

Tube versus IV feeding in malnourished pediatric cancer patients

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About 60 percent of pediatric cancer patients experience malnourishment during treatment. At that point, patients and families have a choice: tube feeding or IV nutrition supplement. Which would you choose? A study published this week in the *Journal of Pediatric Oncology Nursing* shows that families' perceptions, especially of the discomfort of tube feeding, leads to choosing IV over tube – despite the fact that tube feeding is usually the better choice, associated with better gut function and lower rates of infection.

"Despite the benefits of tube feeding, we found a strong preference among families and older <u>pediatric patients</u> for IV feeding," says Kitty Montgomery, MS, RN, PCNS-BC, CPHON, the study's senior author and pediatric clinical nurse specialist at Children's Hospital Colorado, a clinical care partner of the University of Colorado Cancer Center.

The study surveyed 49 parents and older <u>pediatric cancer</u> patients. Of 14 patients, all reported preferring IV feeding over tube feeding, for example saying, "I already had a port in for chemo, so we used that for TPN," and, "Tube feeding sounds disgusting and uncomfortable."

"When nutrition support is needed, most health care teams suggest tube-feeding first. Only, we tend to find resistance to the idea from parents or patients," Montgomery says. "This study shows us the reasons for those objections and we hope will help us learn to break down those barriers to the best method of support."



Parents of pediatric <u>cancer patients</u> were much more evenly split between preference for tube feeding (41 percent) and IV feeding (59 percent), with the parents who preferred tube feeding frequently citing information about the procedure given by the treatment team as the reason for their choice. For example, one parent said, "Tube feeding is helpful in giving meds and not as hard on the liver and keeps the digestive system working properly." Another parent who preferred tube feeding said they, "Chose tube feedings because it helped to keep <u>digestive system</u> active, making it easier to adjust back to food."

"This helps us tailor our message," says Montgomery. "We see now that the biggest barrier to tube feeding is perceived discomfort, so health care professionals may have better success with patients and parents by addressing that issue. What we need to do now is learn to translate these findings into action."

Provided by University of Colorado Denver

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