



## AL-AMAL, AL-EHTIQAN, HUQNA (THE ENEMATA) -AN ANCIENT WAY OF COMPLIMENTARY TREATMENT

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**ABSTRACT** An enema also known as clyster, is an injection of fluid into the lower bowel by way of the rectum. Enemas are used to treat severe constipation and to introduce fluids in patients who can't receive them intravenously, as well as to administer certain drugs in liquid suspension. Huqna ( enema/clyster) is a process which is applied for the removal of superfluities from the stomach and intestines. It is the treatment of choice for intestinal colic, that is why it is called as moalijah al fazilah (the superfluous therapy). Enemas have been in practice from ancient time and helped to cure a lot of disorders. Ancient literature of unani medicine describes enema in scientific manner. Unani scholars introduce enema and treated various kinds of disorders by this way. With time and as per necessities in the medical field enema got more preference and now a days it has many types according to their mode of action.

### KEYWORDS :

#### Enema



Rectal bulb syringe to administer smaller enemas

#### Enema (Huqna)

### INTRODUCTION

Huqna (Enema/Clyster) is a process which is applied for the removal of super fluities from the stomach and intestines. In this process liquefied drugs or some medicinal preparations are injected or introduced into the lower bowel per rectum by an instrument for cleansing, stimulating the evacuation of bowel, or for other therapeutic or diagnostic purpose. (1). By derivation from the Greek, the word enema means sending in rather than washing out so as appropriately applied also to the administration of drugs and nutrients by this route and to the diagnostic use of barium sulphate to visualize colon and rectum by X-Ray. (2) Enema also used as a vehicle for the administration of food, water or medicine as a stimulant to the general system and more rarely as means of reducing temperature, as treatment for encopresis and as a form of rehydration therapy (proctoclysis) in patients for whom intravenous therapy is not applied. (3, 4)

Enemas are also used by some alternative health therapies, used chiefly as part of sexual activities, as well as simply for pleasure used to intoxicate with alcohol.

### HISTORICAL BACKGROUND

Enema entered the English language 1675 from Latin, in the 15<sup>th</sup> century. It was 1<sup>st</sup> used in the sense of a rectal injection from Greek (enema), clyster also spelled glisten in the 17<sup>th</sup> century, and rarely "cloister" or "clister" comes from Greek (klyster) wash. It is an archaic word for enema, more particularly for enemas administered using a clyster syringe.

The first mention of the enema in medical literature is in the ancient Egyptian ebers papyrus (1550 BC). (5) in the first century BC the Greek physician Asclepiads of Bithynia wrote "treatment consists merely of three elements: drink, food and the enema. In the second century CE the Greek philosopher celsus recommended an enema of pearl, barley in milk or rose oil with butter as a nutrient for those

suffering from dysentery and unable to eat. In medicinal times appear the first illustrations of enema equipment, a clyster syringe consisting a tube attached to a pump action bulb. In the 15<sup>th</sup> century simple piston syringe clysters came into use. (6, 7)

In the late 20<sup>th</sup> centuries micro enema was invented, this being a disposable squeeze bottle with contents that cause the body to draw water into the colon, e.g., sodium bi phosphate (popular in the united states) or glycerin (popular in Japan).(8)

In unani literature it is mentioned that man has learned this procedure from the bird, so this procedure is called as Amali Tayir (procedure of the bird). A man saw that a bird is inserting the brackish salted sea water with the help of beak into the anus, which caused evacuation of feces. The same procedure was applied on human's beings to cure different diseases. (9)

It is mentioned in the literature that once Galen was on the sea shore, he saw that a swan ate lot of fishes from the sea, so that the swan was unable to fly. Thus the swan started inserting the sea water with the beak into the anus. After some time the swan had evacuation of feces. (9, 10)

In the famous book Canon of medicine written by an eminent scholar Avicenna. Avicenna has written in his famous book canon of medicine about the invention of enema. He mentioned that Hippocrates narrates that once he saw a crow eating the dead fish at the sea shore. The crow ate excessively so that the crow was unable to fly. Thus the crow inserting sea water with the beak into the anus, after some time the crow had evacuation of faeces. (11)

### Classification of Enema

Initially the enema is done only for the purpose of expulsion of feces by laxative and purgative drugs. But now a day's enema is used for variety of purposes.

