

Tu-be or Not Tu-be?



Mobile Dysphagia Consultants

A Guide for Preliminary Considerations When Discussing Feeding Tubes

- ✓ Which feeding tube is best for the patient?
- ✓ Will treatment improve the patient's condition or comfort?
- ✓ Would a tube likely be a long- or a short-term option in the patient's care?
- ✓ What are the physical risks and discomforts?
- ✓ What are the emotional risks and discomforts?
- ✓ Does the treatment match what the patient wants/would have wanted?
- ✓ Are we doing all we can to give the patient the best quality of life?
- ✓ What will insurance cover?



Advantages of a Feeding Tube

- It eliminates the hazards of swallowing food and drinks, if oral intake is difficult, unsafe, or impossible.
- It serves as an effective and efficient way to maintain a healthy calorie intake.
- It can assist with maintaining nutrition, hydration, and weight.
- Patient can receive medications through feeding tube.
- A feeding tube does not limit a patient's activity or mobility.
- A feeding tube may prolong the life of an otherwise healthy person.
- Patients can often self-manage their feeding tubes with training.
- May be a temporary or permanent means of sustaining nutrition.

Disadvantages of a Feeding Tube

- Tube feeding is not a natural way to receive nutrition.
- Side-effects may include diarrhea, constipation, cramping/bloating, nausea/vomiting, and high blood sugar
- It could become uncomfortable, clogged, or dislodged. Breakdown of the skin surrounding the feeding tube may become irritated or infected.
- It does not eliminate the risk of aspiration or pneumonia.
- Feeding tubes do not prolong life of patients with dementia.

Tube Feeding Vocabulary

- G-Tube (Gastrostomy Tube): Feeding tube that is inserted through the abdomen and wall of the stomach for long term tube feeding.
- J-Tube (Jejunostomy Tube): Feeding tube that is inserted through the abdomen and wall of the intestine for long term tube feeding.
- NG-Tube (Nasogastric Tube): Feeding tube that is inserted through the nose and fed down to the stomach for short term tube feeding (3-4 weeks).
- Oral Feeding: Method of receiving nutrition and hydration orally (by mouth).
- NPO (non per os) Feeding: Method of receiving nutrition and hydration non-orally (not by mouth).

Placement Process

The procedure for placing a G- or J-tube is routine and fairly short (5-20 minutes). Some people report feeling the instruments moving in their abdomen, but this causes little to no discomfort. Following surgery, it takes about 5-7 days for the insertion site to heal. NG tubes are placed through the patient's nose, throat, and esophagus into the stomach. Following the placement, the patient can be trained to clean and care for the feeding tube and insertion site, monitor for infection, and continue with their daily activities while having a feeding tube.

Considering a Feeding Tube?

Whether or not to place a feeding tube is an important decision that should be carefully considered by patients and their caregivers. Feeding tubes are placed to supplement nutrition and hydration, and are used for a variety of patients, including patients with feeding difficulties due to recent operations, dementia, head and neck cancer, and more.

It is important for a patient to discuss the potential placement of a feeding tube with his/her support system (family, medical staff, etc.) so that his/her wishes can be respected and carried out. It might be time to begin these discussions if the patient is experiencing difficulties with eating and drinking, such as coughing, choking, or loss of appetite.

When making the decision whether or not to place a feeding tube, it is important to reflect on the patient's wishes and beliefs, taking into consideration patient's best interest and current evidence.

Background Information

- It is possible to continue to eat and drink while using a feeding tube.
- There are different types of feeding tubes.
- There are other options worth considering during this process (assisted-feeding programs, one-on-one feedings, comfort feeding).
- It is important to talk with the patient's doctor and medical team about diet regulation, risks, and benefits of using a feeding tube.

General Considerations

- Do you want a feeding tube? Adele Pattinson.
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- Tube Feeding in Patients with Advanced Dementia. Finucane, Christmas, and Travis.
<http://careinaging.duke.edu/longtermcare/dynamic/resources/1032/finucane.pdf>
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