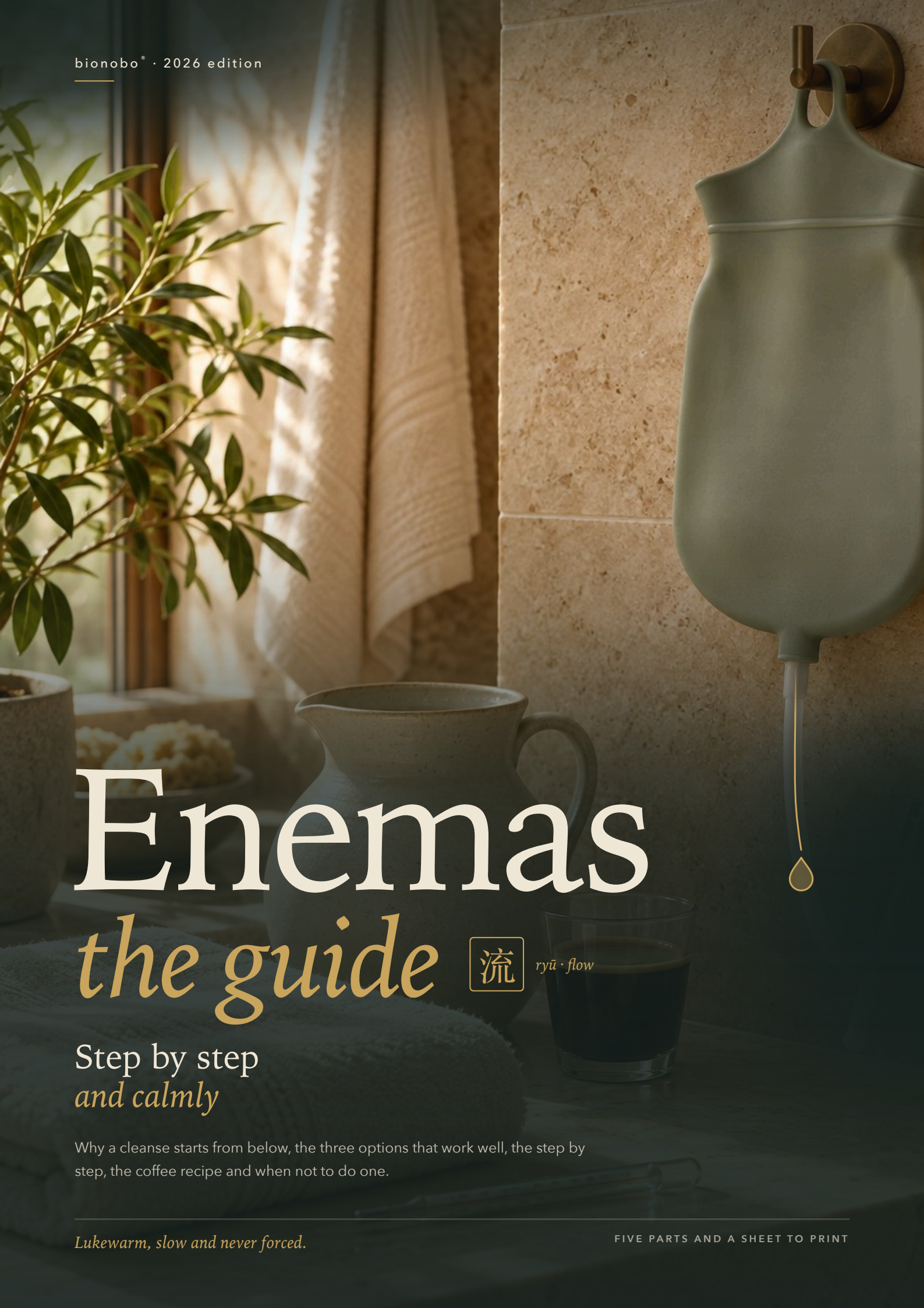

Enemas
the guide

流 *ryū · flow*

Step by step
and calmly

Why a cleanse starts from below, the three options that work well, the step by step, the coffee recipe and when not to do one.

Lukewarm, slow and never forced.

FIVE PARTS AND A SHEET TO PRINT

letter from Dani

Simpler *than it looks*

You've asked me for this many times, and I'd rather explain it properly than have you look it up just anywhere.

If this is your first time with bionobo, welcome: to begin, all you need is warm water, a bag and some time for yourself. And if you've come from the re:set, be:liver or ikigen guides, this is the guide they promised: the whole protocol, how often, and the questions I'm asked most.

Enemas are optional: re:set and be:liver work without them. But re:set and be:liver mobilise, and an enema helps that leave rather than stay in the colon. It's what most changes what people see when they release.

If you've never done one, it's normal to feel a bit wary. And you will feel some discomfort: that's normal with enemas. Slowly, without forcing, without doing it perfectly; little by little you learn, and it goes better each time.

You'll see it's simpler than it looks.

ONE RULE FOR THE WHOLE GUIDE

"Calmly, without trying to get it perfect the first time, allowing yourself to learn through experience."

A big hug, Dani CO-FOUNDER OF bionobo®

contents and shortcuts

How to read this guide *at your own pace*

You don't need to read it in one go. Open it wherever you are. *On your phone, tap any line in the contents and it takes you to its page.*

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The drainage funnel — 05
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WHERE DO I START?

First of all
Is it for you? · **p. 7**

Never done one?
At a glance · **p. 15** · the detail, on **pp. 8–14**

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Would you rather a professional did it?
Colon hydrotherapy · **p. 8**

THE ICONS IN THIS GUIDE

- warm water
- time
- with fulvic acid
- caution
- with fulvic and coffee

GUIDES LIBRARY

All our guides

This guide and all the others, **free and always up to date**: in the guides library.

bionobo.ae · guides library

PART I · CHAPTERS 01-03

I Understand *unhurried*

Before the bag, the why: what an enema does, why a cleanse starts from below and which option to choose.

What an enema is 04
01 · A VERY OLD PRACTICE

The funnel 05
02 · WHY START FROM BELOW

Three options 06
03 · WHICH ONE, AND WHEN

chapter 01 · what an enema is

What an enema is *and what it isn't*

An enema works on the last part of the large intestine: it helps empty the exit, so that what your body has already moved has somewhere to go.