1. **Huqna mouadil al mizaj (enema for producing homeostasis in the body):** This type is used to treat the ill temperament of the intestines and other abdominal viscera's, for example; In acute hyperpyrexia and in acute inflammatory conditions of the viscera's. plain cold water enema is given or sometimes cold drugs like Aabi Tarbooz (watermelon water), Aabi khayaar (cucumber water) and Aabi Neelofar (water lily water) are used as enema. (12)
2. **Huqna al mushilah (purgative enema):** Those enemata which are used for the purpose of cleansing and stimulating the bowel for the evacuation of faeces. A strong high bowel purgative is used as enema. The drugs which are used for this purpose are Roghan e Tarpeen, Roghan e Baid Injeer, Roghan e Zaitoon, sabun desi (soap local) along with Luke warm water.
3. **Huqna al Mohalilah (Resolvent enema):** Those enemata which are used for the purpose of reducing inflammatory conditions of the intestines. it is also used for resolving the flatus, following anti inflammatory and anti flatulent drugs are used in this enemata ; Luaabi hulba, eelwa, haasha, pudina, Aabi e Makoh e sabz etc.

4. **Huqna al qabizah (astringent/ anastoli enema);** Most Frequently used in diarrhea and chronic dysentery. It is mainly used for anti hemorrhagic and anti diarrheal actions.
5. **Huqna al mukhadirah/ al musakinah ( anaesthetic/ tranquilizer enema);** Enemata which are used for analgesic purpose are called musakinah, for this following drugs are used ; decoction of post e khashkhaash, kahu, farfiyoon and afyoon. Besides caecum, colon and rectum, these enemata are also used for pain in kidney, bladder and uterus. In this type of enemata drug is kept in very small quantity.
6. **Huqna al qatil al deedan ( anti helminthic/ vermicial enema);** enemata is very much useful in oxyuris vermicularis ( thread worm infestation), in this roghan e tarpeen, roghan e zaitoon and Luke warm water is used, that has a very good anthelmintic and vermicial action.
7. **Huqna al daafe tashannuj ( antispasmodic enema);** enemata which are used for antispasmodic action are most probably the same as the enemata for developing homeostasis.
8. **Huqna al mumsikah ( retentive enema);** these enemata also have the same properties like the astringent/ anastolic enema, but the deference is that this type of enemata does not cause constipation, they are very much useful in paralytic ileus, prosidentia and prolapsed.
9. **Huqna al maghzia (nutrient enema);** nutrient enema is usually applied if the patient is suffering from severe type of throat diseases like acute tonsillitis, diphtheria, where oral intake is impossible and in the state of deep unconsciousness, for this purpose meat or chicken soup, arrow root, eggs mixed with milk were given in the quantity of 150 – 200 grams per sixth hourly through the enema . it is very much essential to attach the rubber catheter in front of the clysters, so as to inject the nutrient enema matter deep into the colon. Patient should be at complete rest for better absorption of the nutrients. (10)
10. **Huqna al mumlisah (lubricant enema);** sometimes the internal mucus layer of colon gets inflamed and erosion occur like in inflammatory bowel disease and in IBS. In such conditions lubricant drugs like luaab e reshaye khatmi, luaab e tukhmi katan, luaab e berg e gauzabaan and mawul shaer were used. This type of enemata comes under huqna e musakinah. (9)
11. Huqna muqawi al bah wa muzaiyed al mani ( aphrodisiac enemata and spermatogenic enemata)
12. Huqna al musammin al badan (adipogenous)

**Types of enema**

Basically enema has two types.

1. Evacuant enemata.
2. Retention enemata.

The material used in enema is briefly mentioned in the following table; Basically enema is classified into evacuant enema and retained enema.

Evacuant enema is classified into;

1. Simple evacuant enema.
2. Medicated evacuant enema.
  - . Oil enema.
  - . Astringent enema.
  - . Purgative enema.
  - . Anti helminthes enema.
  - . Carminative enema.
3. Cold enema.

Retained enema is classified into;

- . Stimulant enema.
- . Sedative enema.
- . Emollient enema.
- . Anesthetic enema.
- . Nutrient enema.

