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قرار وزاري رقم (٩٣) لسنة 2025 م

في شأن اعتماد المعايير الوطنية للعلاج المائي للقولون

وزير الصحة ووقاية المجتمع:

بعد الاطلاع:

- على القانون الاتحادي رقم (1) لسنة 1972 م بشأن اختصاصات الوزارات وصلاحيات الوزراء وتعديلاته،
 - وعلى القانون الاتحادي رقم (4) لسنة 2015 م في شأن المنشآت الصحية الخاصة وتعديلاته ولائحته التنفيذية،
 - وعلى القانون الاتحادي رقم (5) لسنة 2019 م في شأن تنظيم مزاوله مهنة الطب البشري ولائحته التنفيذية،
 - وعلى القانون الاتحادي رقم (6) لسنة 2023 م بشأن مزاوله غير الأطباء والصيدالة لبعض المهن الصحية،
 - وعلى المرسوم بقانون اتحادي رقم (4) لسنة 2016 م بشأن المسؤولية الطبية، وتعديلاته ولائحته التنفيذية،
 - وعلى قرار مجلس الوزراء رقم (20) لسنة 2017 م باعتماد المعايير الموحدة لترخيص مزاولي المهن الصحية على مستوى الدولة وتعديلاته،
 - وعلى قرار مجلس الوزراء رقم (11) لسنة 2021 م في شأن الهيكل التنظيمي لوزارة الصحة ووقاية المجتمع.
- وبناء على مقتضيات المصلحة العامة،،،

قرّر ما يلي:

المادة (1)

تعتمد المعايير الوطنية للعلاج المائي للقولون المرفقة بهذا القرار.



المادة (2)

ينشر هذا القرار في الجريدة الرسمية ويعمل به اعتباراً من اليوم التالي لتاريخ نشره.

عبد الرحمن بن محمد العويس

وزير الصحة ووقاية المجتمع

صدر بتاريخ: 28/04/2025



مرفق القرار الوزاري رقم (٨٣) لسنة 2025 م
في شأن اعتماد المعايير الوطنية للعلاج المائي للقولون

Colon Hydrotherapy Guidelines



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INTRODUCTION:

Colon hydrotherapy, also known as colonic irrigation, is a procedure to remove waste from the large intestine using temperature-controlled water. During a colon hydrotherapy session, water is gently introduced into the large intestine via a rectal catheter in a controlled manner by a trained and qualified healthcare professional (refer to appendix 1 for the process of the colon hydrotherapy). The purpose of colon hydrotherapy is to achieve the optimal bowel function through the restoration of fluid, matter and gas balance, removal of excess wastes and exercise to the large intestine for the benefit of assisting absorption, assimilation, and elimination, which is instrumental in maintaining health and wellbeing of the body and mind. There are two types of Colonic Irrigation System, open system, and close system. The closed system requires the practitioner to stay with the client, while the open system gives the client more privacy as they don't need the therapist to stay with them in the room. The open system advanced cleansing system is the latest design in colonic hydrotherapy medical devices.

PURPOSE:

This guideline implies the provision of colon hydrotherapy at the highest level of quality and safe clinical care at all times. It outlines the basic mandatory requirements for a health facility to be able to provide colon hydrotherapy services.



SCOPE:

This guideline applies to all licensed health facilities in UAE that provide Colon Hydrotherapy (CHT) services according to the specifications of this standard.

This guideline is applicable in coordination with other guidance published by other local health authorities.

DEFINITIONS:

Colon Hydrotherapy: is the removal of waste from the large intestine using warm water.

Colon Hydrotherapist: a licensed practitioner (Naturopathy specialist) who is assigned to do colon hydrotherapy.

Enema Kit: an enema kit is a device intended to instill water or other fluids into the colon through a nozzle inserted into the rectum to promote evacuation of the contents of the lower colon. The device consists of a container for fluid connected to the nozzle either directly or via tubing. The device does not include the colonic irrigation system.

