

# 9. PERCUTANEOUS ENDOSCOPIC GASTROSTOMY

## INTRODUCTION

Percutaneous endoscopic gastrostomy (PEG) for enteral feeding has been used since 1980<sup>1</sup> and it is indicated in those patients where enteral feeding is likely to be needed for more than four to six weeks<sup>2</sup>; the indications for its use are shown in Table 27. The procedure of inserting a PEG is straightforward for most patients and it has advantages over nasogastric feeding in that it is more comfortable, less unsightly and less prone to becoming displaced. However, it is invasive and may result in complications, and therefore the appropriateness of its use needs careful consideration in every case.

<b>Indication</b>	<b>Example</b>
Neurological disorders of swallowing	Cerebrovascular accident (CVA), multiple sclerosis, motor neurone disease, Parkinson's disease, cerebral palsy
Cognitive impairment and depressed consciousness	Head injury
Mechanical obstruction to swallowing	Oropharyngeal or oesophageal cancer, radiation enteropathy
Long term partial failure of intestinal function requiring supplemental intake	Short bowel, fistulae, cystic fibrosis