**Medical usage**

The principle medical usages of enemata are:

**Bowel cleansing**

As bowel stimulants, enemata are employed for the same purpose ,as orally administered laxatives, to relieve constipation, to treat fecal impaction, to empty the colon prior to a medical procedure such as colonoscopy. (14) Plain water, castile soap, glycerol, buffered sodium phosphate, normal saline, baking soda (sodium bicarbonate)

**Bowel management**

Patients who have a bowel disability , a medical condition which impairs control of defecation, e.g. fecal incontinence or constipation can use bowel management techniques to choose a predictable time and place to evacuate without bowel management, such persons might either suffer from the feeling of not getting relief or they might include a controlled diet and establishing a toilet routine , a daily enema can be taken to empty the colon, thus prevailing unwanted and uncontrolled bowel movements that day. By regularly emptying the bowel using trans anal irrigation, controlled bowel function is often re- established to a high degree, thus enabling development of a consistent bowel routine. (16, 17)

**Trans anal irrigation**

TAI, also termed retrograde irrigation, is designed to assist evacuation using a water enema as a treatment for persons with bowel dysfunction, including fecal incontinence or constipation, especially obstructed defecation. Its effectiveness varies considerably, some individuals experiencing complete control of incontinence, but others reporting little or no benefit. (17)

**Contrast (X-Ray)**

In a lower gastro intestinal series an enema that may contain barium sulfate powder or a water soluble contrast agent is used in the radiological imaging of the bowel, called a barium enema, such enemata are sometimes the only practical way to view the colon in a relatively safe manner. (18)

**Medication administration**

The administration of substances into the blood stream. This may be done in situations where it is undesirable or impossible to deliver a medication by mouth, such as anti emetics given to reduce nausea additionally, general anti angiogenic agents, who work better without digestion, can be safely administered via a gentle enema.

Administration by enema avoids having the medication pass through the entire gastrointestinal tract, therefore simplifying the delivery of the medication to the affected area and timing the amount that is absorbed into the blood stream. Rectal corticosteroid enemata are sometimes used to treat mild or moderate ulcerative colitis.

**Other uses**

**Colonic irrigation**

The term colonic irrigation is commonly is used in gastroenterology to refer to the practice of introducing water through a colostomy or a surgically constructed conduct as a treatment for constipation.

**Colon cleansing**

The same term is also used in alternative medicine; it may involve the use of substances mixed with water in order to detoxify the body. Practitioners believe the accumulation of fecal matter in the large intestine leads to ill health and the evacuation of fecal matter detoxify the body and improves health. (1, 20)

**Pleasure**

Enjoyment of enemata is known as klismaphilia, which medically is classified as a paraphilia, a person with klismaphilia is a klismaphile.

Klismaphiles can gain satisfactions of enemata through fantasies, by actually receiving or giving one or through the process of eliminating steps to being administered one (e.g. under the pretence of being constipated). An enema can be an auxiliary to or even a substitute for genital sexual activity. (21, 22, 23)

**Punitive usage**

Enemata have also been forcibly applied as a means of punishment, use of pepper and turpentine enemata by police forces as a way to punish people in post independency Argentina, turpentine enemata were very harsh purgatives. (24)

In addition to the above written uses of enema, it is strictly advised even in all types of head and neck diseases, abnormal conditions of kidneys, bladder and for absorption of matter from upper regions to lower regions of the body is beneficial, thus the purgative drugs (25). Some water based enemata are also used as relieving agent for irritable bowel syndrome, using cayenne pepper to squelch irrigation in the colon and rectal area. General anesthetic agents for surgical purposes are sometimes administered by way of an enema. Occasionally anesthetic agents are used rectally to reduce medically induced vomiting during and after surgical procedures, in an attempt to avoid aspiration of stomach contents (4, 5)

As per the uses and classification of enema material which are used are briefly mentioned in the below table;

S.NO.	Evacuant	Retention
1	Warm water	Starch opium
2	Ecnema saponins	Normal saline
3	Glycerin	Astringent
4	Olive oil	Nutrient
5	Castor oil	Magnesium sulphate
6	Turpentine	barium

### General principles of enema

1. Enema must be given in moderate time (with regards to heat and cold), according to Avicenna, the best time for giving an enema is relatively the cool hours of the morning and evening. When there is less distress, disturbance and fainting.
2. Before giving the enema it is better to give enema of hot water including reasonable oil.
3. Cough, hiccup and sneezing should be prohibited when the proper device for the patients to whom enema is going to be administered.
4. Enema should be given slowly; otherwise the enema matter will come out due to contractions and peristaltic movements of intestines.
5. Enema matter drug should be moderate with regard to viscosity and it should be Luke warm. (4,25)

Bowel stimulating enema consists of water, which works primarily as a mechanical stimulant or they may be made up of water with baking soda (sodium bicarbonate) or water with a mild hand soap dissolved in it; buffered sodium, potassium solution, which draws additional water from the blood stream into the colon and increases the effectiveness of the enema.