Colonic Irrigation System: A colonic irrigation system is a device intended to instill water into the colon through a nozzle inserted into the rectum to cleanse (evacuate) the contents of the lower colon. The system is designed to allow evacuation of the contents of the colon during the administration of the colonic irrigation. The device consists of a container for fluid connected to the nozzle via tubing and includes a system which enables the pressure, temperature, or flow of water through the nozzle to be controlled. The



device may include a console-type toilet and necessary fittings to allow the device to be connected to water and sewer pipes. The device may use electrical power to heat the water. The device does not include the enema kit.

Patient: a person receiving or registered to receive medical care, or who is cared for by a licensed medical professional.

Naturopathy Practitioner: is a healthcare professional who practices naturopathic medicine.

Ayurveda Practitioner: is a healthcare professional who practices ayurveda medicine.

Unani Practitioner: is a healthcare professional who practices Unani medicine.

Naturopathic medicine: is an alternative medicine approach that emphasizes using natural medicine and a “whole person” approach to prevent, diagnose, and treat health conditions. They focus primarily on addressing the underlying causes of illness and disease — rather than treating just the symptoms — to help promote wellness within the body and mind as a whole.

Ayurveda Medicine: is an alternative medicine system with historical roots in the Indian subcontinent. It is heavily practiced throughout India, Nepal, Bangladesh, Pakistan and Sri Lanka, where as much as 80% of the population report using ayurveda. Therapies include herbal medicines, special diets, meditation, yoga, massage, laxatives, enemas, and medical oils. Ayurvedic preparations are typically based on complex herbal compounds, minerals, and metal substances.



Unani Medicine: is a type of traditional Greek medicine that is based around the concepts of the four humors: Phlegm (Balgham), Blood (Dam), Yellow bile (Safra) and Black bile (Saudā') including but not limited to diet therapy, nutritional therapy, life style modification, stress management, cupping, diaphoresis, massage, purging, emesis and exercise.

Health Authorities: the regulatory authorities within the United Arab Emirates according to the geographical jurisdiction.

Periodic Preventive Maintenance: refers to the scheduled, routine maintenance activities designed to keep equipment, systems, or facilities in optimal condition and prevent unexpected breakdowns. Rather than waiting for something to fail, preventive maintenance focuses on inspecting, servicing, and addressing potential issues before they cause significant problems.

ABBREVIATIONS:

CHT: Colon Hydrotherapy

ARTG: Australian Register of Therapeutic Goods

CE: Conformité Européenne

FDA: Food and Drug Administration

LIBBE: Lower Intestinal Bottom Bowel Evacuation

IV: Intravenous



PPE: Personal Protective Equipment

BLS: Basic Life Support

UAE: United Arab Emirates

MOHAP: Ministry of Health and Prevention

PPM: Periodic Preventive maintenance

TBC: Total Bacterial Count

1. LICENSURE REQUIREMENTS:

- 1.1. CHT should be performed in an independent health facility that provides alternative medicine either as a standalone facility or as an add on service.
- 1.2. CHT should not be performed in an independent health facility that provides Colon Hydrotherapy service only.
- 1.3. The health facility providing CHT services shall adhere with the facility requirements.
- 1.4. CHT services shall be carried out by the healthcare professionals that are mentioned in this standard.
- 1.5. The equipment that are used shall be approved by at least one of the following international authorities:
 - 1.5.1. Food and Drug Administration (FDA)
 - 1.5.2. Health Canada



- 1.5.3. Conformité Européenne (CE)
- 1.5.4. Australian Register of Therapeutic Goods (ARTG)
- 1.6. The equipment that are used shall be registered with the Ministry of Health and Prevention (MOHAP) in the United Arab Emirates (UAE).

