



RICTAT - Frequently Asked Questions – 23.4.24© V10

Below is a list of regularly asked FAQ's. It is not exhaustive, and must be taken along with the whole picture of your client's health.

If you feel there is something that can be added to this list, please let us know so that we can continue to compile a comprehensive list.

❖ **Age 'Elderly'**

Not a problem, just get a general overview of client's health and medication.

❖ **Asthma – using a steroid inhaler**

No problem treating as there is a small amount of steroid in the inhaler and is not systemic.

❖ **Blood Pressure**

High Blood Pressure

If it is under control, it's fine to treat.

If it is not under control do not treat. By increasing blood volume by water being absorbed through the colon wall it adds pressure to already struggling systems which are trying to achieve homeostasis i.e., heart and kidneys.

Low Blood Pressure -

Be aware they may faint as they get up from the couch. Often people who don't drink enough fluid, so colonics may help as the colonic is a hydrative treatment.

❖ **Blood thinning medication**

Following discussion with an anti-coagulation nurse and Nurse Prescriber we have been able to clarify who we can and cannot treat.

Clients on warfarin and 'treatment' level doses of low molecular weight heparins (LMWH) e.g., Clexane/ Ennoxaparin - Fragmin/Dalteparin or Innohep/Tinzaparin cannot be treated. This is because the time it takes to clot blood is artificially lengthened increasing risk of bleeding.

Clients on the lower prophylactic doses of LMWH's are ok to treat. The client should know the difference, if they are unsure ask them to get clarification from their GP.

❖ **Breast Augmentation**

No problems treating as long as no other issues and discharged.

- ❖ **Breast Feeding** – ok to treat, but **do not use herbs if breast feeding.**
- ❖ **Cervical Smear**
No problem in treating client.
- ❖ **Children under 16 years or Young Person between 16-18 years of age.**
Any client under the age of 16 must have a referral from a GP/medical specialist and a guardian present during the treatment, otherwise don't treat

Any client aged 16-18 needs a guardian present and require both the client and the guardian to sign the consent form.
- ❖ **Cholesterol - High -Taking Statins**
No problem in treating client.
- ❖ **Chronic Fatigue Syndrome- CFS (Also known as ME.)**
No problem in treating client, be aware of client's energy level, they may become fatigued quickly, so shorter treatment may be needed.
- ❖ **Colonoscopy - Pre and Post**
No problem in treating client as long as procedure is not related to indication of bowel cancer or a condition that might increase risk of bowel perforation and **await results before treating.**

Post colonoscopy - Wait until bowel movements have returned and results have been received.
- ❖ **Controlled or Uncontrolled- What is the difference?**
Using blood pressure as an example.
Someone comes to you and says they have been diagnosed with high blood pressure.

