

# Gastrostomy Feeding Guidelines

FOR THE FREKA® PERCUTANEOUS  
ENDOSCOPIC GASTROSTOMY TUBE

For Patients and Carers



## References

1. Siau K, et al. How long do percutaneous endoscopic gastrostomy feeding tubes last? A retrospective analysis. Postgraduate Medical Journal. 2018; 94: 469-474 2. National Patient Safety Agency (NPSA). Rapid Response Report NPSA/2010/RRR010: Early detection of complications after gastrostomy. March 2010. 3. BAPEN. Management of Enteral Feeding Complications. <https://www.bapen.org.uk/education/nutrition-support/enteral-nutrition/management-of-enteral-feeding-complications/> Accessed June 2025 4. White R, Bradnam V. Handbook of drug administration via enteral feeding tubes. Third edition. BPNG. London: Pharmaceutical Press. 2015. 5. Fresenius Kabi Nursing Team Protocol. 2023. Data on File. 6. Bischoff SC et al. ESPEN guideline on home enteral nutrition. Clin Nutrition. 2020; 39(1):5-22. doi: 10.1016/j.clinu.2019.04.022.

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| <b>Hospital Dietitian</b><br>Address<br>Tel. / Fax / Email                   |
| <b>Community Dietitian</b><br>Address<br>Tel. / Fax / Email                  |
| <b>Nutrition Nurse</b><br>Address<br>Tel. / Fax / Email                      |
| <b>District Nurse</b><br>Address<br>Tel. / Fax / Email                       |
| <b>Nutrition Feed Company/Nurse Advisor</b><br>Address<br>Tel. / Fax / Email |
| <b>Hospital Consultant</b><br>Address<br>Tel. / Fax / Email                  |

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## Contents

|  |     |
|--|-----|
| > Introduction                                       | 1   |
| > What is gastrostomy feeding?                       | 1   |
| > How is the gastrostomy tube inserted?              | 1   |
| > Why do I need a gastrostomy feeding tube?          | 2   |
| > How long will the tube last?                       | 2   |
| > How soon after tube insertion can I begin feeding? | 2   |
| > Post gastrostomy tube placement care               | 2-3 |
| > What feed will I receive?                          | 3   |
| > Feeding regimen                                    | 3   |
| > Tube care  | 4   |
| > Administration of medicines                        | 4   |
| > Methods of flushing the tube                       | 4   |
| > Tube blockage                                      | 5   |
| > Attaching a new Freka® PEG ENFit® connector        | 5   |
| > Skincare   | 7   |
| > Rotating and advancing Freka® PEG                  | 7-8 |
| > Frequently asked questions                         | 9   |
| > Accessory items                                    | 10  |

## Introduction

This booklet aims to provide you with information about your gastrostomy feeding tube and to answer any questions. If you have additional questions or would like further explanation please contact your nurse or dietitian who will be able to help you. Please put this booklet in a safe place as you may wish to refer to it in future. For additional information regarding your tube please refer to the specific aftercare sheet.

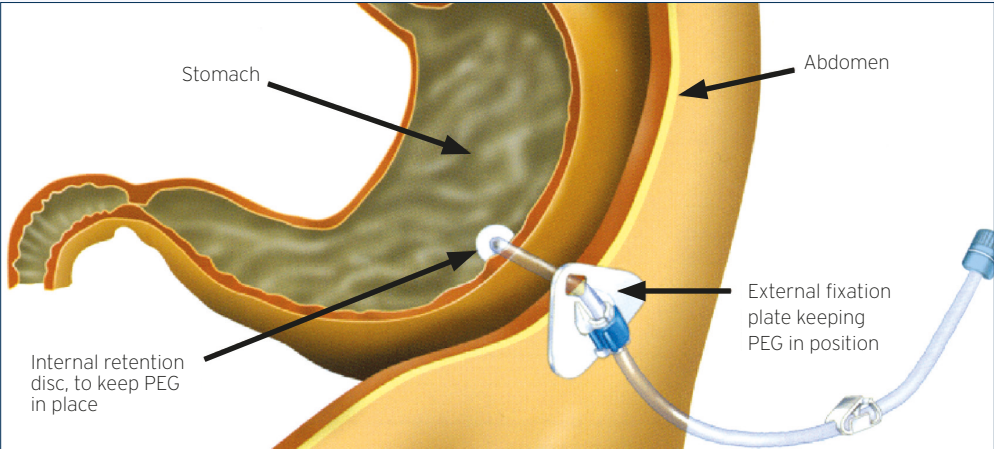
Please note if your nurse or dietitian has provided you with other specific guidance please do follow their instructions in place of this booklet.