2. HEALTH FACILITY REQUIREMENTS:

- 2.1. Specialized plumbing shall be provided for the human waste released during the treatment so that it is flushed directly into the sewage water system of the health facility.
- 2.2. There shall be a sediment filter in addition to an activated carbon filter attached to the hot and cold-water connection of the treatment room. Also, there shall be a second filter system attached to the colon hydrotherapy device itself in accordance with the manufacturer specification.
- 2.3. The filters shall be changed in a timely manner as recommended by the manufacturer and a filter change record/ logbook shall be maintained.
- 2.4. In some cases, especially the closed pressure systems, the installation of an ultraviolet sterilizer at the main supply shall be provided for water treatment.
- 2.5. The facility should do regular Water Test Legionella, to measure the Total Bacterial Count (TBC).
- 2.6. Instructions of the equipment manufacturer shall be followed in performing the cleansing or priming procedure prior to commencing any treatments if the device is new or the filters have been changed.



- 2.7. Cleansing solution recommended by the manufacturer shall be used.
- 2.8. Equipment shall be maintained, and all necessary parts shall be changed as per the instructions contained in the equipment manual.
- 2.9. The health facility shall consider using eco-friendly equipment if applicable.
- 2.10. A regular PPM (Periodic Preventive maintenance) must be done to assure patient's safety.
- 2.11. The consultation and procedure/treatment rooms should be separate.
- 2.12. The procedure/treatment room must adhere to the design requirements guidelines that each health authority provides, and maintain the following requirements:
 - 2.12.1. The space of the room shall be 11.5 square meters.
 - 2.12.2. A floor that is entirely washable.
 - 2.12.3. Carpets on the floor shall not be permitted.
 - 2.12.4. Its own toilet with washing facilities and a shower for exclusive use of the patient.
 - 2.12.5. An extraction system.
 - 2.12.6. A paper towel on the patient couch.
 - 2.12.7. A paper towel for each patient to clean themselves after the irrigation procedure.
 - 2.12.8. Lower Intestinal Bottom Bowel Evacuation (LIBBE) base (table) must be installed with plumbing on left side of body, near head. Right side installation will not work.
 - 2.12.9. The wall that LIBBE base is placed parallel to, must have a minimum of 8' (2.44m) with no doors or obstructions.
- 2.13. The facility shall provide clean and comfortable changing area for the patient.



- 2.14. Clean gowns, robes and towels shall be provided.
- 2.15. Care must be taken so that the systems tubing does not get blocked during the procedure.
- 2.16. There shall be provision of drinking water.
- 2.17. Emergency medications and crash cart trolley shall be available in the procedure room.

3. HEALTHCARE PROFESSIONAL REQUIREMENTS:

- 3.1. All healthcare professionals in the health facility shall hold an active license and work within their scope of practice and granted privileges.
- 3.2. Healthcare professionals who practice CHT services shall hold a valid license in the following categories:
 - 3.2.1. Ayurveda Practitioner
 - 3.2.2. Gastroenterology
 - 3.2.3. General Practitioner
 - 3.2.4. General Surgery
 - 3.2.5. Internal Medicine
 - 3.2.6. Naturopathy Practitioner
 - 3.2.7. Unani Practitioner
- 3.3. The healthcare professionals providing the CHT services shall maintain a valid Basic Life Support (BLS) certificate.
- 3.4. The health facility that provides CHT services shall have a licensed dietician.



3.5. The Privileging Committee and/or Medical Director of the health facility are responsible for granting privileges to the physicians based on their education, training, experience, and competencies. These privileges undergo periodic review and adjustment in accordance with the Concerned Health Authorities' clinical privileges policy.

