This information was up to date at the time of release to the Heads of Midwifery.

The editorial board does not accept liability for any errors or omissions following its subsequent publication.

Updating arrangements for the formulary should be decided upon and implemented at a local level.

Legal status (GSL, P or POM on exemption list, or PGD)	P - midwife may supply
Patient group	Women with constipation (passage of stools less frequent than woman's normal function)
	Where there is a definable cause such as analgesics, dehydration and there is evidence of faecal impaction but no other new symptoms.
Clinical indication	Constipation, which has not responded to oral laxatives.
Pharmacology (Onset and duration of action where appropriate)	It is a faecal softener which works by increasing the penetration of fluid into the faeces. Usually effective between 5 to 20 minutes.
Pharmaceutical form, strength, route of administration	Docusate Sodium 0.12 g in each 10 g micro-enema. For rectal administration. Lubricate the tip of nozzle with some of the content to aid insertion.
Dose, frequency and maximum number of doses or period of time for administration or supply	One dose. If required, a second micro-enema may be used on the same or the next day. Maximum of two doses.
Contra-indications/exclusion criteria	 Haemorrhoids, anal fissures, rectocolitis, anal bleeding, abdominal pain, intestinal obstruction, nausea, vomiting, inflammatory bowel disease, ileus. Known hypersensitivity to any component of the medicine
Cautions and action that will be taken if a caution applies	 should not be administered chronically as prolonged use can precipitate the onset of an atonic non-functioning colon and hypokalaemia check for and document any allergies check and document past medical and drug history and current medication to ascertain potential for overdose if a caution applies consult with a doctor document consultation in maternity record
Medicine interactions and action that will be taken if a patient is taking a medicine that may interact	 may increase resorption of medicines should not be used with hepatotoxic medicines if there is a clinically significant drug interaction, consult with a doctor before administration or supply document consultation in maternity record refer to current BNF for latest information on interactions

Docusate sodium microenema (Norgalax®)	
Potential adverse reactions and side effects including actions to be taken if adverse medicine reaction is suspected	 local irritation, anal burning, rectal pain, rectal bleeding, diarrhoea and urticaria cases of hepatotoxicity have been reported with oral intake of docusate taken together with other laxatives on labour Nil on the neonate Nil on breast feeding Nil
	 if a serious adverse reaction is suspected please report to the MHRA Yellow Card Scheme http://yellowcard.mhra.gov.uk/
Overdose	 will result in excessive purgation which should be treated symptomatically immediate assessment/treatment is essential - refer to medical staff manage in accordance with established treatment guidelines or see BNF overdose section for further advice contact National Poisons Centre 0344 892 0111
Action if patient declines	 refer to authorised prescriber or doctor document in maternity record
Additional advice and information	 advise to contact midwife/GP if condition worsens or symptoms persist supply the manufacturer's patient information leaflet if requested
Patient monitoring arrangements during and after treatment and follow-up required	Monitor to see if bowels have opened. If not successful after one dose it is advisable to refer to medical staff.
Particular storage requirements	-

References

- Summary of Product Characteristics Norgalax®. Text revision 21.9.2015 Accessed 24.12.2019 https://mhraproductsprod.blob.core.windows.net/docs/13cbff6ac1f70efa254bf788449962ee18cd7cee
- 2. http://www.bnf.org