



Mesalazine suppositories, enemas and foam

Information for people with inflammatory bowel disease

PE-IBD-08

Version 1.0 · Last reviewed October 2026 · Next review October 2028

These preparations deliver mesalazine directly onto the inflamed lining of the rectum and left colon. For disease in this area they work better than tablets alone, and combining the two works better than either by itself.

Why you are taking it

Ulcerative colitis always involves the rectum, and the rectum is the hardest part of the bowel for a tablet to reach in adequate concentration. Treatment given from below reaches it directly. Suppositories treat the rectum; enemas and foam spread further, up to the left side of the colon.

How to take it

A 1 g suppository once daily at bedtime is used for inflammation limited to the rectum. An enema or foam is used when the inflammation extends further; the strength depends on the product, commonly 1 g or 2 g, and it is also given at bedtime. Empty your bowels first if you can. Lie on your left side with your right knee drawn up, insert the suppository or the nozzle gently, and then stay lying down and relaxed until the urge to pass it has gone – usually five to ten minutes – and longer if you can. Bedtime is the best time, because the medicine then stays in place overnight. Foam is often easier to hold in than a liquid enema if urgency is a problem; tell your doctor if you are struggling, so the preparation can be changed.

How long it takes to work

Bleeding and urgency usually begin to improve within one to two weeks, and a course for a flare is normally continued for four to six weeks. Rectal treatment is also

used long-term to prevent relapse, sometimes every night and sometimes only two or three nights a week.

Blood tests and monitoring

The same blood tests apply as for mesalazine tablets: kidney function before starting, at two to three months, and then at least yearly. If you use both tablets and rectal treatment, the doses add together and we take this into account.

Side effects

Side effect	What it means and what to do
Leakage, wind, or a feeling of needing to go	Common in the first few nights and usually settles. Using it at bedtime helps.
Local irritation or soreness	Common. Tell your doctor; a different preparation may suit you better.
Headache, nausea, abdominal discomfort	Less common than with tablets, as less is absorbed.
Kidney inflammation, pancreatitis, low blood counts	Rare, as with the tablets. See sheet PE-IBD-07 for the warning signs.
Worsening symptoms after starting	Tell your doctor – occasionally mesalazine itself is the cause.

Important precautions

- Warm an enema briefly in your hands before use; a cold enema is harder to retain.
- Wear older night clothes and consider a towel or pad for the first few nights.
- Keep using it when the bleeding stops, until we tell you otherwise – this is when relapse is prevented.
- If you cannot manage the technique, ask the IBD nurse to go through it with you. This is the commonest reason rectal treatment fails.
- Avoid anti-inflammatory painkillers such as ibuprofen and diclofenac.
- For a repeat prescription, message the clinic. If there is no reply after 48 hours send the message again, and if there is still no reply, come to the clinic.

Pregnancy and breastfeeding

Rectal mesalazine is used in pregnancy and breastfeeding. In later pregnancy lying on your left side is comfortable and is the correct position anyway. Tell your doctor if you are pregnant or planning to be.

Tell your doctor straight away if

- You have severe upper abdominal pain going through to the back.
- You have a fever, sore throat, mouth ulcers or unexplained bruising.
- You are passing much less urine, or your ankles swell.
- Bleeding or diarrhoea gets worse rather than better.
- You have severe pain on inserting the suppository or nozzle.

Tell your doctor so they know and can bring your appointment forward. But if you feel seriously unwell, go to the Emergency Department first – do not wait for a reply.

Contact your doctor using the numbers your clinic has given you. If you are seriously unwell, or it is outside working hours, go to the Emergency Department rather than waiting for a reply. Brand names and preparations may differ – check the label on your own medicine. General safety advice is in sheet [PE-IBD-04](#). Version 1.0 · review date October 2028.

This leaflet is general information and does not replace advice from your own doctor.

ZAD Health, PE-IBD-08