4. POLICIES AND PROCEDURES:

4.1. The health facility should develop and provide documentation with evidence for the following policies and procedures, but not limited to:

- 4.1.1. Patient selection criteria
- 4.1.2. Patient assessment and admission
- 4.1.3. Patient education and informed consent
- 4.1.4. Patient health record
- 4.1.5. Infection control measures and hazardous waste management
- 4.1.6. Incident reporting
- 4.1.7. Fall Management Policy
- 4.1.8. Patient privacy
- 4.1.9. Complaint policy
- 4.1.10. Lost and found policy
- 4.1.11. No smoking policy
- 4.1.12. Calibration policy and record of maintenance
- 4.1.13. Medication management



4.1.14. Emergency action plan

4.1.15. Patient discharge/ transfer as per the policy of patient referral and interfacility transfer related to each health authority

4.1.16. Patient discharge

4.1.17. Clinical laboratory services

4.1.18. Equipment maintenance services

4.1.19. Medical waste management

5. PROCEDURE REQUIREMENTS:

5.1. Main equipment:

5.1.1. Enema kit. This equipment is for “over the counter” use and requires no prescription. With this type of equipment, it is recommended that the “nozzle” be discarded and replaced after each use.

5.1.2. Colonic Irrigation System. This type of equipment requires practitioner’s order to purchase, and for the procedure, it is intended to be used when medically indicated and maintaining general well-being. It also has two types of systems:

- Open System.
- Closed System.

5.2. Water pressure:

5.2.1. The manufacturer’s instructions must be followed.

5.3. Water temperature:



5.3.1. Water temperature shall be regulated to the normal body temperature to prevent thermal shock or scalding. The minimum allowed temperature shall be 31°C and the maximum shall be 39°C, with the average treatment's temperature of 34°C to 37°C. It is unsafe to operate outside the recommended temperature levels.

5.4. Treatment duration:

5.4.1. The average treatment duration is around forty-five (45) minutes and shall not exceed sixty (60) minutes.

5.4.2. If the procedure took more than 60 minutes, then it should be reported and recorded.

6. PATIENT'S CARE:

6.1. The practitioner will undertake an assessment of the patient's general health and specifically their digestive function before the first treatment. (Refer to appendix 2 for the indications)

6.2. Absolute neutrophil count must be above 1 in order to do the procedure.

6.3. Practitioners need to be aware of red flags and contraindications and should apply their knowledge of anatomy, physiology, and pathology in cases where they need to decline treatment and refer clients to suitable medical professionals. These contraindications are as the following:

6.3.1. Absolute Contraindications:

6.3.1.1. Abdominal hernia (Inguinal Hernia)

6.3.1.2. Autonomic dysreflexia (occurs in spinal injuries at or above T6)



- 6.3.1.3. Carcinoma of the colon or rectum
- 6.3.1.4. Children under 16 years without a GP's/medical specialist written referral and a guardian present at all times.
- 6.3.1.5. Colitis
- 6.3.1.6. Congestive heart disease
- 6.3.1.7. Diverticulitis
- 6.3.1.8. Fistula
- 6.3.1.9. Hirschsprung's disease
- 6.3.1.10. Hypertension above 170/100
- 6.3.1.11. Ileus (paralytic)
- 6.3.1.12. Active Inflammatory Bowel Disorders - Ulcerative Colitis, Crohn's, Colitis and Diverticulitis
- 6.3.1.13. Inflamed haemorrhoids
- 6.3.1.14. Pregnancy
- 6.3.1.15. Rectal bleeding
- 6.3.1.16. Radiotherapy of abdominal area not discharged from medical care.
- 6.3.1.17. Severe Anaemia (RBC less than 2.5 million cells/mcL) - Risk of fainting
- 6.3.1.18. Renal insufficiency
- 6.3.1.19. Severe persistent diarrhoea
- 6.3.1.20. Recent surgery of colon or rectum (less than 26 weeks)
- 6.3.1.21. Recent bowel biopsy (Less than 12 weeks)



6.3.1.22. Recent prostate biopsy made through the bowel (less than 12 weeks)

6.3.1.23. Recent abdominal surgery e.g. hysterectomy (less than 26 weeks)

6.3.1.24. Recent Laparoscopy (less than 6 weeks)

6.3.1.25. Intestinal Malignancies

6.3.2. Relative Contraindications:

6.3.2.1. Anal tear and haemorrhoids(s) if Digital Rectal Examination reveals potential intolerance to speculum.

6.3.2.2. Chemotherapy and cancer treatments known to cause inflammation, infections, Anaemia, and general weakness – Colon Hydrotherapist should work with the medical team.