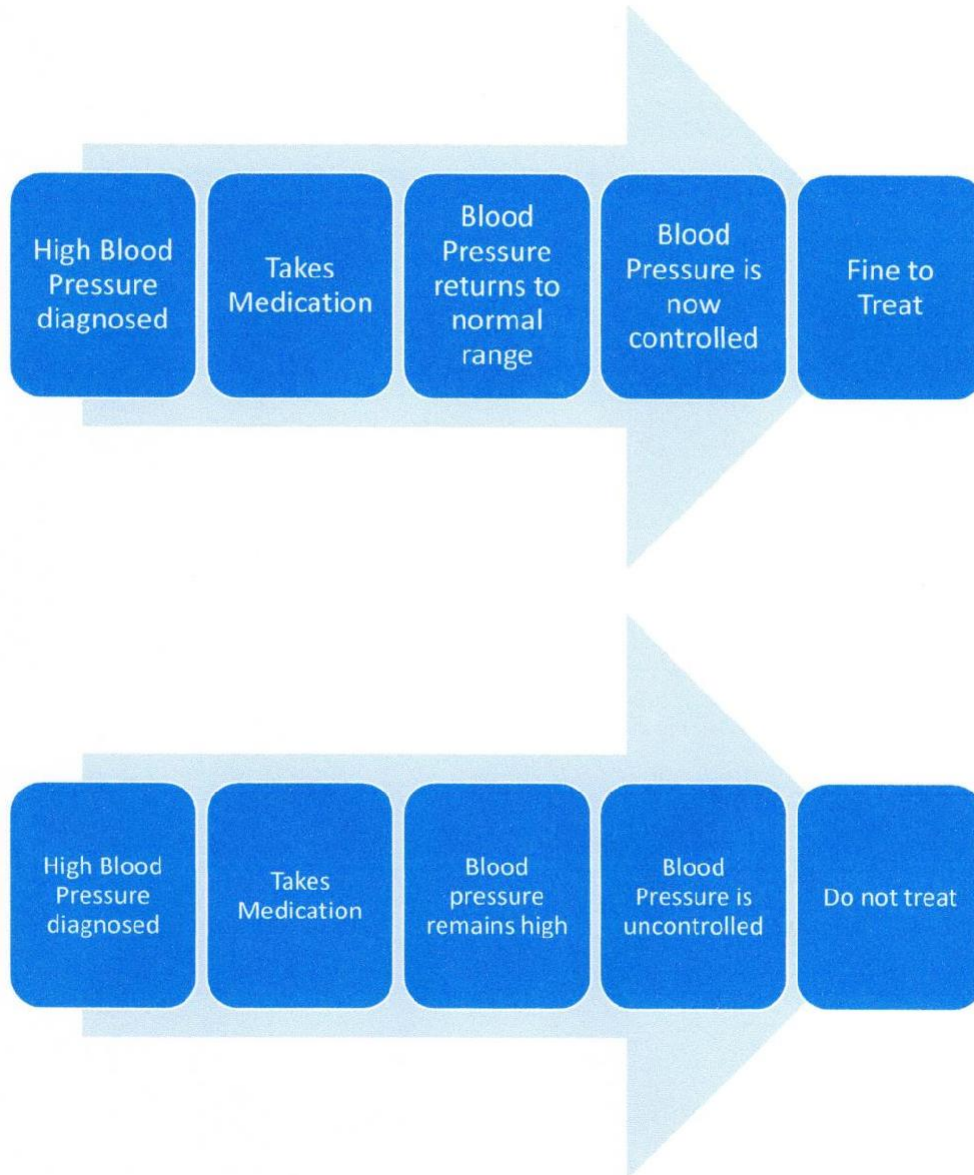
Can you treat them?

Whilst the blood pressure is not within normal ranges, we cannot treat them.
If they are taking blood pressure medication and it has brought their blood pressure back under control and into the normal range, then effectively, they no longer have high blood pressure, so they are fine to treat.

If they are taking blood pressure medication and their blood pressure is still not controlled, i.e., it is still high, we cannot treat.

If they choose not to take medication and their blood pressure is not within normal range, we cannot treat.

Controlled or Uncontrolled? High Blood Pressure



- ❖ **COPD - (Congestive Obstructive Pulmonary Disease.)**
No problem in treating client, but look at the person as a whole.
- ❖ **Deep Vein Thrombosis (DVT)**
If the client is on Warfarin, or a treatment dose of an injectable anti-coagulant, then it is contraindicated. However, if they are on low dose prophylactic and not being monitored by medical staff, then fine to treat.

❖ **Diabetes**

No problem if their diabetes is under control. Both Type 1 and 2.

Type 1 Diabetics is due to a failure with the pancreas producing insulin and are insulin dependent requiring self-administered daily injections.

Type 2 – still produce insulin but it may not be sufficient, often controlled with metformin or diet controlled. Good practice to have something like Lucozade within reach in case their sugar levels start to go low. Recommend they eat before coming for a treatment as colonics sometimes trigger the stomach to empty into the small intestine and that can make the sugar levels drop.

- ❖ **Diverticulosis** – check for any flare ups – if flare ups have occurred do not treat due to potential weakness. If no flare ups then proceed with caution. Be sure the client can be absolute that they have Diverticulosis and not Diverticulitis, If in doubt request evidence.

❖ **Eating Disorders**

Fine to treat if they are not using colonics for managing their weight and becoming obsessive. e.g., Bulimia, Anorexia Nervosa etc

❖ **Ehlers Danlos Syndrome EDS (hyper stretchy skin)**

Is a genetic, connective tissue disorder causing hyper stretchy skin, Hypermobility or can affect blood vessels and can affect anywhere in the body. There is no problem in treating client, as it may help with constipation. Check with client that there have been no changes in their digestive system.

