

Tube feeding

Why is tube feeding needed for some patients?

Nutrition is important for good health and normal growth. Cancer and other diseases can keep children from eating the good foods that they need. Medicines and other treatments often cause foods to taste bad. These treatments can also make a child feel "sick to his or her stomach" or "just not hungry." Sometimes your child may have problems swallowing safely, or his or her throat may be irritated by radiation treatments. Even after you and the medical staff have made every effort to help your child eat, he or she may not be able to eat enough to stay healthy. In these cases, tube feeding can be a lifesaving way to keep your child growing. Tube feeding is a safe way to give nutrients (the parts of foods that are good for the body) to your child. Tube feeding can help your child avoid weight loss. It can also help keep his or her body strong for fighting cancer or infection.

What is tube feeding?

In tube feeding, a formula passes through a small tube that connects directly to part of your child's digestive system (the body system that processes food). The formula is a liquid that contains the nutrients that your child needs. Your child's doctor, nurse or dietitian will help figure out which type of tube feeding is best for your child. This staff member will also decide how long your child will need tube feeding. While most children need tube feeding for only a few days, others need it the entire time they are having treatments, sometimes longer. Unless a doctor, nurse or dietitian tells you otherwise, your child may take part in meals and eat some regular foods. Sometimes, your child may receive medicines through the feeding tube.

Where will the tube be placed?

Where the tube is placed inside your child's digestive system will depend on several factors:

- How long the tube feeding will be needed;
- How well different parts of your child's digestive system are working;
- The risk of side effects from tube feeding.

The methods for placing the tube are simple and fairly painless. Your child's doctor will use one of these five ways to connect the tube to either the stomach or the small intestine:

- A nasogastric tube (NG tube) passes through the nose, down the throat and to the stomach.
- A nasojejunal tube (NJ tube) passes through the nose, down the throat, through the stomach and to the small intestine.
- A gastrostomy tube (G tube) passes through a small cut in the skin directly into the stomach.
- A gastroenteric or transgastric jejunal tube (GJ tube) passes through a cut in the skin directly into the stomach and extends into the small intestine.

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Once the tube is in place, your child will need a day or two to adjust to it. After that, your child may hardly notice it. Formula feedings may begin as soon as the tube is in place.

What kinds of formula are used?

Your child's condition and age will determine the type of formula used. The correct doses of formula at the proper times can provide all the nutrients your child needs for growth and healing. The staff may change the amount or type of formula if your child's condition changes.

What are the types of feeding?

Two types of tube feedings are used: bolus feedings and continuous feedings. Bolus feedings give large formula doses several times a day. This type of feeding is similar to the way people eat at mealtimes. The dose of formula can be pushed through the tube by a pump, or it can be poured into the tube by a syringe. Continuous feedings use a pump to steadily drip small amounts of formula through the tube over a long period of time (12 to 24 hours). The staff may change the feeding method if your child's condition changes. They might also change it to meet your child's needs and lifestyle.

What are the possible side effects?

Some side effects may occur with tube feeding, but most can be prevented by choosing the correct formula and by giving it properly. If you are giving the tube feeding, follow the directions closely. Tell your child's doctor, nurse or dietitian about any problems your child may have. The most common side effects are loose bowel movements, bloating, nausea and vomiting. More serious side effects may include:

- Movement of the tube from its proper position;
- Getting formula into the lungs; and
- Infection or irritation of places where the tube is located.

The staff will check your child from time to time to see if there are any problems and to see how your child is handling tube feeding.

If you have questions about tube feeding, please talk to your child's doctor, nurse or dietitian.