

The Coffee Enema

Its Unique History and Amazing Detox Properties

The following information is quoted from “The Royal Enema” by Dr. Ralph Moss.

An enema is “a fluid injected into the rectum for the purpose of clearing out the bowel, or of administering drugs or food.” The word itself comes from the Greek en-hienai, meaning to “send or inject into.” The enema has been called “one of the oldest medical procedures still in use today.” Tribal women in Africa, and elsewhere, routinely use it on their children. The earliest medical text in existence, the Egyptian Ebers Papyrus, (1,500 B.C.) mentions it. Millennia before, the Pharaoh had a “guardian of the anus,” a special doctor one of whose purposes was to administer the royal enema.

The Greeks wrote of the fabled cleanliness of the **Egyptians**, which included the **internal cleansing** of their systems through emetics and enemas. They employed these on **3 consecutive days every month** said Herodotus (II.77) or at intervals of 3 or 4 days, according to the later historian, Diodorus. The Egyptians explained to their visitors that they did this because they “believed that **diseases were engendered by superfluities of the food**”, a modern-sounding theory!

Enemas were known in ancient Sumeria, Babylonia, India, Greece and China. American Indians independently in-vented it, using a syringe made of an animal bladder and a hollow leg bone. Pre-Columbian South Americans fashioned latex into the first rubber enema bags and tubes. In fact, there is **hardly a region of the world where people did not discover or adapt the enema**. It is more ubiquitous than the wheel. Enemas are found in world literature from Aristophanes to Shakespeare, Gulliver Travels to Peyton Place.

In pre-revolutionary France, a **daily enema after dinner** was de rigueur. It was not only **considered indispensable for health but practiced for good complexion** as well. Louis XIV is said to have taken over 2,000 in his lifetime. Could this have been the source of the Sun King’s sunny disposition? For centuries, enemas were a routine home remedy. Then, within living memory, the routine use of enemas died out. The main times that doctors employ them nowadays is before or after surgery and childbirth. Difficult and potentially dangerous barium enemas before colonic X rays are of course still a favorite of allopathic doctors.

But why coffee? This bean has an interesting history. It was imported in Arabia in the early 1500’s by the Sufi religious mystics, who used it to fight drowsiness while praying. It was especially prized for its medicinal qualities, in both the Near East and Europe. No one knows when the first daring soul filled the enema bag with a quart of java. What is known is that the coffee enema appeared at least as early as 1917 and was **found in the prestigious Merck**

Manual until 1972. In the 1920s, German scientists found that a caffeine solution could open the bile ducts and stimulate the production of bile in the liver of experimental animals.

Dr. Max Gerson used this clinically as part of a general detoxification regimen, first for tuberculosis, then cancer. Caffeine, he postulated, will travel up the hemorrhoidal to the portal vein and thence to the liver itself. Gerson noted some **remarkable effects** of this procedure. For instance, **patients could dispense with all pain-killers once on the enemas.** Many people have noted the paradoxical calming effect of coffee enemas. And while coffee enemas can relieve constipation, Gerson cautioned: “Patients have to know that the coffee enemas are **not given for the function of the intestines but for the stimulation of the liver.**”

Coffee enemas were an established part of medical practice when Dr. Max Gerson introduced them into cancer therapy in the 1930s. Basing himself on German laboratory work, Gerson believed that caffeine could stimulate the liver and gall bladder to discharge bile. He felt this process could contribute to the health of the cancer patient.

Although the coffee enema has been heaped with scorn, there has been some independent scientific work that gives credence to this concept. In 1981, for instance, Dr. Lee Wattenberg and his colleagues were able to show that substances found in coffee — **kahweol and cafestol palmitate** — **promote the activity of a key enzyme system, glutathione S-transferase,** above the norm. This system **detoxifies a vast array of electrophiles from the blood-stream** and, according to Gar Hildenbrand of the Gerson Institute, “must be regarded as an important mechanism for **carcinogen detoxification.**” This enzyme group is responsible for neutralizing **free radicals,** harmful chemicals now commonly implicated in the initiation of cancer. In mice, for example, **these systems are enhanced 600% in the liver and 700% in the bowel** when coffee beans are added to the mice’s diet.