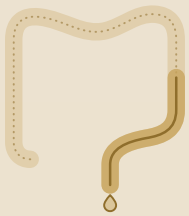
A VERY OLD PRACTICE

three days in a row, every month

DAY 1 — DAY 30

Enemas aren't a fad: they are one of the oldest forms of self-care we know of. **Herodotus wrote that the Egyptians cleansed themselves for three days in a row every month**, with emetics and enemas, to look after their health.

WHERE IT WORKS



the last part of the large intestine

With less than half a litre, an enema mostly reaches **the lower part of the colon**: right at the exit.

WHAT IT IS

Self-care, nothing complicated

- ✓ A simple **self-care tool**.
- ✓ **Supports the way out** at the end of each cleanse and usually leaves a feeling of lightness.
- ✓ **Something you learn** calmly, little by little.

WHAT IT ISN'T

Neither a cure nor an obligation

- ✕ **A treatment** or a cure.
- ✕ **Something to depend on.**
- ✕ **An obligation:** the protocols work without them.

IN ALL HONESTY

There are no published trials of fulvic acid given rectally yet. What we share here is practice and tradition, not a treatment.

SOURCES Herodotus, *Histories* II.77 · Cleveland Clinic, *Enema* (under 500 ml: the lower colon) · PubMed, search for fulvic or humic acid by the rectal route, October 2026: no published trials.

◆ PAUSE *What's holding you back from trying it? Write it down; it's almost always answered in the next few pages.*

chapter 02 · the funnel

The drainage funnel
why start from below

The main way out for what the liver packs into the bile is the gut. That's why the gut matters: there is a funnel. *If we want to drain, we have to start from below.*

OPEN THE EXIT FIRST · THEN MOVE WHAT SITS ABOVE IT

re:set be:liver

First the way out, then the liver.

WHY START FROM BELOW

First, give whatever is moving a way out.

What the liver packs into the bile leaves mainly through the gut; another part leaves through the kidneys, in the urine. And if the gut is sluggish, part of what arrives with the bile can be reabsorbed: this is called **enterohepatic circulation**.

That's why, in our way of cleansing, **first the gut and then the liver.** It is the naturopathic tradition ikigen follows.

IN PRACTICE · FROM THE BOTTOM UP

1. **Your habits** — going to the toilet well, with water, real food and movement
2. **re:set** — the gut
3. **be:liver** — the liver and gallbladder

ikigen = the three steps in a single protocol. And the enema, on release days, supports the way out (**p. 20**).

StatPearls, *Physiology, Bile Secretion* and *Lymphatic System*. The gut → liver order is our way of doing it, not a proven clinical sequence.

◆ PAUSE *How is your way out these days? Observe it, without judging.*

chapter 03 · three options

Three options *that work well*

Warm water; with fulvic acid (5 to 10 drops of alcalina per bag if you're starting out; 10 to 20 or more once you have experience); or with fulvic acid and organic coffee.

OPTION 1

Warm water

Just warm, filtered water. **The one for your first enemas**, and the one for ikigen day 2 if you have not evacuated yet.

HOLDING TIME
10 min is the aim; less, if you need to

POSITION
left side or feet against the wall

At a glance · **p. 15**

OPTION 2

With fulvic acid

5 to 10 drops of alcalina per bag if you're starting out; **10 to 20 or more** once you have experience. Our basic standard.

HOLDING TIME
10 min is the aim; less, if you need to

POSITION
left side or feet against the wall

With fulvic acid · **p. 16**

OPTION 3

With fulvic and organic coffee

The same drops of alcalina, in a litre of lukewarm organic coffee. **The classic after be:liver**, on its release day.

HOLDING TIME
12–15 min, if you can; if not, let it go sooner

POSITION
left side, like the other two

The coffee enema and recipe · **pp. 17–19**

The coffee one is the classic for the liver days; the fulvic one or plain water work just as well.

First let the water clear the way; then the fulvic acid.

And you don't have to go all in the first time: build up to it, in three enemas (**p. 14**).

WHICH ONE, AND WHEN?

	WARM WATER	WITH FULVIC	FULVIC AND COFFEE
Your first enemas	✓ to start with	once the water goes in easily	once the warm-water ones already feel comfortable
ikigen · day 2 not evacuated by the end of the day? warm water (**p. 20**)	✓	✓	✓
ikigen · day 4	✓	✓	✓ *the classic*
re:set or be:liver, separately	✓	✓	✓ after be:liver
At home, now and then	✓	✓	✓ better not before bed

And at home, as maintenance, also with shila:jit (**p. 21**).

PART II · CHAPTERS 04-07

II Prepare *all in place*

04 Is it for you? 07
05 What you need 08
06 The water 09
07 Your space 10

chapter 04 · before anything else

Is it for you? *before you start*

An enema is a simple practice, but it isn't for everyone or for every moment.

WHEN NOT

Not today, or talk to your healthcare professional first, if:

- you're **pregnant**, trying to conceive or breastfeeding (not recommended);
- you have **inflammatory bowel disease** (Crohn's, ulcerative colitis) in a flare, **diverticulitis** or undiagnosed diarrhoea;
- you have **bleeding haemorrhoids**, a fissure or rectal bleeding;
- you've recently had **abdominal or rectal surgery**;
- you have **heart or kidney disease**, high blood pressure or a fast heart rate;
- you have **strong or unexplained tummy pain**;
- you have a **stoma**;
- your **immunity is low** or you're under medical treatment.
- *For children, only if their paediatrician says so.*

No alcalina or shila:jit during pregnancy or breastfeeding.

IF YOU'VE NEVER DONE ONE

Your first time

It's better not to do your first one alone at home without having checked with your healthcare professional. A **colon hydrotherapy** session with a professional is also a good first step (**p. 8**).

SIGNS TO STOP

Stop if you notice…

- strong pain
- blood — more than a spot
- dizziness
- cold sweat

Lie down until it passes.

If the bleeding continues, or comes with a fever or with pain in your tummy or back, **get medical help**.

Lukewarm, slow and never forced. Some discomfort is normal; strong pain is not: stop.

