



Tube Feeding

This information about tube feedings is for patients and families. We hope you find it helpful when a tube feeding is being considered. The health care team will be pleased to answer questions at any time. No question is too simple to ask.

What is tube feeding?

Tube feeding is a common way of giving food and water when a person is unable to eat or drink enough on his or her own. Liquid food and water are put into a plastic bag and sent through a tube into the stomach or small intestine.

When does a person need tube feeding?

Tube feeding may be needed when a person:

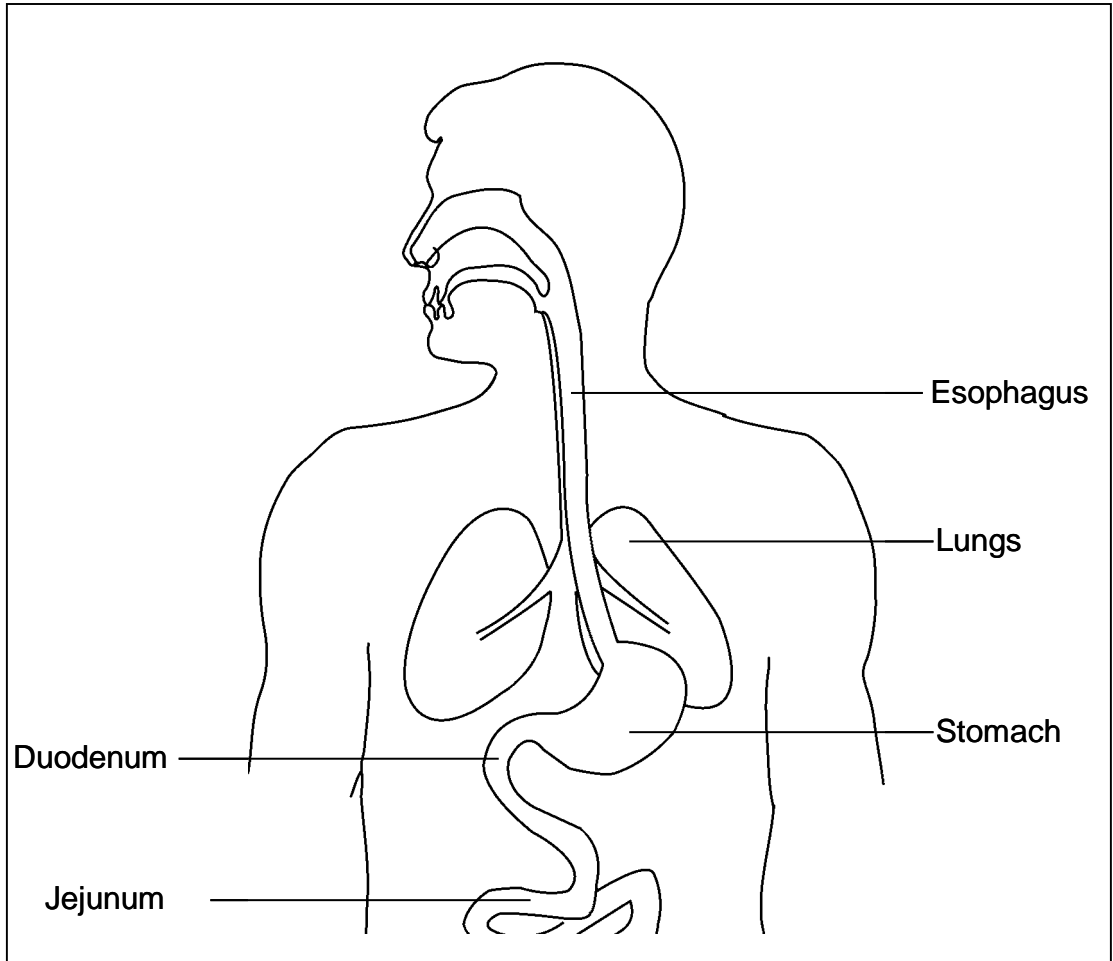
- cannot swallow safely
 - is on a breathing machine and cannot eat or drink
 - is not able to eat enough to maintain weight
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What are the different types of tube feeding?

This chart shows you the different types of tube feeding, how and when they are used.

Type of tube feeding	How the tube enters the body and where the nutrition is delivered	When it is used?
Nasogastric (NG)	<ul style="list-style-type: none"> the tube goes into the nose and feeds into the stomach 	<ul style="list-style-type: none"> When the stomach is working properly Given as a short-term feeding, usually less than 6 weeks
Nasoduodenal (ND) or Nasojejunal (NJ)	<ul style="list-style-type: none"> the tube goes into the nose through the stomach, and feeds into the duodenum or jejunum 	<ul style="list-style-type: none"> When the patient is at high risk for: <ul style="list-style-type: none"> aspiration – food going into the lungs reflux – movement of stomach or intestinal contents into the esophagus When there is delayed stomach emptying or the stomach is not working properly Given as a short term feeding, usually less than 6 weeks
Gastrostomy or PEG* *PEG is short form for Percutaneous Endoscopic Gastrostomy	<ul style="list-style-type: none"> the tube goes through the skin on your abdomen directly into the stomach. 	<ul style="list-style-type: none"> When the stomach is working properly When tubes through the nose are not possible such as a blockage in the esophagus Given as a long-term feeding, usually more than 6 weeks
Jejunostomy	<ul style="list-style-type: none"> the tube goes through the skin on your abdomen directly into the jejunum 	<ul style="list-style-type: none"> When the patient is at high risk for: <ul style="list-style-type: none"> aspiration – food going into the lungs reflux – movement of stomach or intestinal contents into the esophagus When there is delayed stomach emptying or the stomach is not working properly Given as a long term feeding, usually more than 6 weeks

Your health care provider will use this picture to show you where the tube will be placed.



Are there any risks of tube feeding?

Although not common, some people **may** develop problems that include:

- loose bowel movements or constipation
- nausea, cramping, vomiting, bloating
- fluids backing into the lungs or airways which could cause choking or pneumonia - this is called aspiration
- skin irritation or infection around the feeding tube
- clogging of the tube

Your health care team will watch for these problems and treat them if they happen.

Does it hurt to have a tube put in?

Having a tube placed through your nose or skin on your abdomen may be uncomfortable but the discomfort is only temporary. Your doctor will talk to you about the type of tube you will have and how it will be put in.

How long can a person be tube fed?

A person can be tube fed for days, months or even years, depending on the person's needs.

There are several ways to provide tube feeding. The dietitian will help to determine how many hours per day a person needs to be tube fed, as well as the schedule for feeding.

Tube feeding is usually started in the hospital. However many patients can go home with a tube feed if it is still needed.

Feeding tubes can be removed when they are no longer needed. Gastrostomy or PEG and jejunostomy sites usually close and heal very quickly.