## What is gastrostomy feeding?

A percutaneous endoscopic gastrostomy feeding tube (or PEG as you may hear it referred to) is a small feeding tube which is inserted directly into the stomach so that you can receive feed, fluid and medication without swallowing. It will provide you with a long-term method of obtaining nutrition.

## How is the gastrostomy tube inserted?

The procedure is performed with sedation under local anaesthetic. It is carried out using a gastroscope (a flexible instrument used to examine the inside of your stomach).



## Why do I need a gastrostomy feeding tube?

You are currently unable to take enough food and fluid by mouth to meet all your nutritional needs. The gastrostomy feeding tube will provide access for feed to be administered into your stomach.

## How long will the tube last?

The tube is made from polyurethane, which is compatible with the human body. The product's instructions for use states that the tube can remain in situ for several months, however if the tube is well cared for it can last for 2 years, and there is evidence to show some can remain intact for over 5 years.<sup>1</sup>

## How soon after tube insertion can I begin feeding?

Your feed can commence 1-2 hours after tube placement, but this will be decided by your doctor, dietitian or nurse, the feed is introduced slowly to begin with, so that your body can adjust to the feed.

## Post gastrostomy tube placement care (first 72 hours following placement)

The following advice should be taken following PEG placement.<sup>2</sup> If you, the patient, experience any of the symptoms below, immediate medical advice should be sought as per your local post-operative protocol.

- Severe pain post procedure
- Pain on administration of fluid
- Fresh bleeding
- External leakage of gastric contents

**DO NOT USE** your tube, stop feeding and immediately contact the relevant medical team or attend your local Accident and Emergency department taking this booklet with you, containing your tube details.

**Tube make and size:**

.....

## What feed will I receive?

Your dietitian will advise you on the type of feed you require, usually you will be prescribed a commercially produced liquid feed which contains all the essential nutrients you will need on a daily basis.

You may receive part or all of your nutrition via your gastrostomy feeding tube, depending on your specific medical condition and needs.

You may also need extra fluids through your gastrostomy feeding tube. Water can be administered using a syringe or administration set.

## Feeding regimen

Your dietitian will prescribe the volume and rate of your feed to suit your needs. You may be fed intermittently or continuously during the day or overnight, depending on which is best for you.

Always follow the recommended regimen. If you have any problems with the feed you should inform your dietitian.

In order to prevent reflux or vomiting ensure that you are sitting upright or at a minimum of 30-45° angle.<sup>3</sup>

## Tube care

The gastrostomy feeding tube should be flushed with at least 20ml of cooled, boiled water before and after feed, or medicine administration, or as directed by your healthcare professional to help prevent tube blockage. You should only use the tube to administer feed, water and liquid medicines.

## Administration of medicines<sup>4</sup>

Medication should be administered in a liquid or soluble/ dissolved form. The tube must be flushed before and after each administration of medication.

Sustained-release tablets/capsules are unsuitable for administration via an enteral feeding tube as they are designed to be released slowly. Crushing may result in the whole dose being released at once.

Medicines with enteric coatings should not be crushed and given via your gastrostomy tube as they are likely to cause tube blockage.

For further advice on administration of medicines, please contact your pharmacist or nurse.

## Methods of flushing the tube

Using ENFit syringe for flushing.



1. Connect the ENFit syringe to the medication port of the giving set. Turn the medication port to 90° in order to administer water or medication.



2. Connect the ENFit syringe directly to the gastrostomy feeding tube.

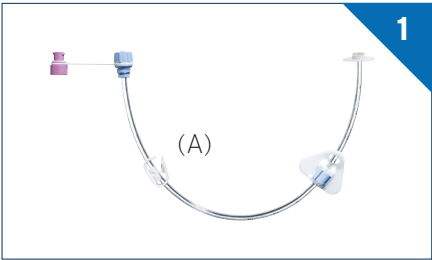
Tube blockage<sup>5</sup>

If you are unable to flush the tube or you can see a blockage, you may try the following steps. If unsuccessful on the first step, try the next:

