



CONTRAINDICATIONS FOR COLON HYDROTHERAPY TREATMENT

RICTAT Contraindications 23.04.24 ©

ABSOLUTE CONTRAINDICATIONS

- Abdominal Hernia**
Defect in abdominal wall, risk of strangulation of the bowel.
- Active Fissure**
Tear or crack in the anus, usually very painful when active. Varies from small crack to open fissure that requires surgery.
- Active Inflammatory Bowel Disorders - Ulcerative Colitis, Crohn's, Colitis and Diverticulitis.**
Risk of bleeding, tissue damage and may exacerbate symptoms. However, if medicated with drugs, for example Sulfasalazine and Azathioprine. Only occasion this is fine to treat if pretreating in remission and without occurrence before 24-4-24.
- Active Rectal Fistula**
Caused by an abscess 'tunnelling into the rectum' sometimes requiring surgery.
- Anti-Coagulants**
Warfarin is administered to artificially affect and reduce blood clotting time. If the client is on Warfarin, or a treatment dose of an injectable anti-coagulant (e.g., Daltaparin, Tinzaparin,) then it is contraindicated. However, if they are on low dose prophylactic anti-coagulant and not being monitored by medical staff, then fine to treat.
- Autonomic Dysreflexia (occurs in spinal injuries at or above T6)**
Danger of general body spasm, particularly related to insertion of speculum.
- Bowel Obstruction – e.g., adhesions, volvulus, tumour, etc.**
With a bowel obstruction no gas is passed and client would be requiring medical attention. (Not to be confused with faecal impaction – caused by chronic constipation.)
- Bowel Prolapse or Rectal Prolapse**
Due to weakened tissues not supporting the organs properly. Risk of making the condition worse.
- Carcinoma of the colon or rectum**
Risk of perforation, bleeding, bowel is diseased and may be damaged.
- Chemotherapy**
No-one to be treated whilst receiving chemotherapy. High risk of infection due to no, or low immune response (neutropenia). Minimum of 3 months once bloods levels to return to normal. Reference - <http://www.bnf.nice.org.uk/>

- **Diabetes – Uncontrolled/Unbalanced.**
Risk of hypoglycaemia during a treatment.
- **Epilepsy**
No treatment if the client does not have a driving license without medical approval
- **Heart Failure**
Requiring care of medical professional, ongoing monitoring, and medication. Do not treat. (On advice from Cardiac consultant, St Bartholomew Hospital. April 2021.)
- **Hypertension** –severe or uncontrolled.
Risk of stroke or heart attack.
- **Inflamed Haemorrhoids (Piles)**
May exacerbate symptoms and cause pain and bleeding.
- **Intussusception**
Do not treat as the bowel ‘telescopes’ on itself.
- **Liver function**
Any condition that affects the liver and decreases its function needs to be assessed and if the client is under the care of a medical professional.
- **Neutropenic**
Low or no immune system. Severe risk of infection. Do not treat.
- **Pregnancy**
Risk of miscarriage.
- **Radiotherapy of abdominal area not discharged from medical care**
Radiotherapy burns and damages other tissues as well as the tumour, risk of perforation. Do not treat for 2 years.
- **Rectal Bleeding**
All rectal bleeding needs investigation by GP, unless a small speck of blood on the tissue after straining to pass a large stool.
- **Reduced kidney function**
Renal insufficiency which requires reduced fluid intake under the supervision of medical professional. Kidney function must be a minimum of 50% with two kidneys and 100% with only one kidney and not fluid restricted.
- **Tachycardia or AF-** Do not treat due to inconsistent heart rate pattern
- **Tight Sphincter**
Unable to insert speculum without pain.
- **Undiagnosed Persistent Diarrhoea**
Needs professional medical investigation.

Under medical Investigations/awaiting medical results – do not treat – depending

The following timelines given post-surgery/treatment are deliberately conservative and could be less with the written support of a Medical Professional.

- Recent bowel biopsy - 3 months.
- Recent prostate biopsy made through the bowel - 3 months.
- Recent abdominal surgery, laparoscopic or open – 6 months depending on severity of surgery and on medical discharge with no complications,
- Recent laparoscopic investigation – 6 weeks and on medical discharge
- Recent surgery of colon or rectum - 6 months fully discharged
- Recent Gastric Band, Sleeve or Bypass Surgery – 6 months fully discharged
- Recent Gastric Band Removal – 6 months full discharged no problems.

RELATIVE CONTRAINDICATIONS

The following are industry agreed relative contraindications. The suitability of the treatment remains specific to the individual and must be assessed by a professional Colonic Hydrotherapist.

- Highly anxious, stressed or emotional client.
- Fainting (vaso-vagal attack).
- Joint Replacement (hip, shoulder, knee.)
Awareness of positioning on couch and as pain allows. NB. Hips – knees no higher than 90 degrees when they're on their side and pillow between legs during treatment if on side, awareness of possible dislocation.
- Severe underweight or eating disorders.
Aware of not using colonics for further weight loss.
- Severe anaemia.
Risk of fainting during a treatment.
- UTI – Urinary Tract Infection, General infections /Antibiotic Treatment**
– do not treat until the course of antibiotics for the infection has been completed.
- Under medical Investigations/awaiting medical results** – consider the nature of the conditions that the client is having tests for e.g., bowel, gynaecological, liver, pancreas, digestive, heart. If digestive in nature or similar await results.

Reference - <http://www.bnf.nice.org.uk/>