate of healing of these fragile blood vessels.

Items needed:
- Sucralfate 1g/5ml suspension (provided by hospital pharmacy)

The items below should be given at the outpatients’ appointment
- 50ml catheter-tip syringe (FWC036)
- 14-Fr self-retaining foley catheter (FSS173)
- Optilube 42g sterile lubricating jelly tube (FTM294)

Preparing/administering sucralfate enema:
1. Using the 50ml syringe provided, draw up 10mls of sucralfate suspension (2g) and then 2!40mls of warm water and mix. Expel any excess air from the syringe.
2. Attach the catheter provided to the syringe tip and lubricate the end of the catheter with the Optilube provided.
3. Lie on your left side and bend both knees towards your chest (this position will help the flow of liquid into the rectum and aid retention).
4. Position a towel underneath yourself to catch any fluid leakage after administration.
5. Gently insert the catheter into the rectum, ensuring a depth of a few of inches (approximately 10cm).
6. Using steady pressure, press down the barrel of the syringe slowly until the entire content of the syringe is administered. Withdraw the catheter slowly.
7. Try to retain the enema in the rectum for as long as possible (at least 15 minutes). Remain lying and gently roll over several times to ensure maximum coverage of the affected area of bowel.
8. Once finished, wash equipment in warm water and store safely.