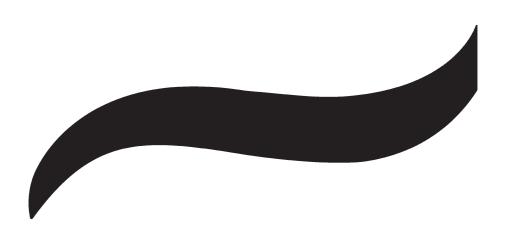




# Button Gastrostomy Guide

Information for patients



### **GASTROSTOMY FEEDING**

You are currently unable to take enough food and fluid by mouth to meet your nutritional needs or you may be unable to take any food or fluids by mouth at all. The gastrostomy feeding tube will help you to meet your nutritional needs by feeding you directly into your stomach.

Gastrostomy tubes are used for longer term feeding; lasting more than four to six weeks.

## **BUTTON GASTROSTOMY TUBE**

- Button gastrostomy tubes can be used to replace the initial gastrostomy tubes.
- ❖ A water filled balloon holds the tube in place in your stomach.
- ❖ The amount of water in the balloon should be checked weekly. Your district nurse will do this for you or if you prefer you or your carer may be trained to do this.
- ❖ The balloon valve will have the amount of water required written on it.
- Use cooled boiled water to fill the balloon.
- ❖ Whenever the balloon is checked or your tube is replaced it is important to check the tube is still in your stomach. This can be done by drawing out a small amount of stomach contents and testing this with pH paper. Your district nurse may do this or train you or your carer how to do this.

# A pH of 5.5 or below indicates the tube is in your stomach.

- These gastrostomy tubes require an extension set for administration of feed and medication. A new extension set should be used every two weeks.
- These gastrostomy tubes can last between three to six months

# Stop feeding and contact your Healthcare professional immediately if:

- \* There is pain on feeding
- \* External leakage of gastric contents
- \* Fresh bleeding

# **CARE OF GASTROSTOMY TUBE AND STOMA**

Effective care of your tube and stoma are vital for your well-being. The aim is to prevent your tube blocking, maintain a healthy stoma site and to prevent infection and breakdown of the surrounding skin.

# Wash your hands thoroughly before and after handling the feeding system.

- Clean your stoma with mild soap and water, rinse and dry thoroughly.
- Rotating the gastrostomy tube 360 degrees (a full turn) daily helps prevent the build up of scar tissue.
- Flush the tube regularly with cooled boiled water before and after the administration of feed to help prevent your tube blocking.
- ❖ If you give medication down your tube it must preferably be in a liquid or dispersible form, please discuss this with your pharmacist. Always remember to flush your tube before and after medication with 30 60 mls of cooled boiled water.
- If several medications are going down the tube, flush with 5-10mls of cooled boiled water between each one.
- ❖ You should have been given a spare feeding tube, please take it with you if you have to attend hospital for a replacement. If you do not have a spare tube please let your health professional know.

If your tube becomes blocked see troubleshooting guide.

# **TROUBLE SHOOTING GUIDE**

Problem	Possible Cause	Solution
Pain, vomiting and abdominal tenderness particularly during feeding.	Dislodged tube	<ul> <li>Stop feeding immediately</li> <li>Nil by mouth</li> <li>Secure tube to abdominal wall and contact your health professional.</li> </ul>
Tube will not flush	<ul> <li>Clamp on extension set still on</li> <li>Incorrect sitting/</li> <li>Tube blocked</li> </ul>	<ul> <li>Check clamp is open</li> <li>Change sitting/ lying position</li> <li>Try flushing tube with 60mls of warm water. If this doesn't work, try flushing with soda water. Avoid using cola drinks and fruit juices. You can try this several times.</li> <li>Using a push/pause type of motion with the syringe you may be able to displace any debris.</li> <li>If all of the above are unsuccessful contact your feeding company nurse or health professional.</li> </ul>

Problem	Possible Cause	Solution
Gastrostomy tube is loose.	Tube may be too long	Ask your Abbott Nurse to remeasure your stoma
Gastrostomy tube falls out.	Accidental removal	Stoma site will heal/ close within 2-4 hours. The stoma site must be kept open if possible.     If you have a spare tube or an Enplug this can be inserted into the stoma
	Balloon failure	to prevent the stoma closing. Do not use the tube for feeding. Please contact your feeding company nurse of district nurse to confirm the tube is in the correct place before use.  • Arrange for tube to be replaced as soon as possible. Contact your
Gastro-intestinal (GI)	Feeding regime	health professional     Ask dietitian to review
problems such as, nausea	not tolerated.	feeding regime.
and vomiting Diarrhoea.	Symptoms of underlying condition.	Consult GP.
		Reduce rate of feeding
Constipation.	Medication.	Ask GP to review medication.
	Feed not tolerated.	Ask dietitian to review fluid regime.

Problem	Possible Cause	Solution
	Not having enough dietary fibre.	Ask dietitian to review feed.
	<ul><li>Not having enough fluid</li><li>Medication</li></ul>	<ul><li>Ask dietitian to review fluid regime</li><li>Ask GP to review medication.</li></ul>
Gastric Reflux	• Incorrect sitting/ lying position.	• Change sitting/lying position, ensure a semi-upright position of at least 30 - 45 degrees.
	Feeding regime not tolerated.	Ask dietitian to review feeding regime.
Redness/oozing/bleeding around the stoma site.	Irritation due to leakage.	• Ensure tube is not too long
	Friction caused by clothing or fixation device	Ensure the tube is not to tight
	• Infection.	If there is any sign of irritation or infection contact District Nurse or GP for advice.
Coated (white)/ lumpy tube	Fungal infection, for example, Candida.	If there is any sign of infection contact District Nurse or GP for advice.

### INSTRUCTIONS ON USING YOUR SYRINGE

- The syringes you have been given can be reused for up to seven days.
- Clean your syringe straight after use
- Fill a bowl with hot soapy water
- Clean the end of the syringe by drawing the water in and out through the syringe until all traces of food or medicine are removed from the tip.
- Separate the two parts of the syringe and wash them.
- Then rinse them in water under the cold tap.
- Shake off the excess water and dry with a clean paper towel. Tapping the end of the syringe on a clean paper towel will dislodge any water that maybe still in the tip of the syringe.
- Store the syringe, still separated in a clean dry container.
- ❖ Put the syringe back together when you need to use it.
- You will usually be given one syringe for medicine and one for flushing cooled boiled water through your tube
- ❖ If while you are using your syringe it becomes stiff or difficult to use, or if you can see any damage to the syringe or the markings become unclear you should throw it away and start to use a new one.
- For extension set use and reuse please see guidance below:

Cleaning	The extension set should be cleaned immediately after disconnection from low profile feeding device
	The extension set should be washed inside and out with hand hot soapy water
	The extension set should be rinsed thoroughly and allowed to air dry
	Store in a clean dry container with a lid
Replacement	MIC KEY extension sets are single patient use only
	The extension set should be changed every two weeks
	If there is any deterioration in the set prior to the change date replace with a new extension set

# **TUBE INFORMATION**

Type Tube:	
Size Tube:	
Date of Insertion:	
Order code:	
Feed plan:	
Additional wate	r flushes
Before and after	feed:
Before and after	medication:
Dietetian:	
Telephone Number	······································
Enteral Feeding	
Company Number:	

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