



## Protocols for Individuals with Paralysis

Recommendations for using Fruit-Eze™ pure fruit regularity blend to *Get Going...Naturally™*.

*Note!! The following is presented by way of example only. Individuals will vary in their needs and responses. Please contact your physician before modifying a currently prescribed regimen.*

### Overview/Rationale

The Fruit-Eze™ Bowel Program has been effective in preventing impactions by providing soluble and insoluble fiber which creates soft stool and establishes regularity, and by applying principles of bowel management including the discontinuing of stimulant laxatives. In those individuals without nerve damage or spinal injury, the defecation reflex can be restored. Many begin having spontaneous bowel movements within the first four weeks of the program.

Fruit-Eze™ research for the effectiveness of use with those individuals who have paralysis resulting from spinal injury or other nerve damage has not been conducted. The program has been proven to be successful for use in those individuals with Multiple Sclerosis and CVA's. Spontaneous bowel movements did not occur for up to six months on some of these residents. Glycerin suppositories, and digital stimulation were used daily. At times, one-half dulcolax suppositories were needed. However, this was rare. Therefore, we would like to suggest the following protocols for this population. All instructions should be reviewed by your doctor. The Fruit-Eze™ staff is available to assist you. Please call us at our toll free number 1-888-REGULAR (1-888-734-8527) with any questions you may have, and to place orders.

Before starting the Fruit-Eze™ program, ensure that you have one good bowel movement as Fruit-Eze™ Regularity Blend will not soften hard stools that are already in the colon. If necessary, use a Dulcolax (bisacodyl) suppository or take one dose of a laxative to achieve a bowel movement (*for children, remember to use a child-size laxative dose*). Note that when the colon has been emptied using a Dulcolax suppository, laxative or enema, another bowel movement may not occur for three days.

### Regularity Goal

To achieve the easy (without straining) passage of well formed stools (not too hard, nor too soft) at least once every two to three days.

### Protocols

**Note:** Servings are based upon weight.

- Servings for children under 60 pounds are measured in **teaspoons**.
- Servings for adults (and children weighing over 60 pounds) are measured in **tablespoons**.

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1. Hold all stool softeners and bulk products.
2. Gradually taper the amount of stimulant laxatives on a daily basis over a 7 – 14 day period. Example: If the individual receives a dulcolax suppository daily, reduce this to a half daily for 4 days, then to a half every other day for 4 days then hold.
3. Start with 2 tablespoons of Fruit-Eze™ Regularity Blend per day (teaspoons for children under 60 Lbs.) and keep at this amount until the stimulant laxatives have been held. Once the stimulant laxatives have been held, assess the bowel function and consider increasing by 1 tablespoon (or 1 teaspoon for children under 60 Lbs). You may increase the serving up to 4 tablespoons (4 teaspoons for children under 60 Lbs) if digital stimulation and/or glycerin suppositories are not resulting in bowel movements or if the stools are hard.
  - 3.1. If the stool is too hard or too infrequent, use more Fruit-Eze™.
  - 3.2. If the stool is too soft or too frequent, use less Fruit-Eze™.
4. If a bowel movement has not occurred in 5 days, a tap water enema may be administered. If there are no results and the individual is uncomfortable, a stimulant may be needed. Again, administer a half of a dulcolax or fleet enema rather than the full amount.
5. The individual with this type of diagnosis may need the assistance of digital stimulation for the remainder of his/her life. An occasional stimulant may also be needed. Remember to assess the texture of the stools with each movement to determine the amount of Fruit-Eze™ Regularity Blend needed.
6. Fruit-Eze™ Regularity Blend can be used in place of Metamucil. The maintenance serving is 1 – 2 tablespoons daily (teaspoons for children under 60 Lbs).

**Note:** Bowel activity is unique. For some individuals, stools may become too firm if they take too much Fruit-Eze™ Regularity Blend. If this occurs, experiment by decreasing the serving by one tablespoon (teaspoon for children under 60 Lbs) until a maintenance portion of one tablespoon (or teaspoon) per day is achieved. For some individuals, daily bowel movements may occur. However, it is considered normal to experience three or more stools per week.

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We would greatly appreciate documentation regarding the effectiveness of Fruit-Eze™ Regularity Blend for individuals with these diagnoses. Documentation should include the servings used, how laxative tapering occurred, how many and what interventions were used, the effectiveness of interventions, and how long it took the individual to move spontaneously without interventions. We are available to assist by answering questions Monday through Friday at 1-888-regular (1-888-734-8527).