



Gastrostomy Tube

Frequently Asked Questions

“It’s the hardest decision I’ve ever had to make, but it’s been the best thing for my child. Absolutely, I would do it again.” -Mother of a twenty-one month old child with g-tube

“I thought it meant he’d never eat anything with his mouth, so I said ‘Absolutely not.’ But now, I can’t believe the gains he’s made. He’s eating, he’s walking; once he was able to get enough nutrition, it’s like he became more himself.” -Mother of a eighteen month old child with g-tube

What is a g-tube?

A gastrostomy tube (also called a g-tube) is a tube that leads directly into the stomach through the abdomen. It’s helpful for children who have difficulty swallowing, chewing, keeping foods down (reflux), or are unable to intake enough nutrition by mouth.

How can it help my child?

Getting enough oxygen and enough nutrition are the body’s two main priorities. Without these, the body shuts down as much as possible in order to conserve energy. When given enough nutrition, a child can turn his attention to other activities, such as physical, cognitive and social development. Parents often report that their children have more energy, appear happier, and make more developmental progress after the placement of a g-tube.

A g-tube will reduce the stress level associated with trying to get adequate nutrition into your child’s body. The g-tube enables your child to obtain the nutrition she needs in order to grow and develop. It also greatly reduces the time and effort spent on feeding, benefiting both you and, more importantly, your child. This allows you more time to spend socially interacting with your child. Parents of children with g-tubes typically report that mealtimes are much more enjoyable for both parent and child.

How can I tell if my child might benefit from a g-tube?

A significant indication is the diagnosis either of “failure to thrive” or aspiration pneumonia. Other good indicators are frequent coughing, choking, gagging, congestion or vomiting during or shortly after meals. Other signs that your child could benefit from a g-tube are that mealtime takes much longer than usual, you are feeding your child all day long, your child tires before she finishes her meal, or becomes frustrated during feeding. The g-tube is designed to help children who cannot safely and efficiently take in enough food or liquid by mouth, and to reduce the stress of feeding.

Will I have to adapt my child’s clothing to fit around the tube?

After a few weeks, the gastrostomy tubing can be replaced with a “button.” The button looks like the valve on a beach ball, and is not visible under clothing. Your child will not look “different” from other children as a result of this procedure. Your nurse will teach you how to use this easy button.

What risks are associated with this procedure?

As with any surgical procedure, certain risks are associated with the application of anesthesia. Also, reflux symptoms may occasionally worsen after g-tube placement. Due to this possibility, a second procedure called a Nissen fundoplication is typically performed simultaneously. A Nissen fundoplication involves "wrapping" the fundus, or top section, of the stomach around the esophagus. This procedure prevents food or liquid from re-entering the esophagus, which is commonly known as reflux. Additional reflux symptoms are often temporary in nature and can frequently be managed by postural changes, thickening the texture of foods, smaller and more frequent feedings, or anti-reflux medication.

Is the g-tube a permanent condition?

No. Depending on a variety of individual factors, the g-tube can be used long-term or short-term. For most children, the g-tube *supports* oral feeding by enabling children to eat only the types of food that is safe and comfortable. The pressure of having to "get in" a certain amount of calories per day is removed, making mealtimes more enjoyable for both you and your child. When your child is able to safely eat an adequate amount of food and liquid, the g-tube can be removed.

Does a g-tube mean my child can't eat?

No--we strongly support oral feeding if it is safe for your child. If you choose a g-tube, it does not mean your child will not be able to eat or drink by mouth. In fact, it's extremely important to continue to orally "stimulate" her during tube feedings. This ensures that your child doesn't lose the association between feeling hungry and oral sensation and helps maintain feeding skills. Oral stimulation during tube feedings will ensure a much smoother path back to eating by mouth.