

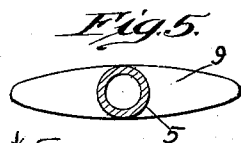
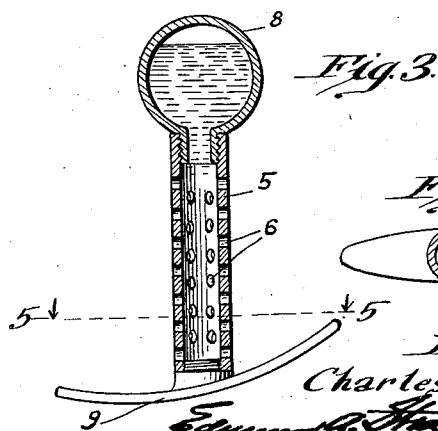
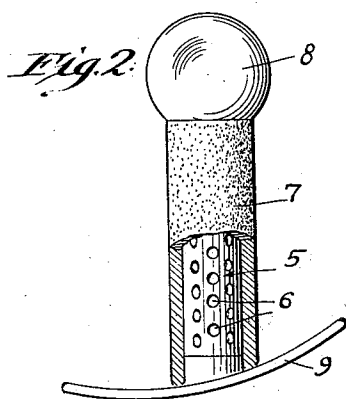
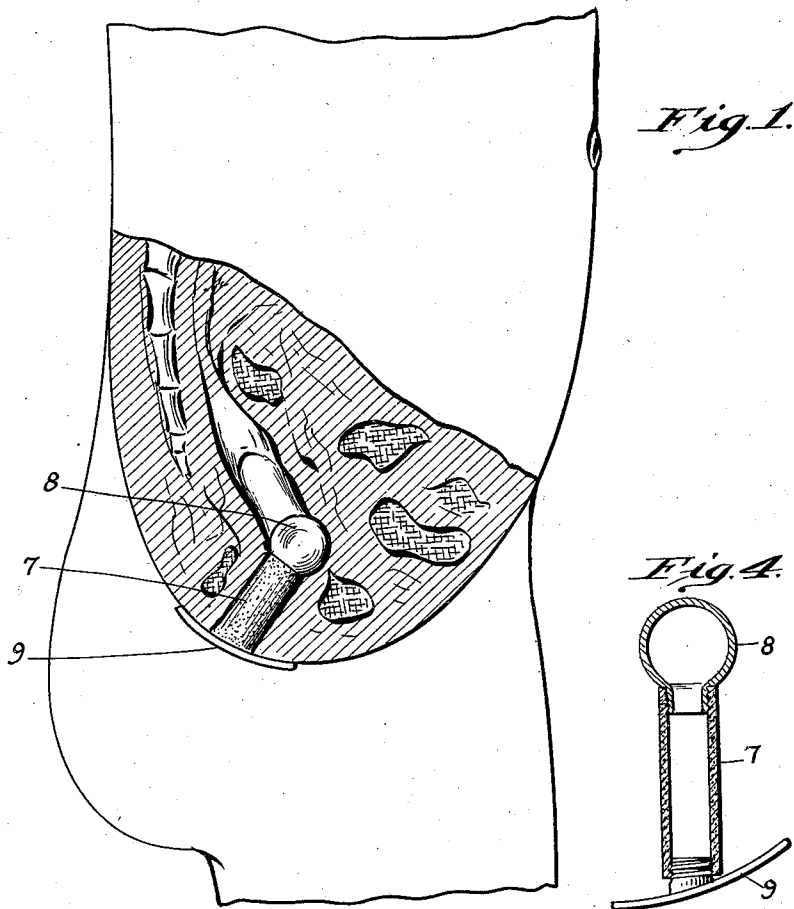
June 10, 1930.

C. S. FREEDMAN

1,762,858

RECTAL SUPPOSITORY AND HOLDER THEREFOR

Filed Aug. 25, 1927



Inventor
Charles S. Freedman
Edmund R. Hulse
Attorney

Patented June 10, 1930

1,762,858

UNITED STATES PATENT OFFICE

CHARLES S. FREEDMAN, OF LOS ANGELES, CALIFORNIA

RECTAL SUPPOSITORY AND HOLDER THEREFOR

Application filed August 25, 1927. Serial No. 215,433.

This invention has relation more specifically to a device for supporting an expansible rectal suppository in position in a rectum.

5 A chief object of the invention is to provide a suppository holder that will securely maintain an expansible suppository in place in a rectal canal and to provide means for the application of a fluid to the suppository
10 after the same has been mounted in position for expanding the same.

Another object is to provide a holder having a fluid reservoir or well for supplying fluid to expand the suppository after an
15 initial placement.

Fig. 3 is a central longitudinal section through the holder.

Fig. 4 is a modified form of holder.

