

Good nutrition can maintain health and promote growth & development.

What is a gastrostomy?

A gastrostomy is a surgically created opening in the stomach through the abdominal wall. "Gastro" means stomach and "ostomy" means opening. Many children with different medical problems receive treatment with the placement of a gastrostomy tube. Infants and children may need it for several reasons.

- The child may not be able to eat at all or eat enough to meet their nutritional needs.
- They may not be able to swallow safely, without aspirating or breathing food into their lungs.

Gastrostomy surgery is usually done under general anesthetic which means your child will be asleep during the surgery.

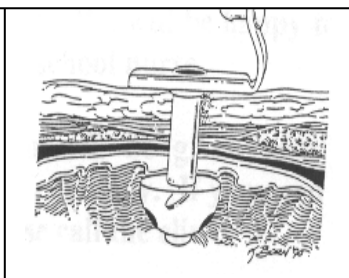
What is a G-tube?

A gastrostomy tube, or G-tube, is either a tube or button device (skin level) that is surgically placed for feeding or venting of stomach gas. There are 2 main types of G-tubes that are commonly used for this purpose:

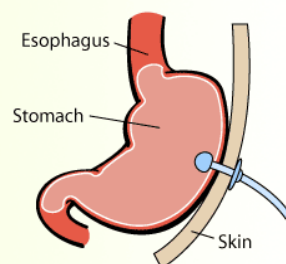
- A G-tube that is placed in the stomach and has a tube that remains on the outside.
- A skin-level G-tube button has a cap that opens and closes and a tube that is attached just for feedings. This type of tube may not be placed right away but may be an option for your child later.

Talk to your doctor to find out which kind of tube is best for your child.

**BARD GASTROSTOMY
BUTTON**



**Mik-key
Low Profile G-tube**



**Gastrostomy Tube
Placement**

Home Care of a Gastrostomy

As your child's caregiver, you will need to learn to care for the gastrostomy. Your medical care team will teach you what you need to know to feel safe and comfortable taking care of the gastrostomy at home.

1. Cleaning and Caring for the Gastrostomy Site

- Wash your hands with soap and water before touching the area.
- Use warm water and soap to gently clean around the gastrostomy site daily or as needed to keep the site clean.
- Rotate the tube or button daily after cleaning
- After cleaning, rinse around the area with plain water and pat dry.
- You may use an antibiotic ointment around the site if the area looks red or sore.

2. Securing the G-tube

The end of the G-tube needs to remain snug against the inside wall of the stomach. The G-tube should measure approximately 12.5 to 13 inches in length from the exit site on the stomach to the end of the tube. It is important that you know the length of your child's tube. When your child's G-tube is snug against the stomach wall and correctly in place, use permanent ink to mark the tube at the spot the tube comes out of the stomach. Now you easily check if the tube is correctly in place by looking for the mark.

There are several ways to secure the G-tube to the skin on the stomach. A good way is to place a cotton roll (like the dentist uses in your mouth) on either side of the G-tube and tape the tube to the skin. Talk to your doctor about any other specific instructions for taping down the G-tube.

Check daily to make sure that the end of the G-tube is in place by gently pulling on the tube until you feel resistance.

3. Bathing

Because every child's needs are different, your doctor will determine what is the best time to begin tub baths for your child. When your child is able to take a bath, remember:

- Clamp the G-tube or close the valve on the gastrostomy button prior to placing your child in the water.
- Avoid overly warm water that can irritate tender skin.
- Use only mild soaps and soft washcloths.
- Your child may begin taking a tub bath on _____.

4. Activity

Infants and children with a gastrostomy can participate in all normal activities such as crawling, walking, jumping, and swimming. Make certain the G-tube is carefully secured under clothing. A cloth or bandnet (a netlike material) cummerbund (or girdle) or bandnet vest can help to secure the G-tube.

A G-tube should not keep your child from lying on his stomach. If your child complains that it hurts, you can put a foam doughnut around the G-tube site to keep pressure off the stomach.

5. Clothing

Your child can wear most anything, although one-piece outfits are best. Overalls, "onesies," or sleepers are ideal for active children and help protect the gastrostomy site.

6. Going to School

If your child is able to go to school, tell your child's teacher and school nurse about your child's gastrostomy. You will want to tell them what to do and who to call in an emergency.

7. Traveling

A gastrostomy need not limit your child's opportunity to travel. A travel kit of emergency supplies should always go with your child.

The travel kit should include:

- Foley catheter
- 6-cc syringe (cc = milliliter)
- K-Y jelly
- paper towels
- container for tap water
- C-clamp or rubber band
- tape measure
- emergency phone numbers.

Possible Problems with a Gastrostomy

- **Leaking Around the Gastrostomy Site**

To prevent leakage of stomach contents, gently pull on the G-tube so that the tube is snug against the inside stomach wall. Leaking from a button may be caused valve problems or a broken balloon used for holding the tube in place. Call your doctor if leaking continues.

- **Blocked Gastrostomy**

Blockage can be caused by a buildup of food or medicine in the tube or by body fluids crusted around the opening. Flush the tube with 10 ml of warm water to clear the tube of any blockage. If the tube still seems blocked, call your doctor's office.

- **Drainage Around the Gastrostomy**

Some drainage around the gastrostomy is normal, especially soon after the gastrostomy is put in. Clean the skin around it frequently. Make sure you remove all crusted areas from the tube itself. This should help lessen the buildup of drainage.

- **Granulation Tissue Around the Gastrostomy**

A small amount of red, moist tissue may develop around the gastrostomy. This is called granulation tissue. Do not be alarmed. If there is a lot of tissue, the area becomes sore, or the tissue interferes with care, call your doctor's office.

- **Vomiting or Diarrhea**

Vomiting and diarrhea may be caused by the tube moving forward into the stomach and blocking the stomach. Measure the length of the G-tube daily from the exit site on the stomach to the end of the tube. Most G-tubes are 12.5 to 13.0 inches in length. If the tube is shorter than this, gently pull on the G-tube to make sure that the tube is snug against the inside of the stomach wall. If you are not able to gently pull the G-tube and secure it into position, call your doctor's office.

- **Bloating and Retching**

Excessive gas and overfeeding can cause bloating of the stomach and retching. Unclamping the G-tube or opening the button by inserting a decompression or feeding tube will allow air to escape and gradually relieve the problem.

- **G-Tube Breaking**

Most tubes will last for 3 to 6 months. Eventually the rubber tube will break down and become harder to use. Many times, the end used to feed with will break off or split. These are signs that the tube needs to be replaced.

Emergency Trips to the Hospital

If your child needs to go to the hospital or the emergency room, take your emergency kit and any helpful information you have about your child's gastrostomy with you. You should always bring your feeding supplies with you so that you don't get charged for extra supplies. If the gastrostomy tube or button has accidentally been pulled out, bring it with you.

Date Inserted: _____

Size of Tube: _____

Type of Tube: _____

If you have any questions or concerns about this information or your baby's medical condition, please contact your physician.