



Being fed through a tube when your cancer cannot be cured

Department of Nutrition and Dietetics

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Information for patients with head and neck cancer

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Introduction

Cancer in the head, neck or throat, or treatments for this, can cause problems with eating and drinking. You may not be able to eat or drink enough to meet your body's nutritional needs. This can lead to weight loss, dehydration and hospital admission and can ultimately lead to death.

Tube feeding (also called enteral feeding) can be used to provide nutrition to people who are unable to take adequate foods and fluids by mouth.

Many patients with head and neck cancer will have feeding tubes to help them cope with treatments that are aimed at curing the cancer. However, tube feeding might be recommended for you as you approach the end of your life.

It can be hard to decide if you want to be fed through a tube. It is a very personal choice and you will be supported in whichever decision you make.

The aim of this leaflet is to provide you with a basic understanding of tube feeding. This will allow you to discuss the options with your family, friends and health professionals as appropriate.



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What is tube feeding?

Tube feeding (or enteral feeding) is the term used for feeding you via a tube that goes directly into your stomach. It is normally used when a person is unable to take sufficient food or fluids by mouth to maintain their weight and quality of life. Tube feeding can replace eating and drinking altogether, or may be used to add to what you are managing to take by mouth.

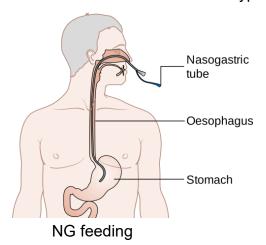
There are two main types of tubes that can be used:

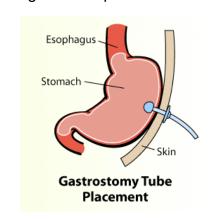
Nasogastric tube (NG tube)

- A small thin tube is inserted into one of your nostrils and passed down into your stomach
- It is used for short-term feeding (less than a month)
- It is usually used in the hospital setting as it can be difficult to care for at home

Percutaneous Endoscopic Gastrostomy (PEG) or Radiologically Inserted Gastrostomy (RIG)

- The feeding tube is placed directly into your stomach and held in place with a waterfilled balloon or a plastic disc inside your stomach
- It can stay in place for many months or years if needed
- It can be hidden under clothes
- You may need to stay overnight in hospital to have the tube inserted, but it is easy to care for at home
- This is the most common type of tube feeding used for patients who are at home





PEG / RIG feeding

- Once a feeding tube is in place, liquid feed is passed through it, either over several hours using a pump or several times a day via a syringe.
- The tube can also be used for medications and water if needed.
- Homemade blended foods or other liquids, such as alcohol, must not be passed down a feeding tube.
- Although you may have some discomfort at the tube site for a PEG or RIG whilst it heals, you should not have any other discomfort from tube feeding and it should not affect your ability to get around.

Making decisions about tube feeding

Tube feeding is not suitable for everyone. You will be able to discuss the benefits and possible side effects before you consent to having a feeding tube inserted. Sometimes we will discuss this with you ahead of time. Making your wishes known in advance means that we know if you want tube feeding or not.

Why would I choose tube feeding?

Many people choose to have tube feeding to extend their life expectancy and increase their quality of life. Poor nutrition and weight loss can make you weaker and more vulnerable to infections. This is of particular importance if you have few side effects, other than the inability to eat and drink.

Having tube feeding will not slow the course of your cancer, but it may improve your quality of life.

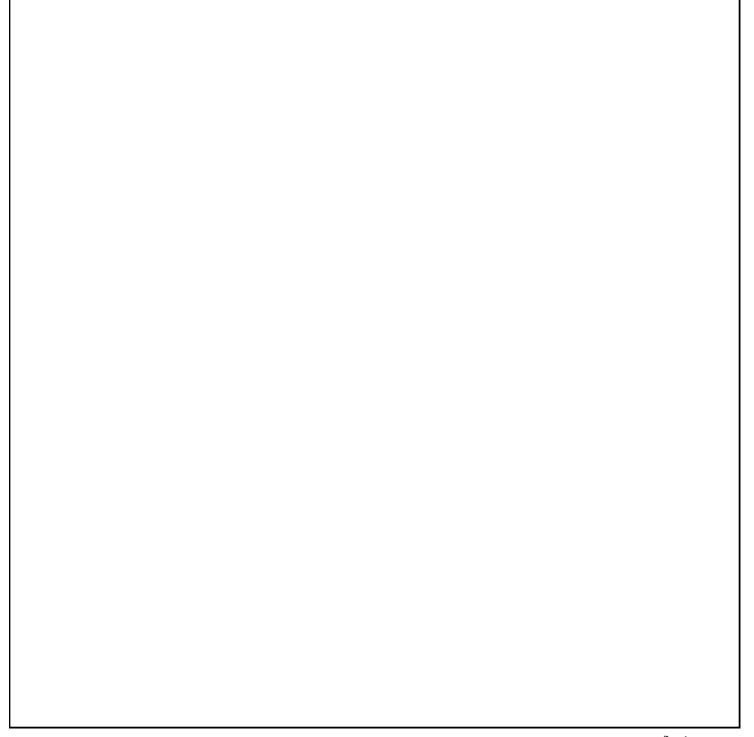
Caring for a feeding tube,

In most cases patients, and / or their family members, can be taught to care for the feeding tube on a daily basis. This training is done by the Home Enteral Nutrition Service. (HENs). The HENs team is a specialist team of dietitians and dietetic assistants who visit you at home once the feeding tube is in place. They arrange for of all the equipment you need, including the special feed, syringes and pump (if needed).

Next steps if you feel a feeding tube may be right for you

Before you make a decision about whether tube feeding is for you. it is best to contact the Specialist Head and Neck Dietitian (see details below). They will make an appointment to see you and any family or friends you would like involved in the decision. You can then discuss fully the benefits and risks to you to help you come to the right decision for you.

Contact details	
Senior Specialist Dietitian	
Telephone: 0116 2585400	



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