Fig. 5 is a transverse section through the holder taken on line 5—5 of Fig. 3.

Heretofore, suppositories have been employed in connection with certain diseases of the rectal canal, such as fissures, fistula, hemorrhoids, prolapse of the rectum and certain prostatic conditions, to effect medication of the affected parts. When such
60 suppositories are introduced into the rectal canal, the action of the sphincter muscles (internal and external) is to force the same upwardly into the canal and beyond the
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a pliable material such as vulcanized rubber in order that it may conform to the movements of the patient, although no discomfort would be occasioned by the use of bases formed of metal or hard rubber.

The bulbous reservoir, when the holder is in position, passes above the grasp of the internal sphincter muscle of the rectal canal, thereby causing a continuous and intermittent contraction of the internal and external sphincter muscles in an effort to expel the suppository, and thus cause a continuous massage of the medication carried by the suppository into the diseased or disordered portions of the anal canal.

The type of suppository which I have successfully employed in connection with my holder consists of cylindrical portions of tangled seaweeds, known to the profession as "tents." Each portion being bored in order that it may be conveniently held in position on the perforated metal tube of the holder, as shown in the various views of the drawings. The exterior surface of the "tent" is supplied with the desired medicant, and it will be obvious that the medicant will be continuously applied to the affected parts as long as the holder is worn. As the medicated suppository is gradually absorbed, compensatory expansion of the "tent" is taking place simultaneously, thus maintaining the appliance in firm contact with the rectal tissues, and overcoming any tendency of the same to relax and fall away from contact with the medicant.

When placing the holder with the suppository in place thereon in the anal canal, the bulbous end is inverted and filled with distilled water or a medicated solution. The suppository is then placed on the stem which is then attached to the bulb. The holder may then be placed in position as shown in Fig. 1. The diameter of the seaweed "tent" will expand to several times its normal size when submitted to the action of a fluid but its maximum expanded diameter will be less than the diameter of the reservoir 8, this expansion serving to distend the wall of the anal canal and thus permit of a complete medication of the affected parts.

In Fig. 4 of the drawings, I have shown a modified form of holder in which the perforated tube is dispensed with, the supporting base member and bulbous reservoir being screwed in the end of the suppository base. The diameter of the bore in this case is slightly smaller than the threaded ends of the outlet part of the bulb and the stud on the base plate, the threads engaging the wall of the bore of the suppository and preventing an accidental disengagement. While this form of holder is not as quickly assembled as the form first described, yet it will be found to be as equally efficient.

What I claim is:

1. A rectal suppository holder comprising a hollow shaft member having a fluid reservoir at its upper end, and a base member secured to the lower end of said shaft.

2. A rectal suppository holder comprising a hollow shaft for supporting a suppository thereon having a fluid reservoir at its upper end, and a closure member detachably secured to the lower end of said shaft.

3. A rectal suppository holder comprising a hollow shaft member for supporting a suppository thereon, an enlarged member detachably secured to the upper end of said shaft adapted to be engaged by the rectal muscles to prevent undue slippage of the holder when in position, and a base or closure member secured to the lower end of said shaft.

4. A rectal suppository holder comprising a tubular member having a plurality of perforations in its wall, a fluid reservoir formed on the upper end of said tube and in fluid communication therewith, and a base or closure member secured to the lower end of said tube.

5. A rectal suppository comprising a hollow shaft member having a perforated wall, a bulbous fluid reservoir detachably secured to the upper end of said shaft member for supplying fluid to the perforated shaft member, and a base or closure member detachably secured to the lower end of said shaft member.

6. A rectal suppository holder comprising a perforated tube, a fluid reservoir secured to the upper end of said tube for supplying a fluid thereto and to prevent a displacement of the holder when in position in the rectal canal, and a base or closure member secured to the lower end of said tube.

7. A suppository holder comprising a perforated tube for supporting a suppository having a medicated surface thereon, an expandible suppository mounted on said tube, and a fluid reservoir secured to the upper end of said tube for supplying fluid to the suppository to expand the same.

8. A rectal suppository holder comprising a perforated shaft member closed at its lower end for supporting a suppository, and a hollow fluid holding member secured to the upper end of said shaft, said member adapted to be engaged by the rectal muscles to prevent disengagement of the holder and the suppository thereon after placement.

9. A rectal suppository comprising a tube having perforations in its wall, a fluid holding member of greater diameter than the tube connected to its upper end, a suppository encircling said tube having a medication on its outer surface, and a closure member detachably connected to the lower end of said tube.

10. A rectal suppository comprising a cylindrical member formed of expansible material having a medication applied thereto, a fluid reservoir connected to the upper end of said suppository for supplying fluid thereto, and a closure member secured to the lower end of said suppository.

In testimony whereof I affix my signature.

CHARLES S. FREEDMAN.

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