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Tube Feeding at Home



Good nutrition is an important part of your cancer care. However, sometimes due to the type of cancer you have or the treatment you are receiving, it may be difficult to eat enough by mouth to meet your nutritional needs. You may need to receive nutrition—calories, protein, carbohydrates, vitamins, and minerals—through a feeding tube.

In addition to a feeding tube, some patients can continue to eat some food or liquids by mouth (orally). And regardless of whether the feeding tube provides all, or only some of your nutrition, it can be vital to helping you complete treatment, avoid further weight loss and complications, and have a good recovery after treatment.

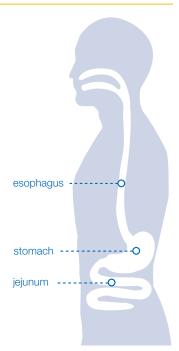
What is Tube Feeding?

For some people with cancer, eating, drinking, and swallowing may become difficult or impossible. If a person cannot eat enough—or at all—he or she will need to get nutrition through a feeding tube.

During tube feeding, formula goes directly into the stomach or into the small intestine. Most feeding tubes are placed by a Gastroenterologist or by an Interventional Radiology team. Feeding tubes typically are placed as an outpatient procedure.

There are two main types of feeding tubes. The first type is called a G-tube, which stands for gastrostomy tube. G-tubes feed directly into the stomach through a hole in the abdominal wall called a stoma. One common type of G-tube placed non-surgically is a PEG tube. NG tubes are another type of tube, and go through the nose, down through the throat and into the stomach. Most people do not experience pain, or even much discomfort during the placement of either of these types of feeding tubes.

The second type of feeding tube is called a J-tube, which stands for jejunostomy tube. J-tubes bypass the stomach, and feed directly into the jejunum, which is the first section of the small intestine. J-tubes typically go directly into the jejunum through a stoma, or through a gastrostomy (stomach) tube, which then feeds into the jejunum.





What Types of Tube Feeding Formulas Are Available?

A well-balanced diet is needed to maintain optimal health. With tube feeding, you can get the nutrition you need from a special medical nutritional product delivered through the tube. This is called a tube-feeding formula. It contains all of the nutrients you need in liquid form—just like a well-balanced diet.

A wide variety of formulas are available. Some are specially designed for particular diet needs, such as to meet the needs of people with lung disease or kidney disease. Your health care team, including a registered dietitian nutritionist (RDN), will select the formula and the calories to best meet your nutritional needs.

Formulas come in two types:

- Powder, which you mix with water to make a liquid feeding.
- Ready-to-use, which is the most commonly used formula. It is already a liquid and often comes in 8-ounce cans, or pre-filled, ready-to-hang containers.

How and Where Do I Provide My Tube Feedings?

Some people like to provide their tube feeding in the company of their family or other care providers. Other people prefer to provide their tube feeding alone. Talk with your family and friends to decide what works best for you.

Be sure to find a place in your home that is comfortable for you, such as the living room, kitchen, or bedroom. Several positions are safe and comfortable for tube feeding:

- sitting up in a chair
- propped up in bed or on a couch in a half-sitting position
- standing or even walking around

If you are lying down, your upper body and head should be raised at least 30° (from the bed) during tube feeding. Work with your health care team to learn the proper methods of giving your tube feeding. Be sure to include your family if they plan to help.

How Can I Clean My Feeding Tube?

It is important maintain good care of your feeding tube each day. Not taking care of your feeding tube may lead to infection and interruptions in feeding.

Steps to take for proper cleaning:

- Wash your hands.
- Gather the materials you need to clean the tube site: mild soap, a clean cloth, cotton-tipped swabs and warm water.
- Clean skin with a clean cloth and soap and water. Start at the tube and work outward in circles.







- Clean under the skin disk or external hub (if there is one) with a cotton swab and mild soap and water.
- Rinse with warm water and allow to dry completely.

If your doctor or nurse has instructed you to use a dressing, apply as directed. Change your dressing every day, and change it immediately if it becomes wet or soiled.

In some cases, when a feeding tube is placed, pledget stays or sutures also are inserted through the skin around the stoma. Ask your health care team when these can be removed.

Practice Good Oral Hygiene

- You might not be able to eat or drink, but good mouth care is still important. Baking soda and salt rinses may be recommended, or a non-alcoholic mouth rinse.
- Brush your teeth, gums, and tongue with a toothbrush and a small amount of toothpaste at least twice a day. Floss if instructed to do so.
- If your mouth or lips are dry, ask your healthcare provider to recommend a lip balm or moisturizer.

What if My Feeding Tube is Clogged?



To minimize the chances of a clogged feeding tube, never put anything other than formula and water into the tube. If you need to take medications through your tube, ask your pharmacist if there are liquid formulations for each medication.

If liquid formulations are not available, ask your nurse if you can crush and dissolve tablets or capsules into water for administration through your feeding tube. *Never place crushed, and dissolved medication into your tube without first discussing it with your medical team.* Some medications are time-released, and crushing the tablets can alter how they are absorbed and used by the body.

If your feeding tube becomes clogged:

- Never insert anything into the tube to clear it.
- Use warm water and a syringe to flush the tube. Move the plunger on the syringe in and out a few times to clear the clog.
- Do not use soda or cola to clear a clogged feeding tube.
- If warm water does not clear the clog, ask your nurse or dietitian about products designed to clear feeding tubes.



What if My Feeding Tube Comes Out Partially or Completely?

First, familiarize yourself with the proper placement for g-tubes. If your G-tube is kept in place with a skin disk, make sure it is not too tight against the skin. Check its position using the markings on the tube.

Make sure the tube turns all the way around freely, and moves up and down slightly. The tube should have in-and-out "play" of about 1/4 inch.

If the feeding tube is partially out of place:

- Do not use the tube Check to see how much the tube has shifted by comparing its markings to your records.
- Tape the tube to your skin to prevent further movement.
- Call your doctor or nurse as soon as possible.

If the feeding tube is completely out of place:

- Go to your hospital emergency room.
- Take the feeding tube with you.

Call Your Doctor or Nurse if:

- Your feeding tube is out of place, either completely or partially
- You have unusual weakness
- You see blood in or around the feeding tube
- Formula or stomach contents are leaking around the tube site
- The tube site is red, sore or swollen
- You have a tube clog that you can't flush out with warm water
- You see thick, or bad-smelling pus or drainage from the stoma



Work with your health care team, and especially with a registered dietitian nutritionist, to determine which tube feeding formula is right for you. Contact a Certified Specialist in Oncology Nutrition (CSO) or Oncology dietitian for more information. www.oncologynutrition.org

www.abbottnutrition.com

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