is probably too fast. One pint (500 mL) or less of properly introduced fluid usually produces adequate evacuation if it is retained until definite lower abdominal cramping is felt. As long as 1 hour may be needed for the entire procedure.

**Suppositories** Bisacodyl-containing suppositories are promoted as replacements for enemas when the distal colon requires cleaning. Suppositories that contain bisacodyl are used for postoperative, antepartum, and postpartum care, and are adequate in preparing for proctosigmoidoscopy. Although bisacodyl suppositories are prescribed and are used more often than other suppositories, some clinicians still prefer enemas as agents for cleaning the lower bowel. Glycerin suppositories are useful in initiating the defecation reflex in children and in promoting rectal emptying in adults (Table 16-6).

**Liquids** Liquid formulations of emollients may be made more palatable if mixed with juices or milk. The most commonly used products containing castor oil are the more palatable emulsions. When plain castor oil is used, it may be administered with fruit juice or a carbonated beverage to mask its unpleasant taste. Chilling the oral form of a sodium phosphate–type product or taking it with ice seems to make it more palatable. Palatability may also be improved by drinking the product with a citrus fruit juice or with a citrus-flavored carbonated beverage.

### Complementary Therapies

Patients frequently treat constipation with a botanical product (Table 16-7; see also Chapter 53). Although many of the commercially available stimulant and bulk-forming laxatives are derived from plants, some consumers prefer to use a “more natural” version of these products. Consumers should be cautioned that FDA does not regulate these products and the manufacturers are not required to provide information on how to use the products safely and effectively. When FDA ruled that certain stimulant laxative ingredients found in many nonprescription products had not been shown to be safe or effective, they were ordered removed from the marketplace. Nonprescription products that contained aloe, cascara sagrada, and casanthranol have been withdrawn from the market because of a lack of data supporting their safety and efficacy. However, the same ingredients are found in many dietary supplement formulations, which are unaffected by this ruling. Patients should consider alternative products that do not contain these ingredients whenever possible. Although botanical products are considered dietary substances and not “medications,” they can potentially interact with prescription medications. In addition, products