

# Enteral feeding tubes troubleshooting & practical workshop

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## Conflicts of Interests Declaration

• NIL

# Session Aims



Tube types and fixes

Buried Bumper

Overgranulation

Leaking stoma sites

Infected vs Excoriated













## Gastrostomy

- Freka PEG
- Corflo PEG
- Balloon Retained
- monarch

## Jejunostomy

- Surgical Mic JEJ
- Monarch
- Balloon Retained









Age of tract

Tube rotates
(Not PEG-J or
surgical MIC-JEJ)

Advances

Tube length

Fixator is secure

Confirm placement with initial pH





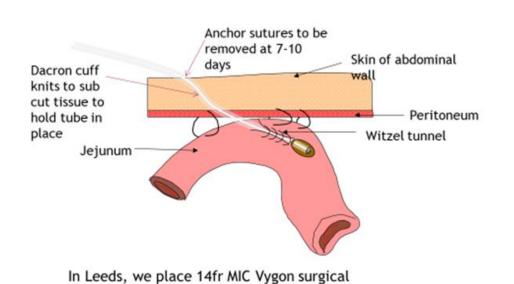


**Buried Bumper** 

# Surgical Mic JEJ

jejunostomy tubes











Overgranulation









Fixator incorrectly positioned -Ensure correct position of external fixator

Poor fitting tube

Poor care of the site

Anchor tube to abdomen to prevent dragging

## Treatment







Hydrocortisone 1% - BD, 10-14 day



Fluroxycortide (Haelan) BD 10-14 days



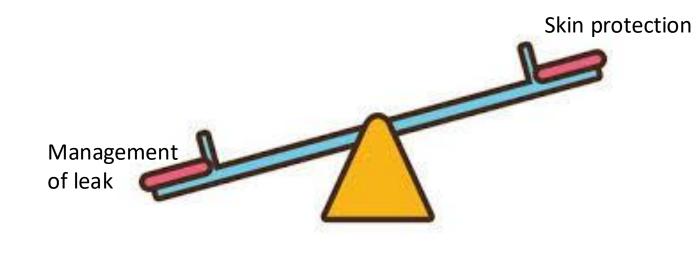
Mometasone (Elocon) cream/ointment, OD up to two weeks













Swab for cultures

# Leaking



## **Causes**

- Stretching of site
- Balloon deflation
- Tube migration
- Constipation
- Increased chest secretions
- Menstruation

#### **Treatment**

- Protect the skin
- Anchor the tube
- Consider PPI
- Consider pro-kinetics
- Ensure fixator is in place
- Balloon is inflated
- Absorbent dressings
- Stoma paste around the stoma
- Stoma rings
- Consider is this the right device

Swab & Apply anti-microbial dressing OD for 7 days

Ensure accurate tube cares are happening

# Suspected Infection



Consider tube change

PX Anti biotics after swab result unless systemic infection

Most common organism is staphylococcus aureus, suggest 5 day course of flucloxacillin (doxycycline if penicillin allergic or clarithromycin if over 65 years old and penicillin allergic.. If known to be MRSA positive use doxycycline

Test any exudate / leakage with pH paper to identify possible cause of leakage — pH 1-5 indicates gastric acid,

pH 7-8 leakage is more likely to be serous fluid / pus or peritoneal fluid. Indicating infected gastrostomy site or misplaced tube. Suspected yeast infection - send a swab Apply topical Nystatin, or Miconazole cream - apply twice daily. Review after 10-14 days.

Steroid and antifungal cream / ointment is useful when infection and inflammation co-exist.







