

Care Immediately Post Gastrostomy Tube insertion

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Outline

- Post-op instructions
- When to commence feeds
- Dressings and cleaning
- Advancing and Rotating tubes
- Discharge education
- Checking balloon volume
- Blocked tubes
- Commonly Asked Questions

Post-op Instructions

- Documentation: Brand, French size of tube used, position at skin level
- Post-op orders
- Operation report

- Bed rest: 2 hours post procedure generally accepted
- Refer to local guidelines for use

When to commence enteral feeds?

- 2-4 hours in adults
- 4-6 hours in pediatrics
- Pt's should be positioned 30-45^o from horizontal during feeding and for 30-60min post feeding.
- Medications can be administered as soon as the PEG is cleared for feeding.
- Oral intake can commence when feeding can be commenced.

What about water flushing before use?

- No evidence to support trials of water flush prior to use for enteral feeding.
- Daily water flushes are recommended to maintain tube patency.
- Tap water is generally considered safe for daily flushes for gastrostomies.



Dressings & Cleaning

- Dressings can be removed 24 hours after initial insertion.
- The PEG site should not be covered with a dressing long-term (can cause dampness, skin damage, infection).
- Once dressings removed the site can be washed with warm soapy water.

1. ESPEN guidelines on artificial enteral nutrition, 2005.
2. Gastrostomy guidelines: Sax Institute for the NSW Agency for Clinical Innovation, 2013.
3. Enteral Nutrition Manual, DAA 2011.



Advancing + Rotating PEG

- Should occur 24 hours post initial insertion of PEG to reduce adhesion.
 1. advance tube 2-3cm ventrally,
 2. rotate 360°,
 3. pull back to resistance of internal fixator.
- 2-5mm distance between skin and external flange.
- Excessive tension between skin + phlange should be avoided.
- Tension can be released 24 hours after insertion.

1. Enteral Nutrition Manual, DAA 2011.

2. ESPEN guidelines on artificial enteral nutrition, 2005.

3. Gastrostomy guidelines: Sax Institute for the NSW Agency for Clinical Innovation, 2013.

Advancing + Rotating RIG

- Check manufacturer instructions if T fasteners are dissoluble sutures or to be cut.
- Removal of T fasteners can be 24-48 hours post insertion.
 - nurses
 - GP
 - other trained professional
- Routine cares: A+R, cleaning



Discharge education

- Written + verbal
- Tube type and how held in place:
 - Balloon volume, how checked, how often, by whom
- Daily checking of stoma site
 - including position at skin level, leakage, excoriation
- Daily advancing and rotating
- Cleaning of stoma site
- Water flushing to prevent blockages

Discharge education

- Feeding plan:
 - feed type, method, water flushes
- Potential complications and how to manage
- Contact details, including after hours
- Follow up arrangements for HEN + PEG care