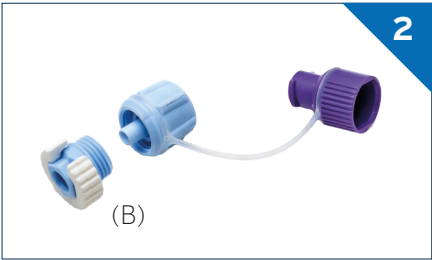
- 1. Ensure all the clamps are open and the tube is not kinked.
- 2. Connect an 60ml ENFit syringe and try to unblock using a push-pull action.
- 3. If the blockage remains, attempt to flush with 60ml of warm water using a push-pull action.
- 4. If the blockage remains, massage the tube around the area of blockage if obviously visible, and/ or wrap a warm flannel around the blocked area for 10 minutes and then attempt to flush with water.
- 5. If the blockage remains, attempt to instil carbonated water into the tube. Clamp and leave in the tube for 30 minutes then reflush with water.

When trying to flush, use a pumping action with the plunger on the syringe. Never use excessive force and never attempt to unblock the tube by inserting sharp instruments. If these steps do not work contact your dietitian, GP or nurse.

How to attach a new Freka PEG ENFit connector CH/FR 9/15/20

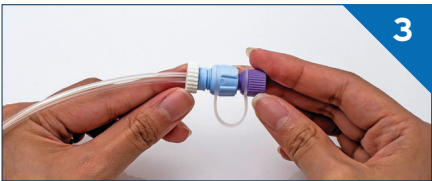


Wash and dry hands  
Close clamp on tube (A)

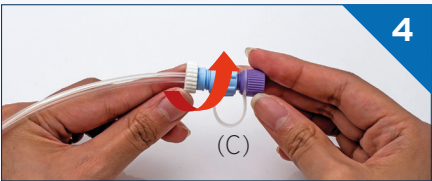


Removing old ENFit end:

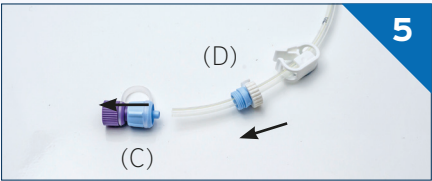
Detach the outer white ring (B) from the new ENFit connector.



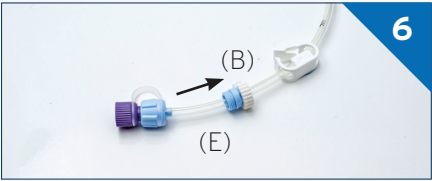
Attach the outer white ring to the coloured hexagonal fixing screw of the current ENFit connector.



Twist the white hexagonal screw anticlockwise and unscrew from the connector (C).

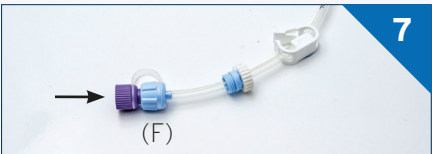


Pull off the old connector (C) and hexagonal screw (D).

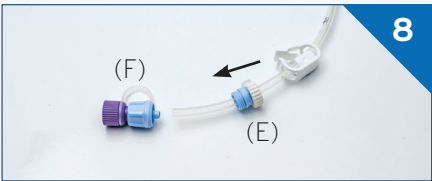


Attaching the new ENFit end:

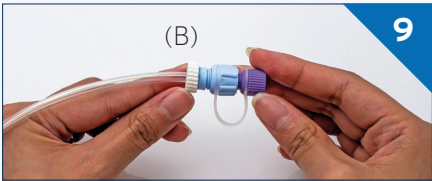
Replace the outer white ring back (B) on to the hexagonal fixing screw on the new ENFit connector (E) and slide onto the tube.



Push the new pin with connector (F) into the Freka PEG tube. If connection is loose or the tube is stretched, trim 1cm off the tube length.



Slide the fixing screw (E) towards the ENFit connector (F) and screw together using the outer white ring.



Remove the outer white ring (B) to prevent accidental removal of the connector.



The new ENfit connector should now be securely attached to the Freka PEG tube and ready for use.

## Skincare

The area where the tube enters your stomach is called the stoma site. You may experience a discharge at the stoma site for the first few days. It is important to clean your stoma site regularly (usually twice weekly<sup>6</sup>), or as advised by your healthcare professional and keep it dry. After the stoma tract has healed (usually after one week), you should start to rotate the tube after you have cleaned it (see next section).

However, if rotation causes excess pain and/or the tube will not turn, stop and try again the next day. If at this time it is still painful and will not turn, do not attempt to carry out the rotation. Contact your healthcare professional for further advice.

If you notice any redness, heat, swelling, exudate, discomfort or pain you should contact your nurse or GP.

