

Comprehensive approach to the child with gastrostomy

Celostna obravnava otroka z gastrostomo

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Izveček

Endoskopska vstavitev gastrostome je izbirna metoda za enteralno hranjenje odraslih in otrok. Najpogosteje jo potrebujejo otroci z nevrološkimi okvarami in motnjami požiranja. Zapleti so sorazmerno pogosti in večinoma lažje oblike. Najpogostejši zaplet je bakterijsko ali glivično vnetje kože ob cevki.

Pri odraslih poseg navadno opravimo v lokalni anesteziji, pri otrocih pa po veljavni doktrini v splošni anesteziji.

Starši so v času bolnišničnega zdravljenja prisotni ob otroku, da se naučijo in privadijo samostojne nege v domačem okolju. Seznanimo jih s teoretičnim in praktičnim znanjem o življenju otroka z gastrostomo. Podamo jim informacije o hranjenju, negi kože in o možnih zapletih ter jih čim prej dejavno vključimo v vse faze zdravstvene nege.

Tudi otrok mora biti v zdravstveni obravnavi enakovreden član komunikacije, zato je potrebno poznati otrokove načine komuniciranja. Predvsem moramo biti pozorni na otrokovo neverbalno komunikacijo. Zdravstvena nega otroku razkrije pogosto neznano ali tudi neželjeno situacijo, zato jo mora medicinska sestra omiliti z ustreznim načinom komuniciranja.

V 4–5 dneh so starši ustrezno usposobljeni za samostojno negovanje otroka v domačem okolju. Ob odpustu dobijo pisna navodila o negi otroka po perkutani vstavitvi gastrostome.

Abstract

Endoscopic gastrostomy tube placement is the method of choice for enteral feeding of adults and children. It is most commonly needed in children with neurological impairment, and in those with swallowing difficulties. Complications are relatively common but in most cases not severe. Among the most common complications are bacterial and fungal infections of the skin around the tube.

In adults, it is usually performed with local anesthesia, whereas in children general anesthesia is recommended.

During the child's hospitalization, parents are usually present in order to learn how to take care of the child at home. We offer them theoretical and practical knowledge about the life of a child with gastrostomy. We provide them information on feeding, skin care, possible complications, and actively include them in all steps of the process of gastrostomy nursing care as soon as possible.

Likewise adults, children also have to be treated as equals, and for this reason we have to know how to communicate with them, with special attention on child's non-verbal communication. Nursing care to the child often presents an unfamiliar and even undesirable situation. It is therefore the role of the nurse to mitigate it by appropriate communication.

It takes four to five days for parents to obtain sufficient information to be able to take care of their child at home. Upon discharge, they receive written information on percutaneous gastrostomy care.