

Enema Guide (instructional)

(By: NixPix)

Some Basics Regarding Enemas...

Enemas have been used for centuries as a remedy for constipation and maintaining good health. Even with America's puritanical attitude toward the human body, it is only in recent years that the enema has fallen from favor as an accepted "cure all". The majority of men who were born in the forties and before can remember the big, red bag their mother or dad used on them to cure everything from a cold to crankiness. Some of the "lucky" ones born in the '50s, '60s and '70s to "old-fashioned" parents have the same memories. Some remember how enemas were used as a method of discipline. For a great many of them, straight and gay, the feelings that went along with being given enemas as a kid have carried over into their adult lives and fantasies give way to reality. Still others experience their first enema as an adult in the military or in a hospital setting, find the experience erotic and develop a "kinky" fascination.

Every day in Los Angeles, dozens of straight men willingly walk through the door of a unique specialty clinic where they will be made to strip and submit to enemas administered by strong-willed ladies. Each day (or night), Masters watch their tightly bound slaves struggle to retain enemas given to them by force and listen to their moans as the internal pressure builds. Enemas hold an erotic fascination for a larger percentage of men than one might guess -- to the point where national clubs have formed for the purpose of making contacts and educating. While there is a fairly wide spread interest in enemas, many men are afraid their desires might be "too kinky" or they are lack information about enemas to make their desires become realities. Your scene may be Master/slave, Daddy/son, submission to medical authority, etc. No matter what your scene is, enemas can play a role. For that reason, we offer some basic information about enemas.

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In an hospital setting, cleansing enemas usually consist of approximately a quart and a half of water containing Castile soap. The patient is positioned on his left side with his legs drawn up. The enema bag is hung from a IV stand, approximately two feet above the patient's hips. The nozzle or tube is lubricated and then inserted about six inches into the rectum. When the flow is started, the patient is urged to take deep breaths to help him relax and minimize the discomfort.

After the enema has been administered, the a patient is encouraged to retain the enema for as long as possible; three to five minutes is normal. If the doctor has ordered a series of enemas, the intent being to completely clean out the large intestine prior to examination or surgery, enemas is administered to the patient, approximately one every hour until they return clear. Clear water enemas are given

alternately (enemas two, four, six).

QUANTITY AND RETENTION TIME: Enemas can range in volume from a half cup to more than three quarts. Two quarts is the average size for adult enemas. When a series of enemas is intended, such as in a medical scene, it is often best to begin the series with an enema of smaller volume and increase the size of each enema administered. A small enema (a quart or less) is easier to retain for longer periods, even if it contains a generous amount of soap. The longer an enema can be retained, the more effective it will be in the cleansing process.

SOLUTIONS: The three most common enemas are "soap suds" enemas, salt/soda enemas and clear water enemas.

"Soap suds" enemas are the type commonly associated with Daddy/Son Scenes and are the most effective in cleansing the bowel. The soap irritates the intestine, causing it to spasm. The soap also produces cramps and a degree of discomfort, but this type of enema is necessary in a series because one "soap suds" enema produces more effective results than two or three clear water enemas in the cleansing process. Castile soap is used in "soap suds" enemas by hospitals because it is a very pure and mild soap. Ivory hand soap is a good alternative and has been used for scores of years by individuals administering enemas to family members. For the sake of convenience, Ivory Liquid Hand Soap can be used and a "rule of thumb" is two pumps per quart of water. (When a series of enemas is intended, the first enema can be "richer" and three or four pumps per quart can be used. The following enemas can then contain normal amounts of soap.) NEVER use a detergent!

"Salt/Soda Enemas" have a very soothing effect and can be retained longer than any other type of enema. A tablespoon of table salt and/or a tablespoon of baking soda (per quart) is dissolved in the water. A salt/ soda Enema is a welcome relief to a submissive who has received several soap suds enemas.

