

## **PEG Tubes**

Information for patients, relatives and carers

For more information, please contact:

#### **Department of Nutrition and Dietetics**

Scarborough Tel: 01723 342415 Scarborough Hospital Woodlands Drive, Scarborough, YO12 6QL

> York Tel: 01904 725269 The York Hospital Wigginton Road, York, YO31 8HE

Contents	Page
Introduction	4
Why do I need it?	4
How is the tube put in?	5
What are the risks of having a PEG inserted?	6
What are the alternatives?	7
What happens after my PEG has been inserted?	7
What can I put down the tube?	7
What else do I need to know?	8
Who do I contact in the event of any problems?	9
How is the tube removed if it is no longer needed?	9
Tell us what you think of this leaflet	10
Teaching, training and research	11
Patient Advice and Liaison Service (PALS)	11
Leaflets in alternative languages or formats	12

This leaflet refers to the Freka PEG which is the standard PEG tube used in York and Scarborough Teaching Hospitals NHS Foundation Trust.

#### Introduction

Your doctor has recommended that you have a "PEG". This is a thin plastic tube that enables you to be fed directly into your stomach without taking food through your mouth. PEG stands for:

Percutaneous Endoscopically placed Gastrostomy

## Why do I need it?

When it is not possible or safe for you to take enough food and drink by mouth, the best way to have liquid food and medication is through a PEG tube. You will need to use special liquid feeds. Your Dietitian will choose the appropriate feeds and this is available on prescription. PEG feeding allows us to help you maintain essential hydration and nutrition adequately and safely.

### How is the tube put in?

The procedure takes place in the Endoscopy Unit after careful explanation and having obtained your consent. You will be given an injection of a sedative and some painkiller into your arm to make you sleepy and comfortable during the procedure. You will need to lie on a trolley bed and we will check you are comfortable before starting the procedure.

An endoscope (a long flexible tube with a light at the end) is passed through your mouth and into your stomach. After an injection of local anaesthetic a small hole is made in the skin, in the upper part of your abdomen, for the tube to pass through.

With the help of the endoscope the PEG tube is carefully placed through the wall of your stomach and out onto the skin. On the inside of your stomach a small disc on the end of the tube prevents it from falling out. On the outside is a thin tube about 15cm long through which the feed is given. A second disc holds the tube securely on the skin.

You will be observed for a short time in the Endoscopy Unit and then return to the ward to recover from the procedure.

# What are the risks of having a PEG inserted?

Overall, the risk of complications (major and minor) is about 10% (one in ten patients). Most problems are minor and resolve quickly. Occasionally there may be some leakage of stomach contents inside the body causing infection. Infection can also occur where the tube is passed through the skin. An antibiotic is given to reduce the risk and treat this.

Bleeding can occur where the tube passes through into the stomach but is usually minor. Chest problems may arise as the result of sedation and occasionally damage to other organs such as the bowel have occurred. The risk of any of these complications being life threatening is small (1% or one in 100 patients).

#### What are the alternatives?

Feed and liquid can be given for short periods by a tube passed through the nose into the stomach. However, this is usually much less comfortable in the longer term and also has potential complications, such as infection.

Another alternative is a surgically placed feeding tube which entails a more invasive surgical operation and general anaesthetic.

# What happens after my PEG has been inserted?

While you are still in hospital you and/or your carers or family will be shown how to care for your tube including how to clean around the tube. You will start receiving feeds through the PEG whilst you are still in hospital. The Dietitian will choose the best feed for your individual needs and will show you and/or your carers or family how to manage the feeds at home.

## What can I put down the tube?

- Your feed
- Medicine (in liquid form)
- Water

#### What else do I need to know?

There may be a small leakage of fluid around the tube. This usually clears up quickly, and a small pad may be necessary.

You will be able to take a shower soon after the PEG is inserted. After two or three weeks you can have a bath and even go swimming.

You can go out and you will find the PEG tube does not show under most clothing.

The tube is designed to stay in place a long time. If it is no longer required it can easily be removed (see page 10). It may require changing and this can be arranged through your GP.

Using a PEG may seem very strange at first, but you will soon learn to adapt to the new way of life.

# Who do I contact in the event of any problems?

On discharge from hospital, you will be given a list of contact numbers for any problems that arise.

These will include your dietitian, district nurse and GP. You will also be told how you can contact your feed company. Your dietitian will advise you if you are going to be registered with them.

# How is the tube removed if it is no longer needed?

If the PEG is no longer needed for any liquid feeds, medicines or water, and your doctor and dietitian agree that it is unlikely to be needed again then it can be removed. The recommended way to remove it is by a further endoscopic procedure. The endoscope used when the tube was placed will be re-passed and the retaining disc and tube removed in reverse. The feeding end of the PEG and other external parts will be removed first. Once removed you will have a small dressing in place for a few days but will usually be able to go home on the same day.

## Please scan the QR code below to view this information online:



## Tell us what you think of this leaflet

We hope that you found this leaflet helpful. If you would like to tell us what you think, please contact Admin Team, Nutrition & Dietetic Department, York Hospital, Wigginton Road, York YO31 8HE, telephone 01904 725269, or email yhs-tr.NutritionandDietetics@nhs.net

## Teaching, training and research

Our Trust is committed to teaching, training and research to support the development of health and healthcare in our community. Healthcare students may observe consultations for this purpose. You can opt out if you do not want students to observe. We may also ask you if you would like to be involved in our research.

# Patient Advice and Liaison Service (PALS)

PALS offers impartial advice and assistance to patients, their relatives, friends and carers. We can listen to feedback (positive or negative), answer questions and help resolve any concerns about Trust services.

PALS can be contacted on 01904 726262, or email yhs-tr.patientexperienceteam@nhs.net.

An answer phone is available out of hours.

# Leaflets in alternative languages or formats

Please telephone or email if you require this information in a different language or format, for example Braille, large print or audio.

如果你要求本資 不同的 或 式提供,電或發電

Jeżeli niniejsze informacje potrzebne są w innym języku lub formacie, należy zadzwonić lub wysłać wiadomość e-mail

Bu bilgileri değişik bir lisanda ya da formatta istiyorsanız lütfen telefon ediniz ya da e-posta gönderiniz

Telephone: 01904 725566

Email: yhs-tr.FacilitiesmanagementHelpdesk@nhs.net

Owner Dr G Robins and Mr N Woodcock, Consultants

Date first issued July 2002 Review Date July 2026

Version 7 (issued July 2023)
Approved by Nutritional Steering Group

Document Reference PIL 1 v7

© 2023 York and Scarborough Teaching Hospitals NHS Foundation Trust.

All Rights reserved.