

# **Gastrostomy Care**

## What is a gastrostomy?

A gastrostomy is a surgically created opening in the stomach.

A gastrostomy is needed if:

- Your child is not able to eat enough to help him grow. Extra food is then given through the G-tube.
- Your child has had a stomach wrap procedure to keep food from coming back up and now needs to get rid of stomach gas through a gastrostomy opening.
- Gastrostomy surgery is usually done under a general anaesthetic. This means your child will be asleep during the surgery.

## What is a G-tube?

A gastrostomy tube, or G-tube, is placed in the surgical opening to help with feeding or venting of stomach gas. There are two main types of G-tubes:

- A G-tube that remains on the outside of the stomach.
- A skin-level G-tube that is placed in the stomach. It has a cap that opens and closes and a tube that is attached just for feedings. One common brand is called a button. This type of tube cannot 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.

## 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.

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## **Cleaning and Caring for the Gastrostomy Site**

- Wash your hands with soap and water before touching the area.
- Use warm water and soap to clean around the gastrostomy site three times per day or as needed.
- Make sure that you gently scrub off all crusted areas on the skin around the tube. You may need to use a diluted solution of hydrogen peroxide (1/2 peroxide and 1/2 water) with Q-tips to clean around the tube site.
- 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.

#### **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. Then tape the tube down securely.

### **Bathing**

Because every child's needs are different, your surgeon 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 \_\_\_\_\_\_.

#### 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.

## **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.

#### Going to School

If you 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.

#### **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

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- 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. Call your surgeon's office 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 surgeon'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 the there is a lot of tissue, the area becomes sore, or the tissue interferes with care, call your surgeon'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

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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 surgeon'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 and inserting a decompression 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** 

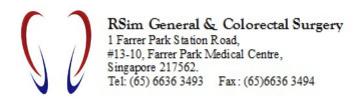
If your child needs to go to the hospital or the emergency room, take your emergency kit and any

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:	 	
Size of Tube:	 	
Type of Tube:		



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