If in doubt, check with your healthcare professional.

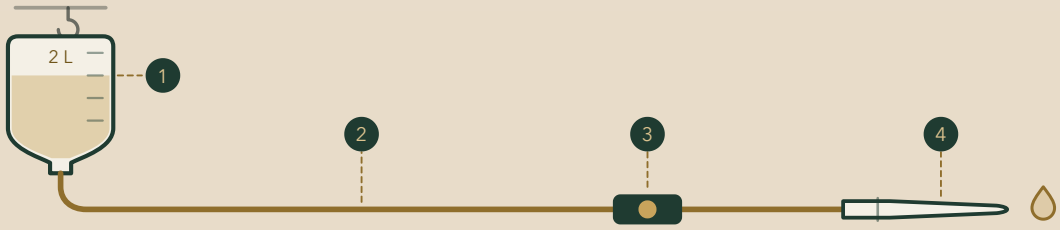
Sources: NHS SATH, *Rectal irrigation* · NHS UHB and NHS Gloucestershire, *self-administered enema* · Cleveland Clinic, *Enema*.

chapter 05 · the equipment

What you need *your own bag*

Ideally, have your own enema bag, so you can learn to use this tool and always have it with you.

WHAT AN ENEMA BAG LOOKS LIKE



1. **The bag** — 2 L, with volume markings
2. **The tube** — the water runs down it
3. **The clamp** — opens and closes the flow of water
4. **The cannula** — the tip that goes in

WHAT YOU NEED · EIGHT THINGS

01 A 2 L enema bag
Good quality, with a **clamp** to open and close the flow of water.

02 The cannula
It comes with the bag. It goes in only about 5 cm, never forced (**p. 12**).

03 A liquid thermometer
To keep the water between **36 and 38 °C** (**p. 9**).

04 A lubricant
Coconut oil, olive oil, tallow or ghee: whatever fat you prefer (**p. 11**).

05 A mat and a towel
Without a mat, just a towel, or two (**p. 10**).

06 A pillow
Or a soft surface, to lie on your side.

07 A stable support
A hook or a door handle, to hang the bag from.

08 Filtered water
And, depending on the option, alcalina (**p. 16**) and organic coffee (**pp. 18–19**).

And time to spare, near a bathroom (**p. 10**).

You'll find the bag in **pharmacies and health shops**.

NO BAG, OR PREFER TO HAVE COMPANY?

Colon hydrotherapy

Find a practitioner near you: it will do you a lot of good.

- A centre with **trained staff**.
- **Single-use equipment**.
- Tell them **your history and what you take**.

The same precautions as on **p. 7** apply.

Source: Cleveland Clinic, *Enema* (towel, near the bathroom).

chapter 06 · the water

The water *lukewarm and filtered*

Two things matter: which water you use and what temperature you bring it to.

WHICH WATER

Filtered: the water from your filter

Use filtered water: the same as from the filter you drink from. If your filter also removes the minerals, a few drops of alcalina give them back.

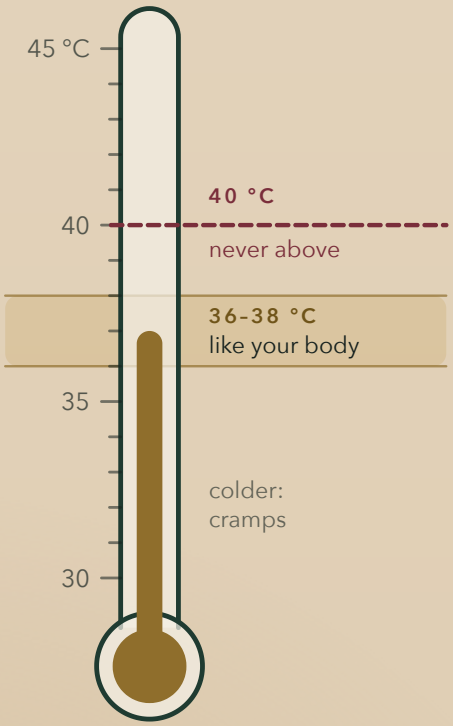
No filter yet? It's the first change we suggest: one for the water you drink and another for the shower.

"If there's something you can invest in, your first investment is taking time to understand water. Nobody is going to understand it for you."

DANI, CO-FOUNDER OF bionobo

To understand it: the guides library

WHAT TEMPERATURE



36–38 °C *and never above 40 °C*

Lukewarm, at body temperature: between 36 and 38 °C, and never above 40 °C. **Check it with the thermometer, not your hand.** If in doubt, wait.

Neither cold nor hot: that way it flows in better and without cramps.

1 **Mix**
Hot and cold filtered water, until it reaches the right temperature.

2 **Check**
With the thermometer: between 36 and 38 °C.

3 **Fill the bag**
With the clamp closed; then hang it (**p. 10**).

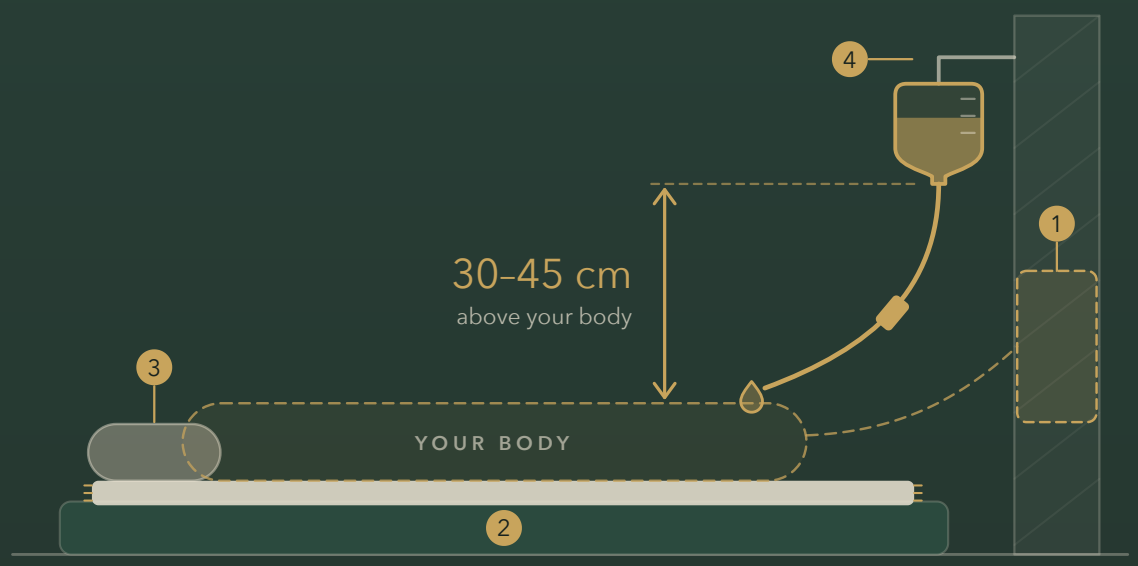
Sources: Teekachunhatean S et al., *ISRN Pharmacol* 2013 (enema at 37 °C) · NHS SATH, *Rectal irrigation* (water that is too hot or too cold causes cramps).

