Stomach Tubes

Many critically ill patients are not able to swallow properly. Also, patients on mechanical ventilators cannot eat by mouth. When the stomach and intestines continue to work, a tube can be placed through the nose or mouth and pushed down into the stomach. This tube allows nurses to make sure that the stomach does not get over filled, and also to feed the patient. Nasogastric (or "N.G.") tubes are thicker tubes (about the thickness of a pencil). These tubes are used when it is important both to suck out stomach fluid for testing, to prevent over filling, and for feeding. Feeding tubes are thinner tubes that are used mainly for feeding.

Common reasons for its use and benefits:

- Monitoring the stomach - This is very important to prevent the stomach from being overfilled with food or stomach juice, and to make sure the stomach juice does not become too acid.
- Feeding - Some patients who cannot swallow and some patients who are on mechanical ventilators can be fed through nasogastric or feeding tubes.

Risks:

Some of the risks of putting in a nasogastric or feeding tube include:

- Discomfort during placement - Discomfort can result when the tube is inserted. Doctors try to lessen the pain by putting a jelly on the tube that helps it to slide in more smoothly.
- Placement into the lung - While the tube is being passed, it can go down the windpipe instead of into the stomach. This can cause coughing. Doctors often get an x-ray to see where the the tube goes before they give food or water through it.
- Collapsed lung - While the tube is being passed, it may, very rarely, go down into the windpipe and puncture the lung. This hole may seal quickly on its own. If the hole does not seal over, air can build around the lung and cause it to collapse (this is called pneumothorax). In such cases, a chest tube is sometimes needed to drain air from around the lung (see related Information Sheet on Chest Tube Thoracostomy).

Because of the low risk and common need for stomach tubes, the consent that patients sign for general treatments at the time of coming into the hospital usually includes permission for passing a stomach tube through the nose or mouth if it is needed. If the tube is needed for a long time, doctors may need to make a hole in the abdomen and pass a tube through the skin, into the stomach or intestines. Surgery of this nature requires consent from patients or families.


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