

## Child health information factsheet

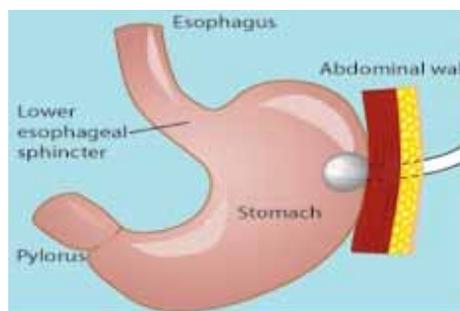
### Gastrostomy

If your child is unable to eat and drink all they need for their growth and development, they may need a gastrostomy. This will allow all or some of their nutrition to be given through a tube, normally as special milk feed.

A gastrostomy is a hole (stoma), from the skin into the stomach. A feeding device is put in the stoma so that the child can have a liquid feed, water or medication straight into the stomach.

#### The stoma

An operation is needed to make the stoma and to place the feeding device into the stomach. This will be carried out under a general anaesthetic (medicine given to make your child go to sleep).



#### Feeding devices

There are two types of feeding devices that your child can have:

**A gastrostomy button:** is a feeding device that fits into the stoma. It is held in the stomach by a balloon filled with water.



**A gastrostomy tube (PEG):** is a long tube that fits in the stoma and is held in the stomach with a soft plastic disc.



You will be able to talk to the consultant about which device would be most suitable for your child.

#### Your child's stay in hospital

Your child will stay in hospital for two to three days so that they can recover from the operation and start their new feeds. This also gives time for you to learn how to use the gastrostomy.

#### Using the gastrostomy

When your child is first due a feed, you will be shown how to use the device. There are lots of different liquid feeds available and a dietitian will talk about the type and the amount of feed for your child.

There are two ways that the milk feed can be given:

#### Bolus feeding

The feed is given at regular times during the day. A syringe is attached to the tube and the feed is poured into it and allowed to flow by gravity down the tube, through the gastrostomy and into the stomach. This takes about 15 to 20 minutes.

## Continuous feeding

The feed is given using an electric pump. This allows the right amount of feed to slowly flow into the stomach over a set time.

The method used will depend on many factors, the most common plan is a combination of both, bolus feeds during the day and a continuous feed overnight.

## Medicines

You can also use the gastrostomy to give your child their medicine and you will be shown how to do this by the nursing staff.

## Changing the gastrostomy

This depends on the feeding device your child has. Your child's consultant or nurse specialist will talk about this with you.

The decision to take the gastrostomy out will be made when everyone involved in your child's care is satisfied that your child is eating and their weight gain is stable.

## Care

You will be shown how to care for your child's gastrostomy while you are staying on the ward.

The condition of the stoma site should be checked regularly and the skin should be kept clean and dry. This is to stop an infection around the stoma site.

## Children's community nurses

If your child does not already have a children's community nurse, a referral will be made. They will be able to provide ongoing support for you and your child once you are at home.

## Back to normal activity

Once the stoma has had time to heal, your child will be able to continue with all of his or her normal daily activities including sports and swimming.

## Risks

You will need to sign a consent form for your child to have this procedure. As with all procedures and anaesthetics, there are risks. These will all be explained to you before you sign the form.

With a gastrostomy button there is a risk that the balloon may burst. You will be told what to do if this happens at home.

## If you have any questions or concerns please contact

G4 surgery ward:  
023 8079 6718

**If you need a translation of this document, an interpreter or a version in large print, Braille or on audio tape, please telephone 023 8079 4688 for help.**