chapter 07 · your space

Your space *and the height of the bag*

Do it *on the floor, on a mat covered with a towel*; if you don't have a mat, just a towel, or two. And near a wall where you can *rest your feet up high*: it helps to relax the abdomen and to hold the liquid in.

YOUR SPACE · ON THE FLOOR, BESIDE A WALL

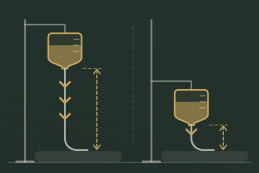


1. **Wall**, to rest your feet up high
2. **Mat** covered with a towel (or just a towel, or two)
3. **Pillow** or soft surface to lie on your side
4. **2 L bag**, hanging

HEIGHT SETS THE PRESSURE

Hang it at 30–45 cm

Find a **stable support** to hang the bag from. The higher you hang it, the more pressure the water will have and the faster it will flow in; lower, more slowly. To begin, hang it about **30–45 cm** above your body. If you feel cramps, lower it or close the clamp for a moment.



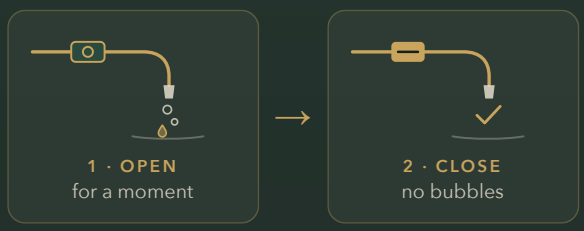
Higher
more pressure, faster

Lower
less pressure, more slowly

BEFORE YOU START

Let the air out of the tube

With the bag full and hanging, open the clamp for a moment over the sink or the toilet, until the water runs without bubbles, and close it. That way no air gets in, which causes gas and cramps.



Do it calmly, with time to spare and near a bathroom.

Sources: Son H et al., *Medicine* 2020 (the bag, less than 45 cm above the body) · NHS SATH, *Rectal irrigation* (letting the air out of the tube prevents cramps) · Healthline, *Homemade Enema* (air in the tube causes gas).

Dani's tips · before you start

How to prepare it *seven tips from Dani*

Seven details that make it easier, just as Dani tells them. Keep the ones that work for you.

If you're in a rush 01

"Keep ice cubes made with good, filtered water in the freezer, so you can cool the liquid down faster."

And always the thermometer: **36–38 °C** (p. 9).

Let the air out first 02

"Before you start, let a little liquid run through the tube until the air is out, and close the clamp."

How to do it, on p. 10.

Lubricate 03

"Use coconut oil, olive oil, tallow or ghee: whatever fat you prefer."

A little, on the tip of the cannula (p. 12).

The dose, little by little 04

"Start slow with the coffee and the alcalina *or* shila:jit*, and build up with time."*

alcalina: 5–10 drops; with experience, 10–20 or more (p. 16) · the coffee, on p. 19 · shila:jit, once alcalina already suits you (p. 21).

Hold it for 10 minutes 05

"It's important to keep it in for 10 minutes; otherwise you don't get the effect."

That's the aim. If one day you don't get there, that's fine: **every day is different** (p. 14).

Hydrate very well first 06

"Drink a litre of water with shila:jit *and* alcalina *beforehand. It's going to pull a lot more out."*

Filtered water: the water from your filter (p. 9).

AND THE SEVENTH 07

Make it a ritual

"Don't rush it. Put on a good, calm playlist, light some candles, make a ritual out of it and relax into it."

DANI, CO-FOUNDER OF bionobo

No alcalina or shila:jit during pregnancy or breastfeeding (p. 7).

PART III · CHAPTERS 08–10

III Step by step *one at a time*

08 Before and during 12
09 Hold, release, repeat 13
10 At a glance 15

chapter 08 · before and during

Step by step · 1 *before and during*

Before you start, read all eleven steps from start to finish and have your equipment to hand (**p. 8**). The first time takes a little longer; with practice, it becomes simple.

1 **Prepare the water**
Lukewarm, between 36 and 38 °C, in one of the three options (**p. 6**). With fulvic acid: 5–10 drops per bag; advanced, 10–20 or more. Fill the bag with the clamp closed. How much water: **p. 15**.

2 **Let the air out**
Open the clamp for a moment until the water comes out without bubbles, and close it again (**p. 10**).

3 **Lubricate**
A little coconut oil, olive oil, tallow or ghee on the tip of the cannula (**p. 11**).

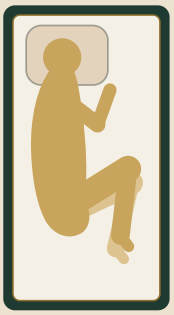
4 **Find your position**
Lie on your left side with your knees drawn up, or on your back with your feet against the wall. With all three options: the coffee one, on your left side too (**p. 19**).

5 **Insert slowly**
Only about 5 cm, never forcing it. If you feel resistance, breathe, change the angle slightly and, if it continues, stop.

6 **Open the clamp**
Let the water in slowly. If you feel cramps, close the clamp, breathe and carry on when it passes.

