The ROYAL MARSDEN

NHS Foundation Trust

Patient information

Using sucralfate enemas

Your team will have discussed with you various treatments for the bleeding you are experiencing from your rectum. They have recommended that you should use sucralfate enemas. This factsheet provides guidance on how to use a sucralfate enema.

What is sucralfate?

Sucralfate is a medication licensed for use in people with ulcers or inflammation in the stomach. Following much research, we know that sucralfate is also a very safe and effective treatment for bleeding from the lower bowel, which is a consequence of radiation treatment. This bleeding comes from fragile blood vessels in the bowel wall which can break and bleed easily. The bleeding can be triggered by passing a hard, constipated stool or can be due to increased frequency of opening your bowels often associated with loose stool or diarrhoea.

Why do I need to use sucralfate enemas?

Fragile blood vessels in the lower bowel are a consequence of the radiotherapy. Bleeding rarely becomes a big problem unless you need to strain to open your bowels, you open your bowels very frequently or you take blood thinning medicines such as aspirin, clopidogrel, dipiridamole, dabigatran, rivaroxaban, apixaban or warfarin.

After radiotherapy, fragile blood vessels can develop in any part of the bowel exposed to the radiotherapy beam. Often these never cause any problems, but up to half the people who have been treated with radiotherapy to a cancer in the pelvis will notice occasional bleeding from the lower bowel, and in a few patients the bleeding becomes troublesome.

Research suggests that the bleeding usually starts 12-18 months after radiotherapy has finished. It will then reduce over several years but it will not go away quickly.

Those who experience troublesome bleeding will notice some improvement after about one week of treatment using sucralfate enemas twice a day. To use sucralfate as an enema means that it needs to be given directly into your lower bowel. About two thirds of patients (2 in 3 people) find that their bleeding either stops or improves significantly following the use of sucralfate.

How do sucralfate enemas work?

Sucralfate forms a protective layer over the bowel wall and protects the fragile blood vessels from breaking. Using sucralfate enemas may also increase the rate that these fragile blood vessels heal and disappear.

Preparing to use a sucralfate enema

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- The hospital pharmacy will provide sucralfate in a liquid form it will either be in a
 prefilled syringe or the specialist nurses will provide you with syringe and tubing if
 required
- When you prepare to use an enema, begin with washing your hands and clearing a clean surface in your bedroom to work on. You may wish to lay a towel on your bed.
- Shake the sucralfate suspension (solution).
- Apply some lubricating jelly to the nozzle of the enema.

Giving the enema

- Lie down on your bed on your left side and bend your knees up towards your chest. Holding the pre-prepared enema in one hand, feel for your anus with the other, and gently guide the lubricated tip of the nozzle into your anus so that several inches enter your lower bowel.
- Squeeze the bottle gently so that all the solution goes into your lower bowel.
- Try to hold the solution inside for as long as possible, despite it making you feel like you really need to open your bowels. At least 15 minutes is ideal. You will need to remain lying down during this time try to roll over several times if you are able to do so. Try to spend at least half the time lying on your tummy so that the solution has the chance to cover the parts of your bowel most likely to be worst affected.
- Visit the toilet to relieve your bowels.
- When you have finished, wash your hands.
- Dispose of the pre-filled sucralfate bottle.

You should follow this procedure twice a day and we strongly recommend that you continue with it twice a day for 10-14 days after the bleeding has stopped. Then use the enema just once a day for a further week to make sure the bleeding does not start again. If bleeding does start again, go back to using sucralfate enemas twice a day.

Store the sucralfate and equipment in a safe place in case the bleeding starts again. To help heal the blood vessels, your doctor may advise you to continue using a sucralfate enema once a day even if there is no bleeding.

Contact details

If you have any questions about any aspect of your treatment or if you feel unwell, please contact us.

GI and Nutrition Team 020 7811 8216 or 8106
Pharmacy Medicines Helpline via the Hotline below
(Monday to Friday 9am - 5pm)

Alternatively, please call



The Royal Marsden Macmillan Hotline:

020 8915 6899

(available 24 hours a day, 7 days a week)