Discharge post procedure

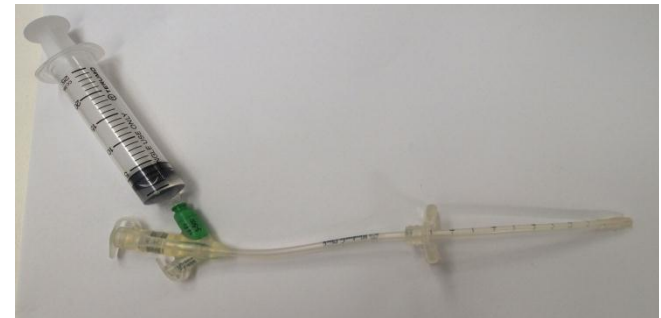
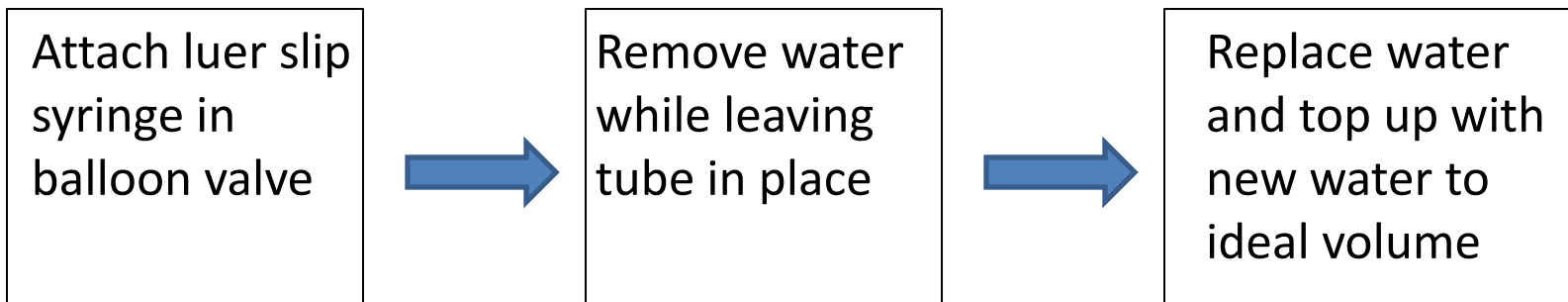
- Recommendations for how long to monitor should be agreed in local policy:
 - at least 4 hours post procedure
 - tolerance of water/feeds
- Adverse complications:
 - Increasing/severe abdominal pain
 - Increasing abdominal swelling
 - Haematemesis/melaena
 - Persistent vomiting
 - Worsening pain on feeding
 - Febrile symptoms, with rigors

Checking of balloon volumes

- Check with manufacturer instructions on how often balloon volume is to be checked.
 - some are weekly, fortnightly, or as per local policy
- No specific recommendations on who should check volume.

How to check balloon volume

- If able check recommended balloon volume on tube.



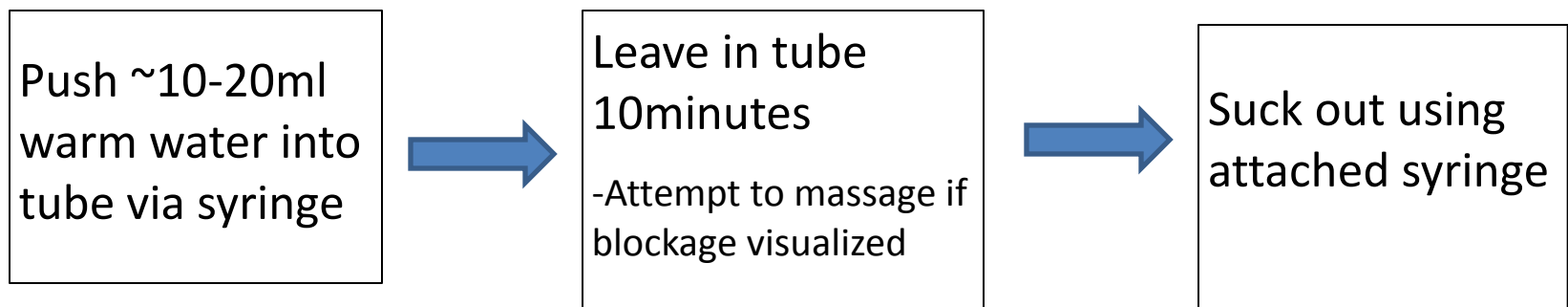
Flushing and Blocked tubes

- Daily water flushing of tube, regardless of use is recommended to maintain patency.

Before and After Medications	During Continuous Feeding	Before and after feeding
Minimum 15ml	Minimum 30ml every 4 hours	Minimum 30ml

How to unblock a tube

- Push-pull method
- No evidence of efficacy of other substances (juice, coke, fizzy drinks)
- Limited evidence for use of Pancreatic Enzyme supplements or unclogging agents eg. Clogzapper.



Commonly asked questions

- **Swimming:** after the stoma tract is mature, ~30days post insertion.
- **Hydrotherapy:** when the tract is mature, no presence of active infection.
- **Sex:** when no longer experiencing pain.
- **Abdominal exercises:** as tolerated, generally after 4-7 days.

References

- National Institute of Health and Clinical Excellence. Nutrition support in adults: oral nutrition support, enteral tube feeding and parenteral nutrition. 2006.
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