STEP 4 · YOUR POSITION

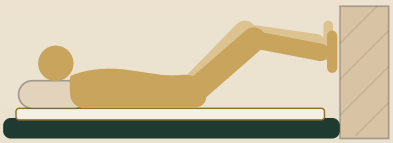
The ones that work best



On your left side
knees drawn up
all three options

Why the left?
The last stretch of the colon runs down the left side of the abdomen: lying on that side, the liquid goes in with gravity.

The coffee one too (**p. 19**).



On your back
feet against the wall

IF THE WATER STOPS FLOWING

Breathe deeply

Sometimes the flow stops. This is usually due to gas. A deep, relaxed breath helps the bowel move and the water keep flowing in.

◆ PAUSE *Before you open the clamp, three slow breaths. There is no rush.*

Position: NHS Gloucestershire and NHS Kingston and Richmond, patient leaflets · NHS Grampian, *Bowel Management* 2017 · OpenStax, *Anatomy and Physiology 2e*. Cannula and cramps: Cleveland Clinic · NHS UHB · NHS SATH · Teekachunhatean S et al., *ISRN Pharmacol* 2013.

chapter 09 · hold, release, repeat

Step by step · 2
hold, release, repeat

HOW TIME PASSES

with water or with fulvic; with coffee, the hold is longer

MINUTE 0
The water goes in
slowly; if there are cramps, a pause

10 MIN · COFFEE 12-15
You hold
without forcing, changing position

AFTERWARDS
You release
usually within 15 min of closing the clamp

THE FOLLOWING HOUR
Near the toilet
in case you need to go back

7 Close and withdraw

When the amount you wanted has gone in, or you feel your tummy is full, close the clamp and gently withdraw the cannula.

8 Hold without forcing

With water or fulvic, 10 minutes is the aim; if one day you don't get there, that's fine (**p. 14**). With coffee, 12 to 15 if you can.

While you hold it, you can slowly change position (onto your right side, back onto your left, onto your back) and gently massage your tummy, following the large intestine: up the right side, across, and down the left. And if you need to let go sooner, let go: *it isn't an endurance test.*

9 Release

To the toilet, no rush. It is normal to evacuate within about 15 minutes of closing the clamp, counting the time you held it, but stay near the toilet for the next hour. Look at what comes out, without obsessing.

10 Repeat if you need to

You can repeat it once or twice in the same session, to keep letting go of what is left. The coffee one, one a day at most: if you repeat, make it with warm water.

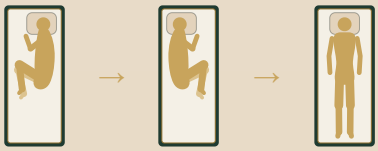
More isn't better (***p. 19***).

11 Afterwards

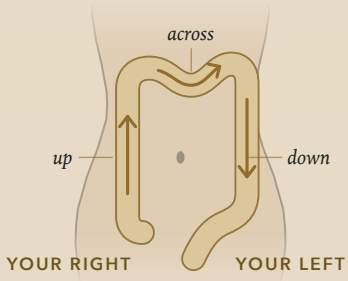
Drink filtered water. If you are on liquids or fasting, a strained vegetable broth. Wash the bag and hang it up to dry (**p. 21**).

STEP 8 · WHILE YOU HOLD

Change position and massage



1 onto your right side → 2 back onto your left → 3 onto your back



With your palm, in gentle circles, following the large intestine.

STEP 9 · WHEN YOU RELEASE

How to read what comes out

Inspection and colours of the mucus: in the re:set guide, in the guides library.

bionobo.ae/pages/guide-library

Holding, positions and the following hour: NHS UHB and NHS Gloucestershire, *self-administered enema* (hold for a few minutes) · Teekachunhatean S et al., *ISRN Pharmacol* 2013 (right, left and on the back while holding) · Cleveland Clinic, *Enema* (within 15 min; near the toilet for the first hour).

in practice · from less to more

Build up to it
three enemas, one session

"You don't have to go all in with the first enema. You can do a tester enema and clear out, then a second one to clear out again, and then go with the full-power one."

DANI, CO-FOUNDER OF bionobo

THREE ENEMAS · FROM LESS TO MORE

1
FIRST
The tester
- **Warm water**, a small amount.
- **No holding.**

↓ *You clear out*

→

2
SECOND
The clear-out
- **Warm water** again, a small amount.
- **No holding:** to clear out again.

↓ *You clear out*

→

3
THIRD
The full one
- **With fulvic acid**, or with fulvic and organic coffee (**pp. 16–19**).
- **This is the one you hold:** 10 minutes is the aim; with coffee, 12 to 15 if you can (**p. 13**).

↓ *You release, no rush*

AND LISTEN

"Every day is different with enemas."

Some days it goes in and holds easily; other days it doesn't. Listen and adjust.

TO GET YOUR BEARINGS

- ✓ **It all fits in one session:** you can refill the bag once or twice (**p. 13**).
- ✓ **The coffee one, one a day at most:** make it the third (**p. 19**).
- ✓ **If these are your first enemas**, stay with warm water: the fulvic and the coffee come later (**p. 6**).

◆ PAUSE *How far do you feel like going today? Decide as you go.*

chapter 10 · to print

Your first enema *at a glance*

"We know enemas can look complicated, but they are an incredible tool."

DANI, CO-FOUNDER OF bionobo

1 Have to hand

- [ ] **2 L** bag with clamp and cannula
- [ ] Thermometer
- [ ] Coconut oil, olive oil, tallow or ghee
- [ ] Mat with a towel (or just a towel, or two) and pillow
- [ ] A hook or a door handle to hang the bag from
- [ ] Filtered water

2 Prepare

- [ ] Water at **36–38 °C**, never above 40 °C
- [ ] Start with **300–700 ml**
- [ ] Bag **30–45 cm** above you
- [ ] Let the air out of the tube
- [ ] Lubricate the tip of the cannula

3 Do it

- [ ] Left side, knees drawn up
- [ ] Cannula about **5 cm**, never forced
- [ ] Open the clamp slowly
- [ ] If it stops, breathe
- [ ] Close and withdraw
- [ ] Hold for **10 min**, if you can
- [ ] To the toilet, no rush

4 Stop if you notice

- Strong pain
- Blood
- Dizziness or a cold sweat

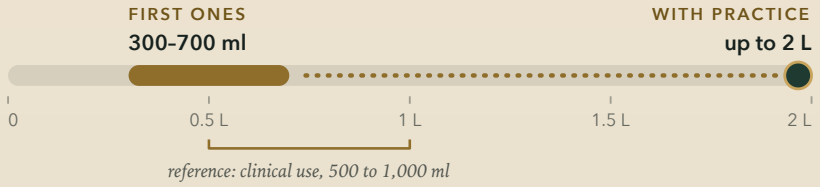
Lie down until it passes. All the signs, on **p. 7**.