If you notice feed leakage around the stoma site you should stop feeding and contact your healthcare professional.

## Rotating and Advancing the Freka PEG

It is known that some people may be prone to what is called 'Buried Bumper Syndrome' (where the internal disc of the PEG tube becomes buried and the stomach lining grows around it). To help prevent this developing, the PEG tube should be rotated and advanced. Rotation and advancement should be carried out daily.<sup>6</sup>

This means carefully pushing the tube 3-4 cm into the stoma site and rotating. It is important for the tube to move freely in the stoma. Then pull the tube back into its original position by pulling gently until resistance is felt.

Do not rotate the tube if the site is discharging or has not healed.

Always check with your healthcare professional about when to start rotation.

### Suggested rotation process:

1. Wash hands thoroughly with soap and water.
2. Clean the external plate as advised by your healthcare professional.
3. Open the fixation catch (see Fig 1).
4. Detach tube from groove in fixation plate (see Fig 2).
5. Move plate away from skin (see Fig 3).
6. Clean tube and stoma area and the underside of the plate and dry. Push 3-4cm of the tube into the stomach and rotate, gently pull back the tube to feel resistance.
7. Place the fixation plate back to its original position (approx 0.5 - 1cm away from the skin). Re-insert tube in the groove (see Fig 4) and close the fixation catch (see Fig 5).
8. Your fixation plate should not be too tight or too loose. If you feel that it is, your healthcare professional will be able to advise you.

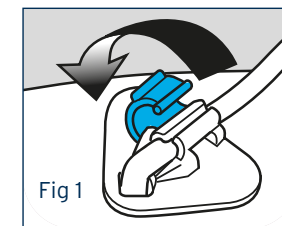


Fig 1

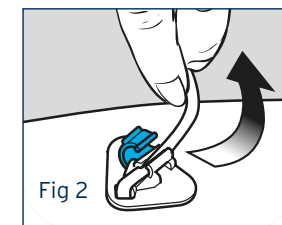


Fig 2

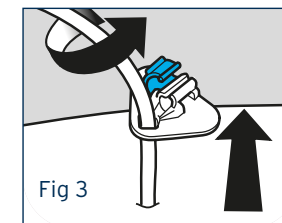


Fig 3

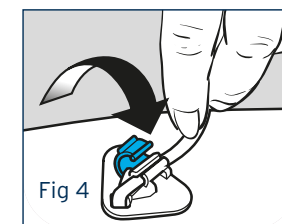


Fig 4

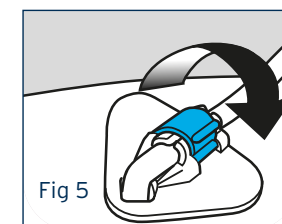


Fig 5



## Frequently asked questions

### Can I swim, bath or shower?

Ask your healthcare professional about how soon you can swim, bath or shower after your stoma site has healed.

### Who do I contact if the tube gets damaged or I get a problem with the site?

Contact your local healthcare professional.

### Can I go on holiday?

Enteral feeding does not stop you going on holiday but it is a good idea to have a letter from your doctor and make sure you have the necessary insurance. Contact your local healthcare professional for advice about replacement tubes and information regarding the supply of your feed.

### If I cannot eat what will happen to my mouth?

Plaque can build up very quickly so it is important to brush your teeth at least twice a day. A mouthwash or artificial saliva may help if your mouth is dry.

### How do I clean the site?

Refer to the information given by your local healthcare professional.


### Are there any patient support groups available?

**PINNT** - Patients on Intravenous and Nasogastric Nutrition Therapy

PINNT supports people on enteral and parenteral nutrition, providing advice and local support groups.

PINNT contact information:-  
**Tel: 020 3004 6193**  
**[www.pinnt.com](http://www.pinnt.com)**

## Accessory Items




Freka PEG  
Connector  
CH/FR 9 ENFit

Code: 7981385



Fixation  
Plate  
CH/FR 9

Code: 7903002



Freka PEG  
Connector  
CH/FR 15 ENFit

Code: 7981386



Fixation  
Plate  
CH/FR 15

Code: 7904002




Freka PEG  
Connector  
CH/FR 20  
ENFit

Code: 7981387



Fixation  
Plate  
CH/FR 20

Code: 7751541



Repair Set  
CH/FR 9/15/20

Codes  
CH/FR 9: 7981382  
CH/FR 15: 7981383  
CH/FR 20: 7981384

## Notes

## Notes