"Clear Water Enemas" are useful in flushing the colon of soap. A good rule of thumb: whenever soap suds enemas are administered, they should followed by several clear water enemas. The exception to his rule would when time is limited; an occasional soap suds enema can be administered (without following it with a clear water enema) and the soap will provide the usual benefit without causing harm to the bowel.

TEMPERATURE: The water temperature of an enema is critical in determining how long the enema can be retained as well as for safety reasons. An enema that is hot can burn the colon; an enema that is cold can lower the "core temperature" of the body. In either case, the body will react violently and make it virtually impossible to retain an enema with extreme temperatures. However, extremes aside, a warm water enema, slightly warm to the hand (and slightly above body temperature) is the ideal - and are easiest to retain. Cool water enemas are occasionally ordered by doctors and are sometimes used as home remedies. They help to reduce fever in patients but they also cause strong intestinal spasms (and strong cramps) which are effective in

the cleansing process -- and ideal when an enema is being given as punishment. Although the benefit of cool water enemas is clear, they are uncomfortable and retention is difficult.

POSITIONS: Enemas can be administered in a variety of positions. Most common is the "LEFT SIDE POSITION", outlined above.

The "KNEE-CHEST POSITION" is also common and effective. The patient is positioned on his knees, which are spread apart, with his chest or elbows resting on the bed. The Knee-Chest Position allows gravity to work and helps to insure that the enema is delivered as far as possible. The position makes the insertion process easier since the buttocks are naturally separated.

With the "BACK POSITION", the patient is told to lay on his back. He draws his knees to his chest during the insertion and then rests his feet flat on the bed -- or extends his legs out -- during the administration of the enema. It is a comfortable position for the patient but care must be taken that the nozzle does not slide out. Because the patient does not have to support any part of his body, it is an excellent position to use when retaining an enema is desired.

In "PRONE POSITION", the patient is positioned flat on his stomach with his legs spread apart. The Prone Position is usually comfortable for the patient since he can completely relax; good for enemas requiring longer retention times.

EQUIPMENT: The "standard" enema bag available in drug stores has a two quart capacity. Larger bags can be ordered from "specialty houses". The Sherema Bag has a four quart capacity.

Nozzles: There are three basic types of nozzles. The standard "PIPE" is most common; the "COLON TUBE" and the "BARDEX". ** The pipe is easiest to use, since the depth of insertion is limited to the length of the pipe.

** The colon tube is a long, flexible tube that can be inserted its entire length. Care must be taken that the tube is carefully lubricated and inserted slowly, while the enema is being administered. ** The Bardex is ideal for retention enemas. After lubrication and insertion, a balloon can be inflated inside the rectum, making withdrawal of the Bardex impossible. It is generally best to inflate the balloon in stages and allow the body time to adjust to the inflated balloon. Two pumps on the inflation bulb will fill the balloon somewhat. After a few minutes, the bulb can be squeezed again and the sequence continues until the desired inflation is reached. The one administering the enema should count the number of squeezes required to achieve an adequate balloon size prior to insertion.

NOTE: A Bardex can remain inserted and inflated until the patient is at the toilet, if it is so desired. The Double Bardex has two balloons, one which inflates inside the body and the other outside. The design makes it virtually impossible for the patient of leak

any of the enema. The same guidelines hold true with a Double Bardex as those for the Single Bardex.

PRACTICAL PREPARATION IDEAS: Before actually administering an enema, some thought should be given to the "mechanics" of the process. Have plenty of towels been set out? Where do you plan to hang the bag? (The bag can be held by hand, but a better way is to have a nearby hook available or a stand from which the bag can be hung -- thus freeing one's hands.) Prior to insertion, be sure to bleed the air from the tube. Injecting air will make retaining an enema more difficult.

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CAUTION! Wine Enemas are popular but care should be taken. Dilute the wine with water: 4 parts water to 1 part wine. A wine enema will cause deep intoxication quickly. NEVER use hard liquor in an enema.

Always administer an enema slowly and stop if there is pain.
Never share enema equipment.
Always start slowly. Enjoy!!

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