HOW MUCH WATER

Little by little

With practice you can build up, as long as your body takes it comfortably.

Never force it.



MY NOTES *After your first enema, write down how you felt. The second time, compare.*

✓ **Print this page and keep it to hand on the first day.** To save ink, print just this page, in black and white or in draft mode.

Clinical reference: Cleveland Clinic, *Enema* · NHS SATH, *Rectal irrigation*.

PART IV · CHAPTERS 11-13

IV Options *with fulvic and coffee*

11 With fulvic acid 16
12 The coffee enema 17
13 The recipe 19

chapter 11 · option 2

With fulvic acid *the drops, little by little*

It's prepared just like the warm-water one: the only difference is that, once the water is lukewarm, you add a few drops of alcalina. The rest is as always (*pp. 12–13*).

THE HOUSE MEASURE

5–10 → **10–20** *or more*

BEGINNERS ADVANCED

drops of alcalina per enema bag

Go little by little: you can build it up (**p. 11**).

HOW AND WHEN

- Add the drops **once the water is lukewarm**, at 36–38 °C (**p. 9**).
- **When:** when the water on its own already goes in well (**p. 6**).
- It's the **basic standard** on the release days in ikigen (**p. 20**).

THE WHY

Why do we add fulvic acid?

It's our way of doing it: at bionobo it's our standard, in the coffee one too. A few drops of alcalina go into the enema water: they add minerals to the water.

"Fulvic acid is known as a natural chelator: it forms chelates with other compounds. What we do know is that it penetrates cells very well: because of its tiny size, it is credited with the ability to cross barriers other compounds cannot, such as cell barriers or the blood–brain barrier."

— DANI, CO-FOUNDER OF bionobo

WHERE TO FIND IT

alcalina · FULVIC BIOMINERALS, IN DROPS

Fulvic and humic acid minerals

If you already take it in water, it's the same bottle.

View alcalina SCAN OR TAP

SIZES

30 ml 100 ml

chapter 12 · option 3

The coffee enema
a classic, taken calmly

The coffee enema isn't an internet fad. It became popular in the 1930s and has been used for decades in the naturopathic tradition to support the liver on its release days.

WHAT THE TRADITION SAYS

It's credited with stimulating bile: that's what the tradition says. *That's why it's the classic for the liver days.*

The 1930s: Son H et al., *Medicine* 2020.

WHICH COFFEE

Organic coffee, ground, unflavoured and not decaffeinated. How to choose it, on **p. 18**. And always with its drops of alcalina (**p. 19**).

organic · ground · not decaffeinated

WHAT ABOUT THE CAFFEINE?

≈ 3.5 *times less*
IN THAT STUDY

Some of the caffeine passes into the blood, although quite a lot less than when you drink it: in a study of 11 healthy men (a 500 ml enema held for 10 minutes), about 3.5 times less. If you're sensitive to caffeine, better not to do the coffee one before bed.

As a drink
180 ML

As an enema
500 ML · 10 MIN

CAFFEINE THAT REACHES THE BLOOD

Teekachunhatean S et al., *ISRN Pharmacol* 2013.

AND GLUTATHIONE?

It is also credited with stimulating glutathione. The idea comes from studies in mice in the 1980s: when they were given green coffee beans with their food, the activity of an enzyme, glutathione S-transferase, went up, because of two compounds in coffee: kahweol and cafestol. That was coffee eaten, not an enema.

In people, the little that has been measured: a crossover trial in 11 healthy men compared, over 12 days, the coffee enema with coffee as a drink. Neither of them raised glutathione in the blood, and the antioxidant capacity of the serum, instead of going up, went down.

Lam LKT, Sparnins VL, Wattenberg LW, *Cancer Res* 1982;42:1193–8 · Teekachunhatean S et al., *Hum Exp Toxicol* 2012;31:643–51.

"We see it as a ritual of care, without making health claims. But we know the results: energetically, the way you feel afterwards is incredible." — DANI

When

1. **The classic after be:liver,** on its release day: in ikigen, day 4 (**p. 20**).
2. **Better once you already feel comfortable** with the water ones.
3. **One to three times a week,** on alternate days.

◆ PAUSE *The tradition gives you a starting point; how it feels to you, only you can tell.*

option 3 · before the recipe

How to choose your coffee *clean, really clean*

We know it's sometimes hard to find a coffee that is 100% organic, pesticide-free, free of heavy metals and free of mould. Those are the three things it must have.

1 Organic, pesticide-free

WHAT TO LOOK FOR

The EU organic logo and the control body's code on the pack. Grown without synthetic chemical pesticides.

2 Free of heavy metals

WHAT TO LOOK FOR

A laboratory analysis of the batch (lead, cadmium, arsenic, mercury), published or sent to you if you ask.

3 Free of mould

WHAT TO LOOK FOR

A mycotoxin analysis (ochratoxin A and aflatoxins), published or available if you ask.

"If you can't, at least look for organic, which you will always find." — DANI

The organic logo (Regulation (EU) 2018/848) is about how it is grown; it doesn't test for mould or heavy metals: only an analysis tells you that. It should come from an independent laboratory and be for the batch you are buying.

A DELICATE CROP

"Coffee is one of the crops with the most pesticides and mould. That is why it is so important to choose a quality one."

— DANI

Pesticides: they are used at different stages of conventional coffee growing; once it is roasted, tests find residues in a minority of samples, most of them below the legal limits. **Mould:** what is measured is the toxins it leaves behind (mycotoxins such as ochratoxin A). Coffee is frequently contaminated with the fungi that produce it: in worldwide reviews it is detected in just over half of the samples, usually below the EU limits (3 µg/kg in roasted coffee; 5 in instant). And the label doesn't tell you.

