

What to expect in a colonics treatment with West London Colonics?

First of all, for those new to this procedure, it should be clarified that colon hydrotherapy, colon irrigation, colon cleansing and colonics are synonyms.

People are curious about the procedure. “So,” they ask with a gleam in their eye, “what *exactly* happens during a colonic”.

This short article attempts to satisfy that understandable curiosity.

Here’s a run through of the colonics procedure (skipping the first-time client consultation/ repeat client review stage, and optional pre-colonic massage stage). This is a description of the *closed* system used at WLC (the open system operates differently).

Filtered, purified water enters the colon via a disposable (single use) device (speculum) one part of which is attached to a narrow plastic tube. A second part of the speculum attaches to a larger and wider plastic see-through tube large enough for waste and gas to exit easily.

(Both the tubes and speculums are single use, and there is a strict protocol for their immediate disposal in special containers after use.)

The client changes into a freshly laundered gown in the en-suite toilet/ changing room facility. An equally clean fleece blanket is provided for your dignity and comfort. There is only ever one client in clinic with the therapist during the treatment. (Couples who book for the *couples introductory colonics offer*, however, are often comfortable coming in together; and in my experience that works very well).

Once the client is comfortably on the table, they are positioned for the speculum to be inserted. At all times a sense of decorum is preserved.

The stomach will be massaged at strategic intervals during the session through the gown to help ease cramps and facilitate peristaltic movement.

What happens during the treatment varies. If the client is dehydrated, perhaps 10 to 20 minutes will be taken up hydrating the colon. It could also be that the first 10 minutes (or more) could be taken up just allowing excess gas in the colon to release.

As one would expect, with the exit of gas and other waste via the transparent waste pipe, water moves in wave like fashion, slowly in and out of the colon (as gas moves out, water goes a little further into the colon). Some detective work then ensues. What comes through the waste tube gives an indication of the state of clients’ digestive, assimilation and elimination process. Not to mention evidence of ones eating habits.

During the colonic session the cleansing occurs from superficial to deeper levels of the colon.

The initial cleansing of waste most probably is largely related to the descending colon and transverse colon. Later in the session, some deeper cleansing is likely. With the increased hydration of the colon, waste further along the transverse and ascending colon might loosen, and some mild cramping might be experienced.

This is the point at which herbal enema herbs (if needed) are introduced during the colonic. Their purpose is to reduce the clients' discomfort. The mechanism of action of the herbs briefly is as follows. The mucous membrane of the rectum and colon is porous; meaning it readily absorbs rectally administered herbs, with quick delivery (via the bloodstream) to the body area where the herbs have their primary therapeutic action. Many times the effect of enema herbs can be seen in minutes. Remember that it normally only takes 3 minutes for one surge of blood to circulate through the body and return to the heart. One can expect the herbs local action on the mucus membranes to be reassuring quick, soothing and nourishing. Obviously the specific action will vary dependent on herbs used.

When the main colonic is complete, *optionally* a post colonic enema may be administered. This is called a retention enema, implant, or low volume enema. It involves introducing an enema solution into the colon, and holding it in for a period of time (normally 10 to 15 minutes). An implant enema uses only enough liquid to fill the rectum and possibly the sigmoid colon, hence the term low volume enema. Different enema solutions are available based on the clients presenting issue. [Note: the post colonic enema implant would not be administered during a first session.]

The colonics session concludes with client being given a comfortable period of time in the toilet (which is an en suite facility), following which *after care* instructions are discussed, and confirmed on a written sheet.

The client is also given oral probiotics to take, and is invited to contact the therapist should they have any post colonic concerns or questions.

This last step is simply good practice, and maintains the therapeutic relationship. A colonic is not simply just another mechanical procedure; its successful use is both *art* and *science*.