

ESOPHAGEAL FEEDING TUBE CARE & FEEDING

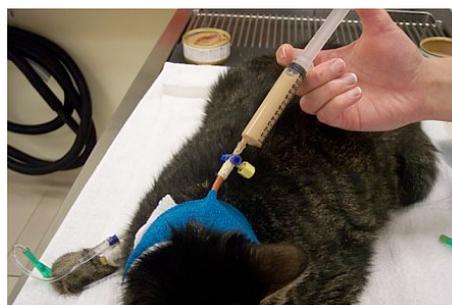


An esophageal feeding tube (E-tube) is a small rubber tube that is surgically placed on the left side of the neck, extending the length of the esophagus and terminating just before entering the stomach. Placement of the tube through this incision allows food to enter the esophagus and then flow down into the stomach. The tube is not placed directly into the stomach.

E-tubes are commonly used in veterinary medicine to help deliver nutrition to patients who either are unable to eat food on their own (jaw fractures or other mouth injuries), or who cannot eat a sufficient amount of food to meet their nutritional demands due to some debilitating disease/ condition (chronic kidney disease, liver disease, pancreatitis, intestinal disease, during chemotherapy treatment, or patients with chronic anorexia). They are generally well tolerated by dogs and cats, and can be left in place for long periods of time (weeks to months) both in hospital and outpatient settings.

Feeding

A special food, listed below, is blended and syringed through the tube two to four times per day. This food is formulated to meet your cat's nutritional needs; it should not cause vomiting or diarrhea. To feed your cat, follow these steps:



1. Prepare the food by combining:

_____ can(s) of _____ + _____ mls of water in a blender and run at the liquefy (fastest) speed until the food is uniformly mixed, and a nice slurry is formed. Some canned food diets which have less water content and are therefore more solid, should be strained through a strainer after blending to ensure no clumps of food are present.

2. Remove the cap from the end of the feeding tube and move the stopcock switch so that the port being used to deliver food is on.

3. Using the syringes provided, first inject 2-3mls of warm water to ensure the tube is clear and flushing well. Then, inject _____ mls of the blended food into your cat's feeding tube _____ times per day FOR A TOTAL OF _____ mls PER 24 HOURS. It is helpful to inject the food slowly, about 1ml per 1-3 seconds, and to elevate your cat's head and or front feet so the food goes easily into the stomach. Your cat should be watched while feeding, because feeding too fast can cause nausea and vomiting. Watch for licking of lips, excessive swallowing, or 'urping' type noises, as these signs may mean your cat is being fed too fast and is becoming nauseous. If these signs are noted, feeding should be slowed down.

4. Once completed with the feeding, inject approximately 5mls of water through the tube so food does not remain in it, and subsequently cause clogging of the tube. Turn the stopcock to the off position and replace the cap on the tube.

5. Any remaining food should be stored in the refrigerator. Before the next feeding, it should be warmed to body temperature under hot tap water or in a warm water bath. Also, always check the temperature prior to feeding to be sure that the food is not too hot.

Daily Esophageal Feeding Tube Care

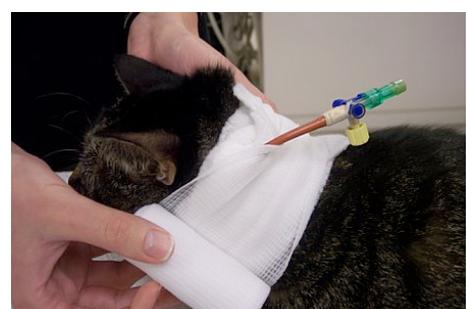
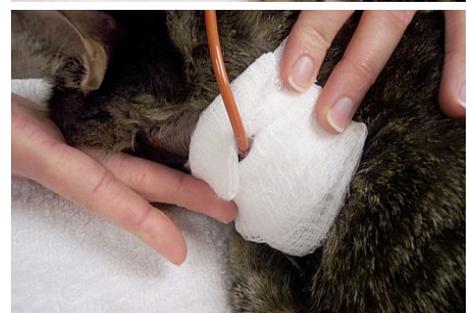
Feeding tubes should be unwrapped, cleaned, and then re-wrapped once daily initially. Once the insertion site of the feeding tube has healed (usually about 7-10 days after placement), the tube can be cared for every 48 hours. Feeding tubes should be cared for AT LEAST every 48 hours to prevent complications or infection at the insertion site.

1. In a quiet and confined place, carefully unwrap the bandage that is protecting the feeding tube. Never pull hard on the end of the tube as this can cause permanent removal of the tube.

2. Using a diluted Chlorhexiderm solution provided by your veterinarian, carefully clean around the tube at its insertion site into the skin removing excess debris, discharge, or crusted material. Note the color and character of the discharge if any is present. A very small amount of pale white to light yellow/brown discharge may be noted initially around the insertion site while the skin is healing. Excessive discharge or brown to green discharge would be abnormal and would need to be evaluated by your veterinarian.

3. Once the insertion site is cleaned, cut a slit in a sterile gauze pad and wrap around the tube at its base. Place a couple gauze pads adjacent to the tube to keep it protected and in place.

4. Using the bandage material provided by your veterinarian, carefully start to wrap the soft padded bandage wrap around the neck of the patient, making sure to not wrap the bandage too tightly. Next wrap the thinner cling gauze in similar fashion over the soft padded wrap, again making sure that the wrap is not too tight. Lastly, place the colored vet-wrap over the top of the bandage to help keep everything secure and protected from accidentally spilled food or water.



Things you can expect to see

Granulation tissue (pink granular appearing ‘new’ tissue) commonly forms around the tube site on the outside and may be quite pink and can even bleed slightly when handled. This is a normal tissue healing process, and should be expected. It is this tissue which will help to close the hole once the tube is removed. Excessive bleeding or a change in color of the tissue to dark red, purple or brown should be evaluated by your veterinarian.

We have found in cats with dark hair coats (including tabbies) that the hair will grow in a dark ring around the tube site and thicker than the surrounding hair regrowth. This is a normal occurrence and should also be expected with dark haired cats.

Oral feeding

Some patients require several weeks of tube feeding before their appetite will return or healing occurs. Fresh food and water should be available at all times, so to encourage self-feeding. Chewing and swallowing are not hindered by the feeding tube, although it is common to hear more ‘swallowing’ type noises with the tube in place. Tube feedings are continued even after the patient begins self-feeding, however the amount fed via the e-tube is reduced accordingly.

Complications

The most common complications seen with esophageal feeding tubes are dislodgement of the tube secondary to patient vomiting and infection at the site of tube placement. For these reasons, care with how fast feedings are administered and daily cleaning/ antiseptic care of the insertion site are imperative. If at any time your cat vomits or if the insertion site is showing signs of infection (excessive redness, swelling, or discharge), please notify your veterinarian immediately.

Feeding tube removal

The tube can be removed after the patient has reached its desired weight, recovered from the trauma or debilitating condition, or has finished chemotherapy treatment and has been totally self-feeding for 2 weeks without showing any signs of weight loss. Removal of the tube is simple and does not require anesthesia; however, you should not attempt to remove the tube on your own.