

Tube Feeding

Decision Aid

What is tube feeding or artificial nutrition?

Tube feeding (also called artificial nutrition) is a medical treatment that provides liquid food (nutrition) to the body. This is done when a person cannot eat enough by mouth or they have problems swallowing.

How is tube feeding given?

It is given as a liquid through one of the following kinds of tubes:

- **A large IV tube** (intravenous tube) inserted into a vein.
- **An NG tube** (nasogastric tube) inserted through the nose into the stomach.
- **A PEG tube** (percutaneous endoscopic gastrostomy tube) or **G Tube** (gastric tube) which is placed by surgery through the skin into the stomach or small intestine. This surgery is used if nutrition is needed for more than a few weeks.



When do people need a feeding tube?

When they cannot eat normally by mouth. These problems may be short-term (temporary) or long-term (permanent).

Reasons for short-term use include:

- A serious (acute) illness, surgery, or a severe injury.
- Brief loss of alertness or awareness.
- To cope with special treatments like radiation.

Reasons for long-term use include:

- Loss of the ability to eat normally or to swallow safely due to stroke, illness, or injury.
- Loss of the ability to use (digest) food normally (for example, from bowel disease or abdominal surgeries).
- Brain injury with a loss of alertness or awareness.
- The inability to eat enough food by mouth.

Who should use this guide?

This decision aid is for people with serious illness.

It can be used to support medical decision-making and conversations about **tube feeding (artificial nutrition)**.

How might tube feeding help a person?

- It supports the body's organs.
- It can help people to live longer.
- It can help people to feel better, have more energy, and be more alert.
- It supports blood pressure.
- It can help people to get through treatment, go through surgery, and recover faster.

How might tube feeding cause harm?

- Some people may have diarrhea, cramping, nausea, or vomiting.
- Some people may have swelling.
- A few have leaking around the tube.
- A few have skin infections.
- A few may have bleeding around the tube.



Does tube feeding work to help people get better?

It depends on the type of medical problems they have and why they need tube feeding.

Who is most likely to be helped by tube feeding?

- People who were mostly healthy before the illness or injury and might have the strength to recover.
- Those who only need tube feeding for a short time (days).
- People who can be expected to live well with a feeding tube.

Who is less likely to be helped by tube feeding?

- People who have advanced or terminal illness from heart, lung, liver, or kidney failure.
 - Those with a terminal illness such as advanced cancer or advanced dementia.
 - People who are older, weaker, or very frail.
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What happens for people who decide NOT to try artificial nutrition?

They can still get other treatments.

Deciding ahead of time that you don't want to try tube feeding does not mean you can't get other treatments you might need. This may include surgery or time in the intensive care unit. Help with pain is always available.

People who can swallow safely may continue to drink or be assisted by hand.

- Caregivers can help relieve dry mouth with ice chips, moist sponges, moistening sprays, or liquids placed inside the mouth.
- Water, gum, lozenges, or candies can be given to people who can still swallow.



They may not feel hungry or thirsty.

It is normal for people who are seriously ill to need less food and water because their body isn't using calories in the same way. Seriously ill people may not feel hunger or thirst the way healthy people do.

They may not be able to delay death.

If tube feeding is needed but is not given, then death may not be delayed.

How do people decide whether or not to try tube feeding?

They talk with their medical team about how tube feeding might help them to reach important goals. They think about the benefits or possible harms to see if it is right for them.

Talk with your doctors and medical team about:

- How a feeding tube might help you to reach your goals, such as getting back to a certain level of health or ability.
 - How long the feeding tube might be needed.
 - What kinds of problems the feeding tube might cause.
 - How long you might live with or without a feeding tube.
 - What life might be like while using a feeding tube.
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Who chooses to use tube feeding?

- People who are able to get better or those who are expected to live well with a feeding tube.
- Some people who are willing to try tube feeding with the hope of living longer, even if the tube is uncomfortable or if it might cause other medical problems.

If someone is unsure about tube feeding, they may choose to try it for a short time (a trial period) to see if it helps. They should talk with their medical team about how to tell if it is helping.

Who chooses NOT to use tube feeding?

People with a serious or life-limiting illness may choose not to use tube feeding because they may want to avoid:

- More medical treatments.
- Swelling or other side effects.
- Delaying death.

What feels right for you?

When thinking about yourself and the choices, it may help to talk with:

- Anyone who might make medical decisions for you in the future.
- Any person for whom *you* are the medical decision-maker.
- Your doctors and medical team.
- Family or friends.
- Your spiritual or faith leaders.
- Others who have chosen tube feeding in similar situations.

Making Your Decisions Known

- Tell your family, close friends, and your doctor about your decision.
- Create an Advance Directive* and assign someone to speak for you when you cannot speak for yourself.
- Talk with your medical provider about whether your decision should be recorded in a special medical order. (Learn more at POLST.org.)
- Give copies of these forms to your family, to your doctors, and to your hospitals.
- Keep important documents in an easy-to-find place.

*Advance health care directive forms are available at CoalitionCCC.org or from your healthcare provider.



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References, copies, and additional aids are available online at CoalitionCCC.org or by email to info@CoalitionCCC.org.