

EFFECTIVENESS AND SAFETY OF THE ADMINISTRATION OF MURPHY'S ENEMA FOR THE TREATMENT OF REFRACTORY CONSTIPATION IN A **TERTIARY HOSPITAL**



M. J. Cumbraos Sánchez^{1,2}, A. Larrabeiti-Etxebarria^{1,2}, M. M. Mediavilla García^{1,2}, C. Blanco García^{1,2}, A. López de Torre Querejazu^{1,2}, O. Urbina Bengoa^{1,2}, M. D. Martínez García^{1,2}

1. Araba University Hospital, Pharmacy Department, Vitoria-Gasteiz, Spain

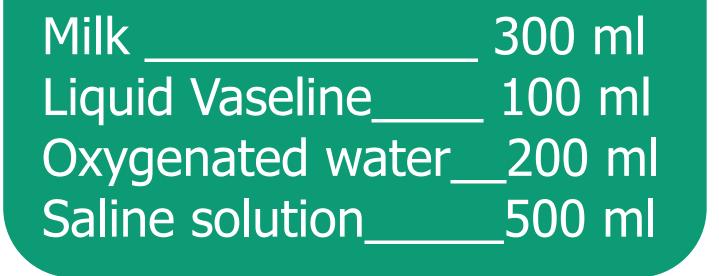
2. Bioaraba Health Research Institute

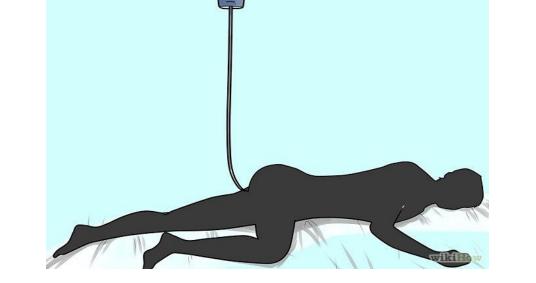
Background

Constipation is a common complication during hospitalization due to the presence of risk factors such as bed rest, diseases causing reduced bowel motility or administration of medications (opioids, anticholinergic drugs...). The standard therapy is laxative drugs.

Murphy's enema (ME) is used for the treatment of constipation and fecal impaction when patients do not respond to laxatives. It consist of administering an evacuating solution through a rectal probe during 6 hours (53 drops/min), leading to a softening of the stool and osmotic evacuation.

Composition of evacuating solution: **Rate of administration:** 53 drops/min





Objective

To asses the effectiveness and safety of ME for the treatment of constipation and fecal impaction.

Methods				
DESING	AIM	PATIENTS	DATA	
Descriptive, retrospective study	Effectiveness and safety of Murphy's enema	Received ME from june 2020 to august 2022	-Comorbidities -Defecation achievement - Indication -Adverse events	DATA ANALYSIS

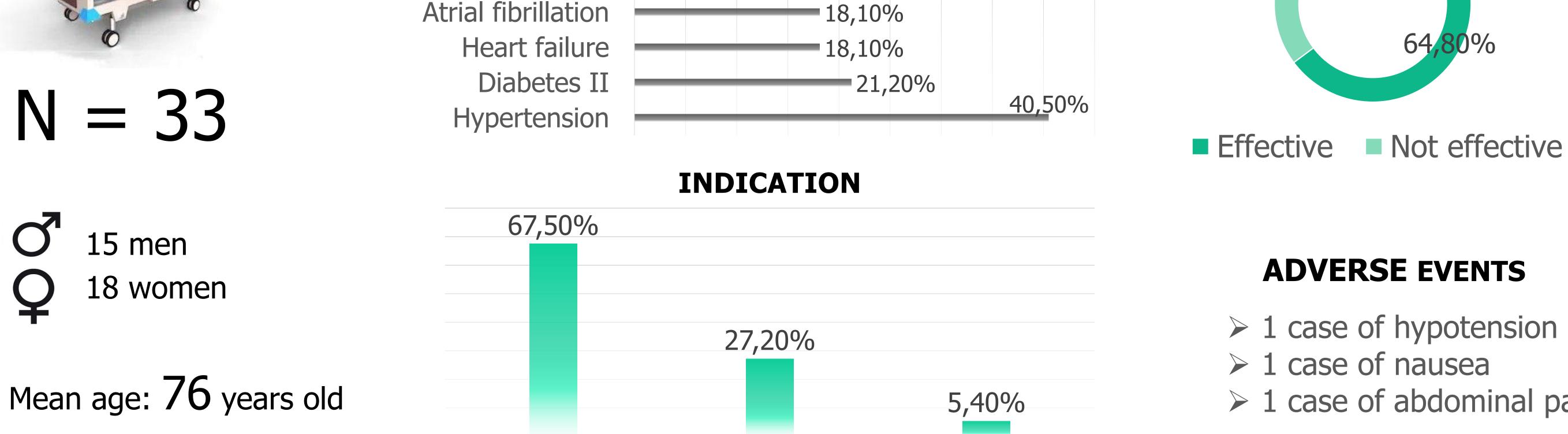


12,10%

12,10%

12,10%





MOST COMMON COMORBIDITIES

Kidney failure

Dyslipidemia

Cognitive impairmet



64,80%

EFFECTIVENESS

35,20%

Constipation Fecal impaction Paralityc ileum

Conclusion

ME constitutes a safe and effective alternative for patients with constipation and fecal impaction not responding to the usual therapies. There is no published evidence regarding this practice, so this study may constitute a starting point for the development of further studies with larger sample sizes.

