The Dreaded Bowel Prep –
A Happy Alternative!

By Sharon Gardner

“But Doc, I just can’t do a bowel prep. You don’t understand! I can’t make a run for the toilet. I can’t tell when I have to go. The last time I went through this, I was sicker than a dog and passed out in the midst of the process. My blood pressure dropped so low I could have died. The mess was disgusting and degrading.”

I shuddered recalling the previous ordeal in the 80’s, but now it was 2001 and my doctor insisted I was years overdue for another colonoscopy. “There’s got to be another option,” I pleaded.

“I’m sorry, my dear,” the gastroenterologist said. “You’ll go through a lot more than this if you have advanced colon cancer because you didn’t find out in time.” Perish the thought!

I called my herbalist friend desperately hoping for any other option. She immediately suggested a colonic. A colonic! I’d heard of those and imagined them to be some kind of crude over-extended enema. And I figured I’d still have the same problem trying to get from the colonic table to the toilet.

My friend encouraged me to do the research, confident I’d be surprised and pleased with the possibilities and the ease of the procedure for me. A quick check on the internet showed colonics have been recommended by doctors almost as long as history has been recorded. Every year thousands of people utilize colonics to deal with constipation or for bowel preps before endoscopic examinations or bowel surgery. Currently there are two basic types of colonic systems – the standard closed system and a newer open system. Considering my limitations, the open system seemed like a wonderful alternative.

Within days I called Regenesis Integrative Health Center and spoke to Rocco Bruno, a colon hydrotherapist with 27 years experience. He is also the inventor of the Angel of Water, unique open-system colonic equipment, manufactured in Austin, Texas, and sold throughout the U.S. and many foreign countries.

Rocco assured me by phone that the client rests comfortably on top of a large contoured reclining toilet (lavage basin.) The client then wiggles down onto a short stationary disposable nozzle that goes about an inch into the rectum. When the client is draped and comfortable, the therapist is paged and the session begins. Privacy is respected at all times. There is no need to undress the top half of the body.

The hydrotherapist makes sure you’re comfortable then starts the water flow. The soothing warm water is gravity fed into the colon at less than one pound of pressure – very gentle, considering water comes out of most residential faucets at 35 pounds of pressure or more. The plain water has been warmed to about 101 degrees Fahrenheit and flows from an eight gallon holding tank in a tower cabinet at the foot of the “recliner” (basin cabinet.) The flow continues for as long as needed, usually about 45 minutes. The entire time excess water and fecal material are draining freely into the opening below the nozzle. No sprinting for the toilet. No fear of making a mess. No embarrassment. And, unbelievably, no smell!

The water travels into the colon past the sigmoid, through the transverse colon and into the cecum, loosening and removing stool all the way. The loosened stool comes out when ready with no bloating, cramping or nausea. If you need to urinate during the process – not a problem. It all flows simultaneously into the same lavage basin.
Although few doctors seem to know about it, the good news is that the Angel of Water is an FDA-registered Class II device for medical colon cleansing, approved for bowel preps before colonoscopies, colostomies, colon x-rays and several other procedures. You still need to follow your doctor’s other instructions – usually clear liquid diet for 24 – 48 hours. It takes food about 12 or more hours to pass through the digestive system, so if possible, get the colonic just a few hours before the exam – ideally in the morning before an afternoon procedure.

Rocco told me that one of the doctors at the famed M.D. Anderson Hospital in Houston, as well as many others around the world, recommend colonics to spare patients, especially weakened cancer patients, the discomforts of laxative bowel preps. Patients can go immediately from colonic to colonoscopy or surgery and often don’t even have to do a clear liquid diet for two days.

The hard part was convincing my gastroenterologist. He was leery and warned me that if my colon wasn’t clean enough to do the colonoscopy, insurance wouldn’t pay for the hospital time and I’d have to go through the procedure again – the traditional way. By now I was informed enough to reassure him it would work. Reluctantly he agreed, but I was prepared to find another doctor if he hadn’t.

I did the liquid diet for two days, growing increasingly abhorrent of Jell-O and chicken broth. Even a bologna sandwich sounded irresistible.

When I arrived at Regenesis Integrative Health Center, I was immediately comfortable with Rocco’s quiet professionalism and kind demeanor. He explained the Angel of Water equipment which was very impressive. Every detail was designed for comfort, safety and effectiveness.