❖ **Endometriosis**

No problem in treating client, unless they are in pain.

❖ **Faecal Impaction**

This is when a large hard mass of stool gets stuck in the colon and can't get pushed out the usual way – this is fine to treat. If no gas is being passed, if client is vomiting or severe pain and abdominal distention then seek medical advice as this may indicate onset of a bowel obstruction. If there are any investigations ongoing wait for the results.

- ❖ **Fatty Liver Disease** – they are graded 1-5 from mild problems to liver failure. Need to check their individual circumstances.

❖ **Fibromyalgia**

No problem in treating client.

- ❖ **Flying** – exercise caution because we may be disturbing gas pockets during the treatment. The cabin pressure may exacerbate the gas so consider carefully any treatment if flying within 2 weeks as we can disturb gas pockets, which could cause the client some discomfort.

❖ **Frequency of Treatments**

Maximum of 24 treatments per client per year, unless you can justify otherwise e.g., spinal issue.

❖ **Gall Bladder and Gall Stones**

Fine to treat Gall stones. Be careful infusing coffee as it stimulates bile production, so can also stimulate the gall bladder. It may create pain, nausea, and discomfort for client. Gall bladder removal fine to treat following surgery and full recovery – minimum of 3-6 months.

- ❖ **Gastric Band**
Fine to treat as long as no problems and no other health conditions.

Recent Gastric Band Removal – 6 months full discharged no problems.
- ❖ **Gastroparesis** - is where the stomach does not empty properly, food passes through the stomach more slowly and often leaves a feeling of fullness, often diagnosed by symptoms, ok to treat. Can be common with diabetes.
- ❖ **Gastric Bypass, Sleeve or Band**
Major surgery, treat only after medical discharge and no complications, no treatment until 6 months post-surgery.
- ❖ **Gilberts Syndrome** – Gilbert's syndrome is characterised by the liver's inability to process the yellowish-brown pigment in bile (bilirubin). Too much bilirubin can cause yellowing of the skin and eyes (jaundice). Gilbert's syndrome is considered harmless and typically does not need medical treatment.
- ❖ **Heart Failure**
Do not treat
- ❖ **Heart Attack - (Myocardial Infarction)**
If they have made a full recovery and have good cardiac function, it is fine to treat, otherwise a medical note is required.
- ❖ **Hirschsprung's Disease**
Dealt with at a young age, so once it's been rectified, it doesn't exist so fine to treat. Be mindful of how much surgery has been undertaken, bowel could be shortened, so don't overfill.
- ❖ **Hernia**
Only hiatus hernia is fine to treat as it's in the thoracic cavity and doesn't affect the colon. Fill gently and maybe sit up due to reflux.
All other hernias are contra-indicated.
- ❖ **HIV**
No problem in treating client if all parameters stable
- ❖ **Hysterectomy**
Abdominal surgery, so on medical discharge and no complications, minimum of 3-6 months.
- ❖ **Kidney Function**
Colonics can increase fluid circulation as one of the primary functions of the colon is to absorb fluid. Generally, if the client is on fluid restriction and under medical supervision then this is contraindicated. Kidney function must be a minimum of 50% with two kidneys and 100% with only one kidney and not fluid restricted.

- ❖ **Laparoscopy**
Abdominal surgery so on medical discharge and no complications, generally 3-6 months. e.g., hysterectomy

