

MUSEUM OF THE ROYAL PHARMACEUTICAL SOCIETY
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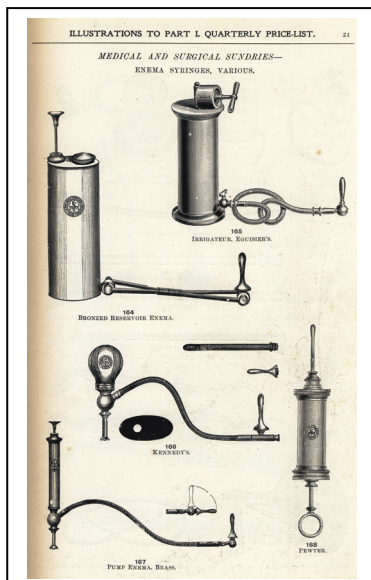
INFORMATION SHEET: 21

ENEMAS

*THE USE OF ENEMAS IS A THERAPY WITH A LONG HISTORY.
THE APPARATUS HAS EVOLVED, PARTICULARLY AT THE HEIGHT OF THE POPULARITY
OF ENEMAS IN THE 1800s*

Enemas or clysters have been used to administer solutions to the rectum since ancient times. Their earliest recorded use was by the Egyptians to treat diseases of the anus such as piles. They were also used as an alternative means of introducing nutrients into the body. The first reference to this is made by Celsus who 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. However, although these functions continued, the primary role of the enema, especially from the 1700s onwards, was the clearing of the bowels using a water-based solution.

Enemas have often been over-used. In the first century AD Celsus noted that “if the bowels are violently purged or clystered too often it debilitates the patient.” In 19th century Britain, self administration of enemas became a regular habit for many affluent people, resulting in dependency and damage to the rectum.



Over time, many types of apparatus have been used to administer enemas. It is likely that ancient civilisations and African and American Indian tribes were using hollow reeds, gourds, horns and other natural devices as enemas from early times. The first illustrations of enema design are medieval, and show a simple device with a tube attached to a pig's bladder which acted as a pump action bulb. Simple piston syringe enemas or clysters were in use by the 1400s, and continued to be used into the 1800s. From the 1600s onwards, enemas were mainly designed for self administration at home. Many were French, due to the wide usage of the enema in France.

The 1800s saw an abundance of new innovations. Many enemas were designed to include a long tube attachment for the vagina due to their increased use for contraceptive douching after around 1860. *Plunge*

reservoir enemas relied on pressure from a plunger forced down into an upright reservoir. *Valve pump enemas* consisted of a two way valve syringe with attachments, and appeared after 1820. *Mechanical reservoir enemas* had an upright reservoir from which solution was propelled by release of pressure through a valve. *Bulb enemas*, introduced in around 1840, consisted of a rubber bulb with tubing attached at both ends, sometimes with metal fittings added. The bulb enema continued in use well into the twentieth century. Enemas are still occasionally given, but are usually administered by medical professionals using a funnel and tube or disposable plastic proprietary enema.

A more recent development is the *microenema*, also called a rectal tube, which is a medicine that is generally administered by attaching a short length of tubing to a syringe in which the microenema has been placed. The tubing is lubricated and inserted rectally, followed by depressing the plunger to deliver the drug. As an alternative, the microenema can be placed in a plastic bulb-device where the tip is lubricated and then inserted rectally and the bulb squeezed to expel the drug.

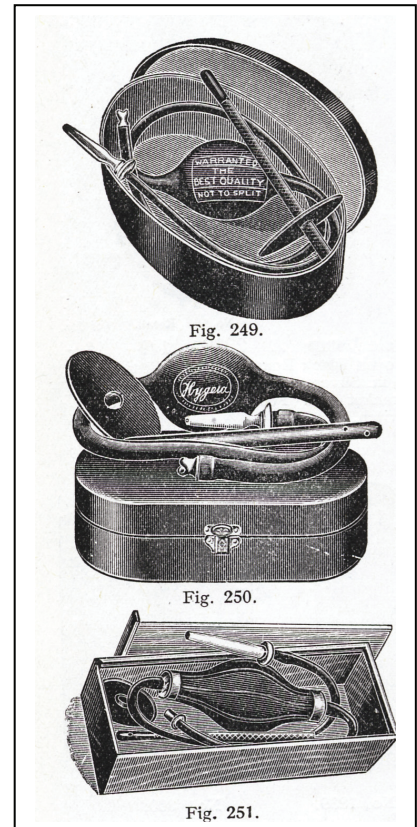
Enemas were also once used to resuscitate drowned people. Tobacco smoke was blown into the rectum of the “apparently drowned” to provide warmth and stimulation. Tobacco resuscitation kits consisting of a pair of bellows and a tube were provided by the Royal Humane Society of London (founded in 1774 as the Society for the Recovery of the Apparently Drowned) and placed at various points along the Thames.

Various other designs of syringe have also acted as a means of introducing drugs to the rectum, vagina and urethra. Some large multi purpose silver and pewter syringes were used for this from the 1600s onwards, but during the 1800s a wide range of syringes made of glass and pewter, with different designs for male and female, appeared on the market. They could be used to administer substances such as glycerine, to clear the rectum.

Colonic irrigation (or hydrotherapy) has an ancient history, but is still popular as an alternative medical procedure. Rather like an enema, it involves the introduction of water, sometimes infused with minerals or other substances, into the colon. The fluid is released after a short period, and the process is repeated a number of times during the course of a treatment. Current practitioners claim that the treatment helps chronic fatigue, arthritis and sinusitis, as well as leading to a general feeling of wellness.

Colonic irrigation was practised in ancient civilisations to treat constipation which was believed to cause a wide range of diseases. It is referred to in the Ancient Egyptian *Ebers papyrus* which dates from around 1500 B.C. The bowel and colon were cleansed using water with the addition of various herbs.

The image overleaf dating from the early 1800s shows an apothecary preparing to apply a huge clyster syringe to an unseen lady – her discarded shoe is visible next to the jug on the right side of the caricature.



From Butler & Crispe 1939
wholesale catalogue

This information sheet is also available in a large font size.

Please contact us on 020 7572 2210 or email

museum@rpharms.com