

Radiologically inserted gastrostomy (RIG): aftercare

You have had a feeding tube (gastrost	omy) inserted through the abdominal
wall into the stomach using X-ray guid	lance.
This was performed by Dr	
Date and time:	

What to expect afterwards:

- Rest, take it easy and avoid strenuous activity for the next 24-48 hours.
- You may have pain, bruising and discomfort near/around the incision site. This should improve over the next 24-48 hours. Please take painkillers for relief, either at home or ask the nursing staff if in hospital.
- Slight oozing from your wound site is normal, if you see fresh blood or bleeding put pressure on it immediately. If it does not stop after 10 minutes of pressure, then call for help please attend the Emergency Department (A&E) or call 999.
- Some other problems that may occur:

Problem	How to deal with it?
The tube is not in the stomach or falls out	This is rare as the position is confirmed at the end of the procedure. Initial use of the tube is delayed and monitored closely to help pick up this problem. The position can be confirmed by doing a CT scan if this is a concern. If the tube falls out you should seek medical advice urgently as it may be possible to reinsert another tube using the same site, before the track closes.
Tube becomes blocked	This can be avoided by correct use of the RIG, using liquid or crushed medication where ever possible and flushing the tube before and after use with saline. A blocked tube will require replacement.
Infection	The insertion site will become painful and red and you may feel generally unwell. The insertion site does not normally require a dressing but must be kept clean. The PEG / nutritional nurse will advise on how to deal with the infection.

When to seek help

Please contact us if you experience:

- New fresh or increased bleeding.
- Light headedness, dizziness, nausea, clammy skin, blurred vision or loss of consciousness.
- Pain that is not controlled with painkillers.

Please bring this information sheet with you if you seek medical attention.

Pain relief

If you have the following painkillers at home, take as follows if it is safe for you to do so:

• **Paracetamol** – do not take more than 8 tablets in 24 hours (unless you have been advised otherwise e.g. you have a reduced liver function).

Compassionate	Aspirational	Resourceful	Evcellent

• Anti-inflammatory – Ibuprofen, Aspirin, etc. You can take one of these in addition to paracetamol if you have moderate pain (unless you have been advised otherwise e.g. you have a duodenal ulcer).

As healing occurs, you will feel less pain. Once your pain is controlled and is mild, you should only take paracetamol. If your pain remains severe for more than three days or is not relieved by your painkillers, you should contact your GP.

Looking after your wound

Try to keep your wound dry for the next 24-48 hours. A RIG does not require a dressing routinely but the site should be kept clean. A PEG nurse can advise on this.

When can I resume my normal lifestyle?

This will depend on how soon you recover. You should be able to resume most normal activities of daily living within 24 hours.

When can I drive?

You should consider whether your wound or pain may prevent you from driving, e.g. being able to perform an emergency stop comfortably. It will take a few days to recover sufficiently. If you were given sedation, then you should not drive for the next 24 hours (see separate information sheet).

What happens next?

The PEG nurse and doctors looking after you will let you know about your ongoing care.

Contact us

Radiology Day Case Unit on 0118 322 8368 (Monday-Friday 8.30am-5pm). Out of hours, please attend Royal Berkshire NHS Foundation Trust Emergency Department or your nearest Emergency Department (A&E).

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

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Next review due: September 2025