If it is a laparoscopic investigation (no surgical procedure undertaken – just a look around) then 6 weeks
- ❖ **Liposuction**
Only affects fat layer so doesn't affect organs. Fine to treat, but be mindful of pain, bruising and the general state of the client.
- ❖ **Liver function**
Any condition that affects the liver and decreases its function needs to be assessed. If recent blood tests are in normal range ok to treat, be aware of using herbs and coffee and its stimulating effect on the liver. Do not treat if under medical supervision unless you have written consent from the Doctor/Consultant.
- ❖ **Low Thyroid**
No problem in treating client.
- ❖ **Multiple Sclerosis**
No problem in treating client as long as organs are not affected.
- ❖ **Motor Neurone Disease**
No problem in treating client as long as organs are not affected.
- ❖ **Neutropenia**
Low or no immune system. Severe risk of infection. Do not treat.
- ❖ **Oedema**
Ascertain the cause of the oedema (water retention), e.g., legs swelling. If due to heart/kidney problems/failure, do not treat.
- ❖ **Ovarian Cysts**
No problem in treating client, can vary massively in size. Many women don't know they have them. If painful don't massage the area.
- ❖ **PPI (proton pump inhibitors)** eg Omeprazole, Lansoprazole. Proton pumps are enzymes in the lining of your stomach that help it make acid to digest food. Omeprazole prevents proton pumps working properly which reduces the amount of acid the stomach makes. Check on underlying cause for reason as to why the client has been prescribed it.
- ❖ **Pancreatitis**
If acute they are likely to be very unwell, so do not treat.
- ❖ **Perforation**
A hole in the intestinal wall leaking contents into abdominal space which should be sterile therefore local or extensive infection can occur. Do not treat.

- ❖ **Post Pregnancy**
 - Natural birth, no problems, no ongoing issues – 6 weeks.
 - Caesarian – Constitutes Abdominal Surgery so treat on medical discharge with no complications, minimum of 6 months.
 - Breast Feeding – No problem treating, may be wise to recommend they express milk beforehand just in case they feel any nausea or weak.

- ❖ **Post Miscarriage or Abortion**

Depends on when the miscarriage or abortion occurs. Wait until women's next period or when they feel ready.

- ❖ **Pre-IVF**

Fine to treat up to the start of treatment. Use herbs with caution if they are having hormone injections, just as a mindful action of not interfering with anything.

- ❖ **PCOS (Poly-Cystic Ovary Syndrome)**

No problem in treating client.

- ❖ **Prolapse – Rectal/Bowel or Vaginal**

Rectal/Bowel - Due to weakened tissues not supporting the organs properly. Risk of making the condition worse.

Bladder, Vagina and Uterus - it is fine to treat but you must consider other factors that might indicate an inherent weakness which may then be contra-indicated. e.g., repair that has not been successful or multiple prolapses.

- ❖ **Prostate (Enlarged)**

If you can't insert the scope easily or it causes any discomfort don't treat. Recommend client see a GP if it hasn't already been diagnosed. You are not trained to examine prostate glands.

- ❖ **Prostatitis**

Infection of the prostate gland, ok to treat if comfortable to insert speculum.

- ❖ **Rectocele**

Fine to treat gently.

- ❖ **Rheumatoid Arthritis**

No problem in treating client.

- ❖ **Sickness and Diarrhoea Bug** – Do no treat until they are eating normally and back to work.

- ❖ **Steroids**

No problem in treating client, but look at the person as a whole. Be aware of the reason for a client taking steroids long term, they may have a contraindicated condition e.g., Colitis or IBD. If taking steroids for something that is non-bowel related, e.g., psoriasis, then this would be fine to treat as this does not affect the integrity of the bowel wall.

Steroids do not affect the integrity of the bowel wall.
(Source: BNF – British National Formula, EMC – Electronic Medicines Compendium; Pharmacodynamics – the way it works on the body).

- ❖ **Stroke**
Dependent on blood pressure. Consider any medication such as Warfarin, (which is contraindicated) possible mobility problems, positioning on couch.

- ❖ **Surgery – Abdominal**
See contraindications.

- ❖ **TIA (mini-stroke)**
Once resolved fine to treat.

- ❖ **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.

- ❖ **UTI – Urinary Tract Infection/Antibiotic Treatment** – do not treat until the course of antibiotics for the infection has been completed.

- ❖ **Uncontrolled Diabetes and Epilepsy**
If someone has either condition, we have to look at whether it is controlled. When either of these conditions is not being controlled, they are contra-indicated and we cannot treat them.

If a client says their condition is controlled, we still have to look at the wider picture of how often they suffer episodes, what are the triggers, how long have they been diagnosed.

- ❖ **Weight Loss Injections** – ok to treat, check clients side effects.

- ❖ **Wilson's Syndrome**
A genetic disease that builds up excess copper in the body and affects liver and brain. See liver function.

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