6.3.2.3. Controlled hypertension and a prescription for diuretics

6.3.2.4. Debilitating heart, liver and kidney diseases manifest pain and weakness.

6.3.2.5. Diabetes - Risk of Hypoglycaemia; patient advice should be given in preparation for treatment.

6.3.2.6. Diverticulosis within 3 months of episode of diverticulitis.

6.3.2.7. Highly anxious, stressed or emotional

6.3.2.8. Hypotension (less than 90/60)

6.3.2.9. Fissure

6.3.2.10. Inflammatory Bowel Disorders in remission for a minimum of 6 months



- 6.3.2.11. Inguinal Hernia
 - 6.3.2.12. Long term Oral or Rectal Steroid - Risk of reduced bowel integrity
 - 6.3.2.13. Recent (within 6 months) hip/knee joint surgery will need to establish mobility and if client can lie on their left side.
 - 6.3.2.14. Severe underweight or eating disorders.
 - 6.3.2.15. Tight Sphincter
- 6.4. Patients may be seen on a single occasion or over a period of time on multiple occasions. The practitioner will monitor the progress of the patient and adapt the support and advice given, as well as the frequency and number of treatments according to the patient's individual needs.
- 6.5. The patient shall be assessed pre and post treatment. The assessment shall be documented in the patient's health record by the specialist practitioner.
- 6.6. Pre and after care advice must be provided to the patients and recorded in their files. (Refer to appendix 3 for the side effects and the risks)
- 6.7. The practitioner shall ensure that all patients that are going through the procedure have intravenous (IV) access.
- 6.8. Patient's health records shall be maintained in a secure area. In case the health facility utilizes electronic patient records, the health facility must make sure that the records are safely maintained and easily retrievable.
- 6.9. The data should be kept in alignment with the applied rules and regulations in terms of server location specifically.



- 6.10. Before undergoing colon hydrotherapy, the practitioner should explain the consent content clearly to the patient before signing. Then the patient must sign the consent form with all the information about the treatment, type of equipment that they used, contraindications, and the risks that are associated with the treatment.
- 6.11. All the patient's details must be treated with confidentiality.
- 6.12. Once the treatment is proceeded, controls of the equipment should be placed so that the patient is unable to alter settings.
- 6.13. The operator who handles the functioning of the equipment shall wear clean clothes and shall not have any open cuts, abrasions, or wounds.
- 6.14. The colonic irrigation system must not be connected to a drinking water supply. This could result in serious, possibly fatal injury to the patient due to the application of mains pressure.

7. INFECTION CONTROL:

- 7.1. All rooms shall be disinfected after each patient.
- 7.2. Toilets, door handles, and beds shall be sanitized with disinfectant solution between all treatments to prevent human cross-contamination.
- 7.3. The CHT device shall be cleaned and sterilized between all treatments.
- 7.4. Always use disposable Personal Protective Equipment (PPE) such as gloves, aprons, gowns, masks, and face-shield. Any item smeared with body fluids shall be immediately discarded and replaced.



- 7.5. Spillage of blood and body fluids must be dealt with immediately (PPE must be worn, disposable spillage kit must be available).
- 7.6. Waste management (color coded bags) is necessary.
- 7.7. All disposable equipment used during the treatment shall be discarded in a specialized medical waste bag. This must be collected by a medical waste collection service as it is classified as human body fluids and wastes.
- 7.8. Tubes of lubricant, single-use pouches or disposable spatulas shall be used to avoid cross-contamination. Any contaminated lubricant shall be discarded immediately.
- 7.9. It is recommended to only use disposable kits.
- 7.10. No part of disposable kits (speculum, obturator, inlet or outlet pipe, disposable underpants, or robe) shall ever be re-used.
- 7.11. Speculum and obturator sealed packaging shall not be opened until immediately prior to the commencement of the treatment and should be done so in full view of the patient.
- 7.12. Hand wash/rub shall be done between treatments.