In my younger years transferring wouldn’t have been a problem, but now I did find it difficult for my aging shoulders to lift my body onto the basin seat which was about 25 inches from the floor and surrounded by a two inch wide platform. My attendant and Rocco easily lifted me over onto the basin. Once I was settled, my attendant helped me wiggle down onto the small nozzle and put the drape over me. I was completely comfortable and my modesty was protected.

Shortly after the water flow started, Rocco pointed out a small mirror attached near the top of the tank, well within my line of sight and allowing me to see what was coming out with the water. There was no doubt the colonic was working! The gentle process continued nearly an hour until the water flowed completely clear.

The next morning I arrived at the hospital for my colonoscopy confident I was all sparkly and squeaky clean inside. Too bad I was asleep before I could smile for the camera. When I woke up, my doctor gave me the good news – no cancer, no polyps and an exceptionally well prepared colon.

Eight Years Later

So eight years later in 2009 when I decided to have an elective colostomy, I was more than able to refute my surgeon’s arguments and tell her I would not take the laxative and would consent only to a colonic. She was reluctant, but I held my ground armed with facts, experience and knowledge of FDA approval for this device and procedure.

I arrived at Regenesis Integrative Health Center at 5 p.m. This time the colonic process was more difficult. During the past eight years my increasing muscle loss had allowed my transverse colon to sag like an overstretched clothesline, medically referred to as a redundant or prolapsed colon.

Due to further decreased muscle tone, the water flow was not producing enough results this time. I was getting worried. My surgery was scheduled for 7 a.m. the next morning. No time to take the traditional laxatives even if I was willing.
Thankfully, Rocco was experienced enough to know how to manipulate my abdominal wall upward until the water finally went from the sigmoid colon past the resistant splenic flexure into the transverse colon, then past the hepatic flexure into the ascending colon and cecum, flushing out the contents. This time the process took almost double the time needed eight years earlier, but I never felt any discomfort.

My surgery the next morning was a complete success, and when I woke up my surgeon acknowledged my colon was perfectly clean and prepped.

The statistics on the occurrence of colon cancer are frightening, but most cases could be preempted if people would get periodic colonoscopies. The American Cancer Society recommends that people with low to average risk begin screenings at age 50, followed by a flexible sigmoidoscopy every five years and a colonoscopy every ten years. However, screenings should start earlier than age 50 if you have a personal or family history of colorectal cancer, adenomatous polyps, inflammatory bowel disease, ulcerative colitis or Crohn’s disease.

The good news is that now there is an easy alternative to the dreaded bowel prep. The Angel of Water is used by professional hydrotherapists across the nation and around the world. Practitioners are not hard to locate.

What you need to know if you want to try this option:

1. Talk to your doctor about your need for a colonoscopy, flexible sigmoidoscopy or the less invasive CT colonography. Are you having symptoms? Are you in the suggested age range? Does colon cancer run in your family? Does your diet have enough water, fiber fresh fruits and vegetables?
2. To find a hydrotherapist equipped to do open-style colonics in your location, go to www.angelofwater.com, click on the AOW Network tab then View List, or call 877-564-3185 for more hydrotherapists not listed on the web site.
3. Ask the therapist about their experience in manipulating the abdominal wall to navigate the water into the transverse colon in case it’s redundant or your muscle tone is weak. Ask if they will schedule extra time that might be needed for your unique situation.
4. Ask about the charge and be prepared to pay on the day of the session. My cost was $75, but prices vary around the country.
5. Be aware that many states require therapists to have a prescription written by a doctor or health care practitioner licensed within their state to administer colonics. If your doctor will not give one, does the hydrotherapist have a doctor they work with? Your doctor’s prescription will a likely save you $25 or more since you won’t have to utilize the hydrotherapist’s doctor.
6. Be prepared with the facts when you tell your doctor you prefer a colonic to the traditional laxative bowel prep. Hold your ground. It’s your body.
7. Bring an attendant with you just in case you need a little help transferring or wiggling down onto the nozzle.

Remember your colon health is foundational to your overall health. A colonoscopy or flexible sigmoidoscopy can reveal any potential problems and allow the doctor to remove polyps before they turn into cancer. Colorectal cancer has a well-documented cure rate if intercepted early.

Understandably, mobility impaired persons are even more reluctant than non-disabled people to undergo the procedure. But colon cancer doesn’t make exceptions for disabilities. It’s easy to assume
that occasional bleeding is from your bowel regimen when indeed it could be something far more serious.

Preventing colon cancer means there’s one less problem on your plate. Knowing the truth will empower your life. Ignorance is not bliss – sometimes it’s fatal.