In the contrast, the isotonic saline solution is least irritating to the rectum and colon, having a neutral concentration gradient. It was thought good ideas to cleanse the bowel in case of fever; also pregnant women were given enemas prior to labor, supposedly to reduce the risk of feces being passed during contractions.

### Waza al Mohtaqin (posture for one who takes enema)

The best posture is to sleep on the left side with the abduction of the left thigh (fully extended) and the right thigh adducted; this is called Sim's posture in modern technology. In this posture the enema matter will easily gets inside the rectum, after that the buttocks should be elevated with the help of pillows. If there is need to obstruct the enema medicine for their proper action. Then the patient should be kept in inverted/pronated posture. (10)

### Posture of Mohtaqin (posture in different diseases) (10)

S.NO.	Diseases	Posture of patient
1.	Head & Neck	Patient should be in supine posture. A pillow can be given beneath head & neck
2.	Intestinal colic & abdominal pain of unknown etiology	Pillow should be kept beneath the head & chest and patient should be on knee down position. Abdomen is elevated in this posture. This posture is called as knee chest or Genupectoral posture.
3.	Dysenteries	Pillow should be kept beneath the back with the patient in supine posture.
4.	Renal	Patient should be in supine posture and the pillow will be kept beneath and buttocks.

### Procedure of enema

Enema administration is virtually painless as long as an experienced nursing professional gives the enema with good nursing skills.

Patient should empty his/her bladder before an enema to reduce the discomfort associated with adding fluid to the bowel.

### Steps on how to give an enema

1. Wash the hands thoroughly with soap and warm water for a minimum of 15 seconds before beginning the procedure.
2. Gather the needed material (enema bag or bulb, lubricant, gloves, enema solution, ramp clamp and a towel. (27)
3. Warm the solution before placing it into an enema bag or bulb to a temperature between 99 and 106 degree.
4. Place a towel under patient to collect any leakage during the procedure. Lay the patient in a position to receive the enema. The ideal positions for enema administration are the right side positions, left side position, knee chest position and on the back.
5. Lubricate the tip of enema application before inserting it into the rectum of the patient. Ensure that the entire length of the enema tip is lubricated and that the opening of the tip remains free from clogs so that the solution flows freely when the time comes to administer the enema.

6. Insert the lubricated enema tip into the patient's rectum and release the enema terbing clamp.
7. Monitor the patient for cramping as the enema solution flows comfortably into the patients rectum. Signs of cramping are notices while monitoring the patient stop the flow and ask the patient to take several deep breaths, continue the process, once the patient becomes comfortable again. (28) Breathe through your mouth if you feel cramps. Close the clamp temporarily until the cramping eases then resume the flow.
8. Gently massage the patient's abdominal area. Massage down the left portion of the patients abdomen, then massage from left to right across the lower belly bottom, continue the massage up to the right portion of the abdomen then massage from right to left under the patients rib cage.
9. Remove the tip of the enema from the patient's rectum once the device is empty. Ask the patient to remain in the current position until he or she has a strong urge for a bowel movement.
10. Ask the patient to massage the abdomen while the enema is being expelled from the body. Tell the patient to massage the area under the belly bottom from right to left and from left to right under the patient's rib cage. This massaging process helps to loosen fecal matter.
11. Dispose of the gloves used to administer the enema. Wash hands with soap and water after the process is complete.

### Complications of the enema administration

Complications from the enema administration include muscle tone loss, fluid overflow, bowel irritation, internal hemorrhaging caused by an imbalance of electrolytes. An enema should not be administered to be a patient with rectal bleeding, abdominal pain, prolapsed rectal tissue, myocardial infarction or arrhythmias. (26)

Also contra indicated in several kidney diseases, congestive heart failure and active inflammatory bowel disease.

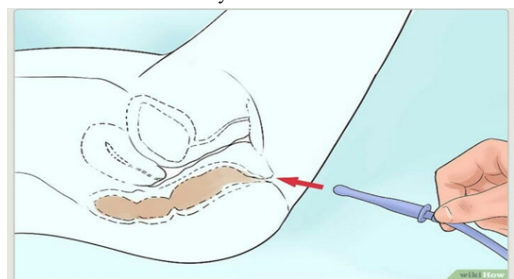


Diagram showing inserting enema

### CONCLUSION

The current literature supports the use of rectal enema in case of constipation, meditational administration as well as pre investigative and preoperative procedure.

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