Dr. Peter Lechner, who is investigating the Gerson method at the Landeskrankenhaus of Graz, Austria, has reported that “coffee enemas have a definite effect on the colon which can be observed with an endoscope.” F.W. Cope (1977) has postulated the existence of a “tissue damage syndrome.” When cells are challenged by poison, oxygen deprivation, malnutrition or a physical trauma they lose potassium, take on sodium and chloride, and swell up with excess water.

Another scientist (Ling) has suggested that water in a normal cell is contained in an “ice-like” structure. Being alive requires not just the right chemicals but the right chemical structure. Cells normally have a preference for potassium over sodium but when a cell is damaged it begins to prefer sodium. This craving results in a damaged ability of cells to repair themselves and to utilize energy. Further, damaged cells produce toxins; around tumors are zones of “wounded” but still non-malignant tissue, swollen with salt and water.

Gerson believed it axiomatic that cancer could not exist in normal metabolism. He pointed to the fact that scientists often had to damage an animal’s thyroid and adrenals just to get a transplanted

tumor to “take.” He directed his efforts toward creating normal metabolism in the tissue surrounding a tumor.

It is the liver and small bowel which neutralizes the most common tissue toxins: polyamines, ammonia, toxic-bound nitrogen and electrophiles. These detoxification systems are probably enhanced by the coffee enema. Physiological Chemistry and Physics has stated that “caffeine enemas cause dilation of bile ducts, which facilitates excretion of toxic cancer breakdown products by the liver and dialysis of toxic products across the colonic wall.”

In addition, theophylline and theobromine (two other chemicals in coffee) dilate blood vessels and counter inflammation of the gut; the palmitates enhance the enzyme system responsible for the removal of toxic free radicals from the serum; and the fluid of the enema then stimulates the visceral nervous system to promote peristalsis and the transit of diluted toxic bile from the duodenum and out the rectum.

Since the enema is generally held for 15 minutes, and all the blood in the body passes through the liver every three minutes, “these enemas represent a form of dialysis of blood across the gut wall” (Healing Newsletter, #13, May-June, 1986).

Prejudice against coffee enemas continues, however. Although this data was made available to Office of Technology Assessment, it was largely ignored in their box on the procedure. They dismissively state “there is no scientific evidence to support the claim that coffee enemas detoxify the blood or liver.”

Coffee Enema Procedure

Ingredients Needed

- 1/2 quart (about 16 oz or 2 cups) - Purified water (*not tap water*) - for heating
- 1/2 quart (about 16 oz) - Purified water - for cooling the heated water
- 2 Tablespoons - Organic Coffee (whole coffee beans)

Other Items

- Enema bag
- Lubricant (for insertion of tube into rectum): a few drops of Olive Oil or Sesame Oil (Avoid petroleum jellies such as KY or Vaseline)
- Old towels (to use when kneeling/laying on the floor); do not use good towels (since any coffee drops will permanently stain the towels)

Instructions

1. Grind Coffee Beans

Fresh-grind the coffee beans to a fine powder. (Do not do this ahead of time so you will get the freshest, most active phytonutrients from the coffee). Pre-ground coffee beans are partially oxidized & should not be used.

2. Simmer Ground Coffee Beans for 5 Minutes

Add the freshly ground coffee bean powder to 1/2 quart of water and bring to a simmer (small, rolling bubbles) for about 5 minutes. Turn off the heat.

3. Let it sit for 5 minutes

4. Strain Mixture

Strain the coffee mixture with a fine metal strainer to remove any large particles that could clog the enema tube. (Or you can pour off the liquid into another bowl, being careful not to pour out the dregs in the bottom.)

5. Add Cool Water to Mixture

Add about 1/2 quart of room-temperature water (cool or room temperature) to the hot coffee-herbal liquid mixture - then pour into the enema bag. The idea is to cool the hot coffee mixture to a warm temperature (so it is not too hot when inserting the fluid into the rectum). The final mixture should be warm to the touch (not too hot and not too cool) - about 100 degrees F.

