Health Care Professionals’ Perceptions and Experience of Different Modalities for Enteral Feeding

Lim Siew Hoon1, Ang Shin Yuh1, Madeleine Lam2, Chan Mei Mei2, Violeta Lopez2, Ong Hock Soo1, Janet Chong1, Lim Mei Ling4, Ng Xin Ping1

1Singapore General Hospital, 2Home Nursing Foundation, 3National University of Singapore, 4Neuroscience Research Australia

Aims: With an aging population, there is a concomitant increase in number of patients with dysphagia; and hence increase in prevalence of enteral feeding. Health care professionals (HCP) play a critical role in influencing decisions of patients and caregivers on their choice of modality for long-term enteral feeding. This study aims to explore the perceptions of health care professionals on different modalities for enteral feeding and their experiences in initiating long-term enteral feeding among adult patients.

Methodology: Design. A qualitative explorative descriptive study design with purposive sampling approach was adopted.

Methods. A total of four speech therapists, fifteen nurses and seven doctors who are involved in initiating long term enteral tube feeding were recruited over a data collection period of August to December 2017. One to one interviews were conducted and audio-recorded. An inductive content analysis approach, with open coding, creation of categories and abstraction of data was adopted.

Result: Four main themes were generated: (1) NGT being a first choice; all respondents alluded that NGT is the modality first chosen and initiated as it can be easily inserted at bedside; (2) PEG is an alternative; most respondents reported that PEG is being regarded as an alternative when the first choice (NGT) fails; or upon request from patient or family; (3) Perceived better outcomes with PEG; Although PEG was considered as an alternative, health care professionals recognized that PEG is advantageous in terms of lower incidence of dislodgement; reduced frequencies for tube change, improved self-image; and (4) Barriers to promotion of PEG, challenging to promote a higher adoption of PEG due to lack of knowledge among HCP, insertion of PEG being a surgical procedure and lack of support in the community.

Conclusion: NGT remained as the modality of choice although health care professionals perceived better outcomes with the use of PEG.