8. KEY PERFORMANCE INDICATORS (KPIs):

8.1. A record of Key Performance Indicators (KPIs) must be maintained. This includes tracking metrics such as:

- 8.1.1. Patient Satisfaction
- 8.1.2. Treatment Efficacy
- 8.1.3. Complication Rate
- 8.1.4. Repeat Treatment Rate
- 8.1.5. Adherence to Protocols
- 8.1.6. Appointment Utilization
- 8.1.7. Revenue per Treatment
- 8.1.8. Patient Retention Rate
- 8.1.9. Referral Rate
- 8.1.10. Staff Productivity
- 8.1.11. Inventory Turnover
- 8.1.12. Compliance Rate



9. APPENDIX (1): The process of Colon Hydrotherapy Procedure:

- 9.1. The Hydration: the practitioner starts the water flow and explains how to turn it off if at all the patient becomes uncomfortable. The angel device has an exhaust air filtration system ensuring an odour free treatment.
- 9.2. The Activation: as the water trickles in and the patient gets the urge to defecate or push out, he/she should do so. The water and the faecal matter go around the small tube and drops through the contour toilet basin under their bottom.
- 9.3. The wastewater flows away through the view tube, which the patient can watch in the view mirror. During the session, the patient can receive hot packs and massage, and also some advice on how to get the best from the session.



10. APPENDIX (2): Indications for Colon Hydrotherapy:

- 10.1. Constipation of different etiologies
- 10.2. Diarrhea
- 10.3. The phenomena of autointoxication (headaches, unmotivated weakness, decreased efficiency, unpleasant odor from the body)
- 10.4. Dyskinesia of the large intestine
- 10.5. Parasitic infections
- 10.6. Preparation for colon examination
- 10.7. Hemorrhoids (mild to moderate)
- 10.8. Prostatitis and prostate adenoma
- 10.9. Vaginitis, cervical erosion
- 10.10. Signs of impaired immune system function (frequent respiratory diseases, dermatitis of unclear etiology)
- 10.11. Preparation for surgical intervention
- 10.12. Detoxification after alcohol and drug intoxication, poisoning with chemicals, contamination with radionuclides.
- 10.13. Role out Intestinal Obstructions/ Intussusception



11. APPENDIX (3): Risks and Side effects of Colon Hydrotherapy:

- 11.1. Cramping
- 11.2. Bloating
- 11.3. Diarrhea
- 11.4. Vomiting and nausea
- 11.5. Irritation in the skin around the anus
- 11.6. Soreness
- 11.7. Dehydration or dizziness (which is a sign of dehydration)
- 11.8. Electrolytes imbalance (especially dangerous for people with kidney or heart diseases)
- 11.9. Bacterial imbalance and infection
- 11.10. Exacerbation of chronic bowel disease such as diverticulitis, Crohn's Disease or hemorrhoids.
- 11.11. Scalding if water temperature regulating controls fail.
- 11.12. Reduced capacity to control bowel movements for a period of time after the procedure.
- 11.13. Potential interference with medication absorption on the day of colon hydrotherapy treatment
- 11.14. Bowel perforation or ulceration
- 11.15. Gastrointestinal Infections
- 11.16. Kidney failure



- 11.17. If the therapist adds a substance to the water during colon irrigation, you also run the risk of an allergic reaction.
- 11.18. Back and pelvic abscess (pockets of pus)
- 11.19. Gas accumulation in the veins
- 11.20. Rectal tears
- 11.21. Gangrene in the perineum (patch of skin between your genitals and anus)
- 11.22. Water intoxication
- 11.23. Swelling of the colon and blood poisoning from coffee enemas
- 11.24. Death from amebiasis (a disease caused by the parasite Entamoeba histolytica)