Note: If the temperature is too hot, it can cause damage to the anus or intestines; if it is too cool, it may cramp the intestines and toxic waste elimination may be poor. However, too cool is better than too hot.

6. Take Enema

Take an enema as follows. (Although not necessary, an excellent time to take an enema is after a bowel elimination.) Keep in mind, coffee may leave permanent stains. You may want to wear old clothes -- and use old towels (or paper towels).

Apply a small amount of oil (such as Olive Oil) to the anal area (for ease of insertion of the enema nozzle). An excellent position to do the enema is on a rug on the floor (near a toilet) on your knees with your head down near the floor. The enema bag should be hung on a towel rack (or shower curtain rod) - elevating the liquid is necessary to have enough pressure for the fluid to flow into the colon. While leaning on one hand on the floor, with the other hand, gently insert the enema nozzle into the rectum. Be sure the nozzle is inserted fully. (Be sure to put your head down near the floor so gravity will help the fluid flow downwards into the colon.)

Slowly release the hose clamp to allow the liquid to begin to flow into the colon. (Often you will have the sensation of warm liquid gurgling or flowing into the colon.) If the flow seems too fast, close the hose clamp; wait for a minute or two, then open the clamp again. Try to take about half of the liquid (about 1/2 quart) into the bowels; then hold for 10 minutes before expelling.

(During this time, you may close the clamp, remove the nozzle from the rectum; then lay on your right side during the 10 minutes - or lay on your back with legs and pelvis elevated on a pillow - if possible. If desired, you may lay in a bathtub during this time - for easier clean-up.)

After 10 minutes, expel the fluid. Then take in the second 1/2 quart and hold for another 10 minutes. Then expel. You're done!

Often, if some fecal matter is lower in the rectal tract, you may want to take in about 1/8 or 1/4 of the liquid -- just enough to expel the fecal matter in the lower tract (in this case, it is not necessary to hold the liquid for any period of time). Then divide the remaining liquid approximately in half (mentally) -- and hold each portion for 10 minutes -- to allow adequate soaking time to cleanse hardened fecal material, infectious organisms, other toxins, etc. in the lower rectal tract.

After taking in the liquid and nature calls (i.e. you feel a strong urge to expel the liquid) - even after a minute or two, do not resist -- go ahead and expel it. At first, it may be hard to hold the liquid for the full 10 minutes (or even a few minutes). Later, after several enemas (and thus a certain amount of toxic elimination), it will be much easier for the bowels to hold the liquid for the full 10 minutes. Best enema time: during the day before 8 pm. Give yourself some time to rest after the enema (20 to 30 minutes). For about 1/2 hour after your enema, remain at home or near a toilet. This helps ensure that you will be near a toilet if another small amount of enema liquid needs to come out that was not expelled earlier. (Sometimes, if the enema liquid reaches

higher in the colon tract, it may take longer to move down into the lower bowel to be expelled. So don't be surprised if you need to expel another small amount of liquid.)

Special Notes:

During your first few enemas, you may experience some nausea during or after the enema process. This is often due to the release of internal stagnant, putrefied toxins. Do not let this deter you from continuing with a series of coffee enemas. Over time, most people will find that the nausea clears within in a short time. If you do experience nausea, you may want to follow the enema with a warm cup of tea (such as green tea or hyssop tea).

Recommended Number of Coffee Enemas

The condition of the colon (and its relationship with the liver/gallbladder) of an average American adult contains high levels of toxic, stagnant waste. Therefore, we typically recommend a series of coffee enemas as follows: one coffee enema per week for 4 weeks; then 2 coffee enemas per week for 4 weeks. After completing this series, we recommend a "maintenance" coffee enema once every 60 days.

This is a magnificent, highly efficient procedure to eliminate ongoing, but still bio-accumulating toxic residues from exposure to dietary (especially restaurant eating) and environmental toxins.

Clean the enema bucket with soap and water. You may lightly boil the enema tube to sanitize.