Merhi A et al., *Front Public Health* 2022 · Gamal A et al., *Food Chem* 2025 · Massahi T et al., *Food Addit Contam Part A* 2024 · EFSA, *EFSA Journal* 2020 · Regulation (EU) 2023/915.

THE WHY

"Don't do it with ordinary coffee, because it goes straight to the liver: there is no filter before it. If the coffee is clean, really clean, it will go very well."

— DANI, CO-FOUNDER OF bionobo

COLON AND UPPER RECTUM → PORTAL VEIN → LIVER

What is absorbed in the colon and the upper part of the rectum passes into the portal vein, which carries that blood to the liver: it is the first organ it passes through. The lowest part of the rectum drains, in part, into the general circulation.

That is why, in an enema, what the coffee carries matters as much as the coffee.

Harkins JM and Ahmad B, *StatPearls* 2023 · Hua S, *Front Pharmacol* 2019.

ABOUT BRANDS

We don't recommend brands

We are working on a formula to have it in our shop in the future. For now, this is what we recommend: the three criteria. And with the coffee chosen, the recipe (**p. 19**).

chapter 13 · option 3, in the kitchen

The recipe *with fulvic and organic coffee*

It's Dani's recipe: simple and gentle, for one litre. Coffee enemas can be a little dehydrating, so we hydrate well beforehand. And we always add biominerals.

THE RECIPE AT A GLANCE

French press	≈ 10 min	Strain really well	36–38 °C	The drops
coffee and hot water	standing, lid on	not a ground · up to 1 L	cool, with thermometer	of alcalina, at the end

Ingredients

FOR 1 LITRE

2 tablespoons
of ground organic coffee (how to choose it: **p. 18**)

1 litre of filtered water
500 ml to boil; the rest, cold (**p. 9**)

5 to 10 drops of alcalina
per bag if you're starting out; 10 to 20 or more with experience. Always: **they're part of the recipe**

French press and fine sieve
"Strain it really well. If a single grain or bit of coffee gets through, it can block the tube and spoil your session." — DANI

Method

10 MIN STANDING, PLUS COOLING

1. Put the ground coffee in the French press and pour over 500 ml of filtered water, just boiled.
2. Put the lid on and let it stand for about 10 minutes. Then press the plunger down slowly.
3. Strain it as well through a fine sieve (or a paper or cloth filter), until not a single ground is left, and top up to one litre with cold filtered water.
4. Let it come down to 36–38 °C and check it with the thermometer. If in doubt, wait.
5. **Now add the drops of alcalina**, once the water is lukewarm.

HOW TO DO IT

On your left side, *slowly*

Lie on your left side, with your knees drawn up. Let the liquid in slowly. The whole litre doesn't need to go in: the amount that feels comfortable for you (**p. 15**). Hold it for 12 to 15 minutes if you can; if not, let it go sooner. The rest is as in the step by step (**pp. 12–13**).

The last stretch of the colon runs down the left side, and what is absorbed there reaches the liver through the portal vein (**p. 18**).

GOOD TO KNOW

What has been described, calmly

With the coffee enema, rectal burns from using the liquid too hot, and irritation of the colon (colitis) in some people, have been described. And with any enema, if it's overused and done very often, salt (electrolyte) imbalances have also been described. **So: well hydrated, always lukewarm, one a day at most, and stop if you feel pain.** If in doubt, check with your healthcare professional.

Risks: Son H et al., *Medicine* 2020 (review of cases) · Sashiyama H et al., *Gastrointest Endosc* 2008 · Jones LE and Norris WE, *Endoscopy* 2010 · Kim S et al., *Endoscopy* 2012 · Lee AH et al., *ACG Case Rep J* 2020 · Eisele JW and Reay DT, *JAMA* 1980 · Chertow GM and Brady HR, *Lancet* 1994. Position: sources on **p. 12**.

PART V · CHAPTERS 14-15

V Support *in the protocols and at home*

14 In the protocols 20
15 At home 21

chapter 14 · in the protocols

In re:set, be:liver and ikigen *where it fits*

In the protocols, the enema goes on the *release days*: when what re:set and be:liver have mobilised has to come out.

ikigen · WHEN TO DO IT · RHYTHM A

DAY 1	DAY 2	DAY 3	DAY 4
re:set	*morning or afternoon*	*never*	*morning or afternoon*
the 24-hour cleanse · **no enema**	warm water, with fulvic or with fulvic and organic coffee	be:liver: it is the night of the flush	the classic, with fulvic and organic coffee
	all three are fine		*also fine*

On release days, **one session a day**, in the morning or in the afternoon: it doesn't have to be at night. **The morning works very well if you haven't evacuated yet.** You can refill the bag once or twice. **Never on be:liver day.**

AT THE END OF DAY 2

Haven't you evacuated?

B A **warm-water** enema that night and **be:liver a day later**: you move to rhythm B, with an extra day of fasting with ki:wami.

IF YOU DO THEM ON THEIR OWN

re:set or be:liver separately

The next day, in the morning or in the afternoon, or 2-3 days later, staying on the liquid diet. If you stay on liquids or keep fasting after the last release, you can repeat it **2-3 days later**.

re:set
The 24-hour protocol with fermented kōso enzymes.
View re:set

be:liver
The liver and gallbladder protocol.
View be:liver

ikigen
The three steps in a single protocol · 48 h of kit, over 4 days.
View ikigen

Each protocol's guide, in the **guides library**.

chapter 15 · at home

At home *as maintenance*

After the protocols, you can keep your bag to hand and carry on with them: not only with fulvic acid, but also with shila:jit and with organic coffee (*p. 18*).

HOW OFTEN

Now and then, when your body asks for it. *You'll know better than anyone when.*

The idea isn't to depend on them, but to support your body at specific moments. The coffee one, one to three times a week, on alternate days (**p. 17**).

The everyday basics, in the Beginner's Guide to Gentle Detox, in the **guides library**.

EVERY DAY

What keeps your gut moving

water · real food · movement

shila:jit · GOLDEN GRADE · HIMALAYA

With shila:jit

You can also do it with shila:jit, as maintenance. Fully dissolve a piece the size of **a small pea** in a little warm water **for each litre** of enema water, and strain it so no particles are left.

