About Your PEG Tube
Answers to common questions

This handout answers common questions about a percutaneous endoscopic gastrostomy (PEG) tube. Ask your primary health care provider if you have other questions or concerns.

What is a PEG tube?

A percutaneous endoscopic gastrostomy (PEG) tube is a soft plastic tube that goes into your stomach from your abdomen. The tube has a port (opening) on the end that you put liquid food into.

You may need a PEG tube if you cannot get enough nutrition by eating normally. Without enough nutrition, you may lose too much weight or become dehydrated (lose body fluids). The PEG tube gives you a way to give your body the nutrition it needs.

Formula (liquid food) can be given through the tube. The tube may also be used for decompressing your stomach (removing air and fluid).

You may need a PEG tube for a short time or for the rest of your life. It will be in place until you no longer need it. Removing the PEG tube is an easy procedure. If it stays in place for a long time, it may need to be replaced at some point.

How was your PEG tube placed?

A doctor who specializes in gastroenterology (disorders that affect the stomach, intestines, and other organs involved in digestion) placed your PEG tube. During the procedure, this doctor placed a small flexible scope through your mouth and down into your stomach. This scope is about the width of a finger and has a light and camera on its tip.
Another doctor cleaned the skin on your abdomen with special soap. A local anesthetic (numbing medicine) was injected into your tissue in this area, and then a small incision was made. The doctors used the scope to guide them as they pulled the PEG tube into your stomach through the incision. A plastic flange (disk) holds the tube in place.

**When You Get Home**

- Your follow-up visit with a nurse in our clinic is scheduled for 10 to 14 days after your PEG tube is placed. At this visit, the nurse will check your PEG site to see how the area is healing.
- You may shower. Do **not** take a bath, sit in a hot tub, or go swimming for 4 weeks.
- Use a Q-tip to gently clean the skin under the plastic disk (flange). Keep the area clean and dry. You can cover it with a soft bandage for the first 2 weeks.
- After the area has healed, you do not need to keep it covered with a bandage. It will take about 2 weeks to heal.
- Resume taking your usual medicines. Take only the medicines that your doctors prescribed or approved.
- If you have diabetes, it is important to manage your blood sugar levels. High blood sugar levels increase your risk for infection and skin sores around your PEG tube.
- A tender overgrowth of red tissue (granulation tissue) can occur at the incision site. This is normal and can easily be treated in our office. If it occurs, call our clinic to make an appointment. One of our doctors will look at it.
- The dietitian who met with you before your PEG tube was placed will set up a plan for you to get tube feedings when and if you need them.

**Using Your PEG Tube**

- A home infusion provider will arrange for your formula and feeding supplies.
- Make sure you or a family member knows how to correctly give feedings through your PEG tube. Ask your primary care provider or home infusion provider:
  - How much formula should you get, and how often?
  - How much time should each feeding take?
• You may need to increase the amount of formula you get with each feeding. You will increase the amount until you reach the right amount for your body. A dietitian may help you figure out the right amount of formula to give yourself.

• Do **NOT** put pills into your PEG tube. Dissolve non-liquid medicines in liquid before you put them in your PEG tube. Ask your primary care provider to show you how to dissolve non-liquid medicines.

**Flushing Your PEG Tube**

• **Flush your PEG tube 2 times a day** with 60 mL of tap water.

• You will also need to flush your tube with 60 mL of tap water before and after each time you give yourself any medicines or formula. If you do not flush it, medicines and formula can dry up and clog the tube.

**Decompressing Your Stomach**

• Close the cap on the end of your PEG tube when you are not using it.

• If you have gas pains or nausea, you can decompress your stomach by taking the cap off the PEG tube. This can ease your symptoms.

**Living with a PEG Tube**

Having a PEG tube may be life-changing for you and your family. You may feel angry, sad, or worried about the PEG tube, and you might wonder what others think of it. These feelings are normal. Talk with your health care providers, family, or friends about your feelings.

These tips may help make living with a PEG tube easier:

• Arrange your feeding schedule in a way that allows you to get enough sleep. Tell your primary care provider if the PEG tube makes it hard for you to sleep.

• Prepare ahead of time before you leave your home so that you feel more comfortable:
  - Make sure you have absorbent cloths or pads with you in case your PEG tube leaks. You may also want to bring a change of clothing.
  - Find out in advance where you can feed privately when you are in public places.
When to Call

- In the next 7 days, call the Digestive Disease Center right away if:
  - There is bleeding from the tube or around the tube.
  - You have chills or a fever higher than 100°F (37.8°C).
  - You have pain in your chest or belly.
  - You are vomiting.
  - Your stool is black.
  - The tube is clogged.

- If you get sudden belly pain while you are infusing (adding) fluids to your tube:
  - Stop the infusion right away.
  - Call the Digestive Disease Center.

- If your PEG tube falls out:
  - Call the Digestive Disease Center right away or go to the nearest emergency room to have a Foley catheter put in.
    
    The PEG tube opening might close up within hours if you do not do this. Having a Foley catheter put in your incision site right away will help keep your incision open until a new PEG tube can be placed.
    
    - Bring the broken PEG tube with you to your doctor’s office or the emergency room.

Who to Call

Weekdays between 8 a.m. and 5 p.m., call the UWMC Digestive Disease Center ........................................ 206-598-4377

After hours and on weekends and holidays, call the Community Care Line at Harborview Medical Center........206-744-2500

Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns.

UWMC Digestive Disease Center: 206-598-4377
Community Care Line at Harborview Medical Center: 206-744-2500