It's a traditional practice; there are no studies of it by this route.

No alcalina or shila:jit during pregnancy or breastfeeding.

HIMALAYAN MINERAL RESIN

shila:jit

View shila:jit

LOOK AFTER YOUR BAG

Your bag, for you alone

After each use, wash it with warm water and mild soap, rinse it well, hang it open to dry and replace the cannula from time to time.

warm water · mild soap · hung open · only yours

Cleveland Clinic, *Enema* (overuse; clean equipment) · Healthline, *Homemade Enema* (cleaning the equipment) · shila:jit: house practice (PubMed search, October 2026).

questions · short answers

Frequently asked questions
the ones we hear most

01 Does it hurt?

It's normal to feel some pressure or a cramp at the start. Close the clamp, breathe and carry on once it passes. **Strong pain is not normal: stop** (**p. 7**).

02 What if nothing comes out?

That's fine. Your body may have absorbed some of the water, especially if you're a little short of fluids. Drink, move around a bit and **don't keep repeating enemas to force it**.

03 Why coffee, if you don't drink coffee during the cleanse?

By the rectal route, considerably less caffeine reaches your blood than when you drink it: about 3.5 times less in one study (**p. 17**). If you're sensitive to caffeine, better not before bed.

04 Can I use tap water?

Better filtered: the water from your drinking filter (**p. 9**).

05 How many drops if I only half-fill the bag?

5 to 10 drops of alcalina per bag; with little water, start with 5. Go up to **10 to 20 or more** only with a full bag and with experience.

06 How often, at home?

Now and then: you'll know when (**p. 21**).

07 Does it affect my gut flora?

If you do it now and then, as this guide suggests, there's no need to worry. What looks after your flora every day is real food: when you go back to eating, **include live fermented foods**, as the re:set and ikigen guides suggest.

08 Enema or colon hydrotherapy?

You do an enema yourself at home, and it works on the final part of the intestine. In hydrotherapy, a professional passes more water through special equipment. If you'd rather have someone with you, it's a good option (**p. 8**).

✓ THE GUIDE'S FIGURES, AT A GLANCE

36–38 °C	30–45 cm	300–700 ml	10 min	5–10 drops	1 a day
the water; never above 40 °C	the bag, above you	in the first enemas	to hold; with coffee, 12–15	or 10–20 or more, with experience	on release days
P. 9	P. 10	P. 15	P. 13	P. 16	P. 20

Another question? Write to us: **hola@bionobo.com**.

NHS SATH, *Rectal irrigation* · Cleveland Clinic, *Enema*
Teekachunhatean S et al., *ISRN Pharmacol* 2013

closing · letting go

Letting go *you choose*

An enema is a small gesture: warm water, some time with yourself, and letting go.

Letting go is hard, and at times it will feel like you're having a rough time, but your future self will thank you. Cleansing isn't only physical, it isn't only what comes out: it's everything that has been stuck for a long time. Habits, emotions… all of it.

Letting go of control, rather than taking control. Little by little, nothing perfect: learning to feel yourself.

Dani

BEFORE CLOSING

Set an intention

Write it here, before your next enema.

What do you want to let go of?

What are you going to stop giving your energy to?

You choose: one day or day one.
Your moment starts today.

contact

Enemas 流 *ryū · flow*

the guide

Thank you for making it this far. Start with warm water, little by little, and come back to this guide whenever you need it. It doesn't have to be perfect: all it takes is starting.

GUIDES LIBRARY

All our guides, free

This one, the guides to re:set, be:liver and ikigen, and the beginner's guide, always in their latest version.

bionobo.ae/pages/guide-library

WHERE TO COME BACK TO

Is it for you? BEFORE YOU START P. 7

Step by step BEFORE AND DURING P. 12

At a glance YOUR FIRST ENEMA P. 15

With fulvic acid 5-10 DROPS · 10-20 OR MORE P. 16

The recipe FOR THE COFFEE P. 19

In the protocols WHERE IT FITS P. 20

NOTICE

This guide is inspiration, not health advice, and it is not meant to diagnose, treat or cure anything. We are not a medical team, and this guide does not replace your healthcare professional. Enemas are not recommended during pregnancy or breastfeeding. No alcalina or shila:jit during pregnancy or breastfeeding. **If you have any medical condition or take medication, always, always consult your specialist.**

hola@bionobo.com

Any question about the guide or where to start.

bionobo.ae

The guides library and the product pages.

SOURCES

Herodotus, *Histories* II.77 · Cleveland Clinic, *Enema* · NHS SATH, *Rectal irrigation* · NHS Grampian, *Bowel Management* 2017
NHS UHB, NHS Gloucestershire and NHS Kingston and Richmond, *self-administered enema* · OpenStax, *Anatomy and Physiology 2e*
StatPearls, *Physiology, Bile Secretion* and *Lymphatic System* · Son H et al., *Medicine* 2020 · Lam LKT et al., *Cancer Res* 1982
Teekachunhatean S et al., *Hum Exp Toxicol* 2012 and *ISRN Pharmacol* 2013 · Regulations (EU) 2018/848 and 2023/915
Merhi A et al., *Front Public Health* 2022 · Gamal A et al., *Food Chem* 2025 · Massahi T et al., *Food Addit Contam Part A* 2024
EFSA, *EFSA Journal* 2020 · Harkins JM and Ahmad B, *StatPearls* 2023 · Hua S, *Front Pharmacol* 2019 · Healthline, *Homemade Enema*
Sashiyama H et al., *Gastrointest Endosc* 2008 · Jones LE and Norris WE, *Endoscopy* 2010 · Kim S et al., *Endoscopy* 2012
Lee AH et al., *ACG Case Rep J* 2020 · Eisele JW and Reay DT, *JAMA* 1980 · Chertow GM and Brady HR, *Lancet* 1994.

alcalina, shila:jit, ki:wami, re:set, be:liver and ikigen are food supplements. They are not intended to diagnose, treat, cure or prevent any disease, and do not replace a varied, balanced diet or professional medical judgement. Do not exceed the recommended daily dose. Keep out of the reach of children.

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