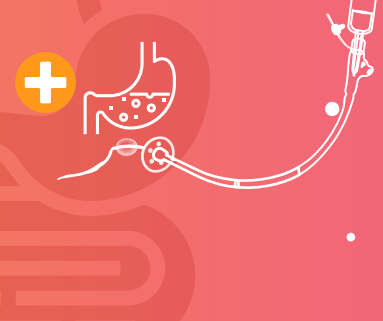
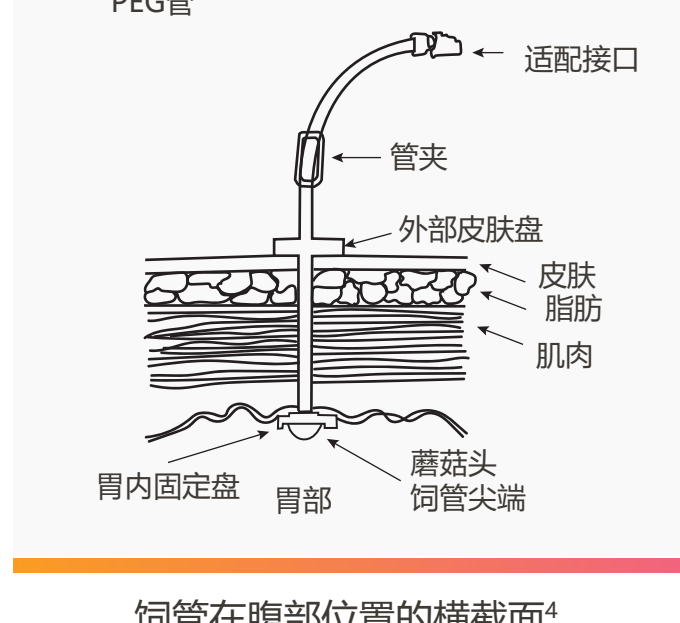


# 从不同胃造口饲管设计 看患者受益



胃造口饲管大体上分为两类：一是仅需简单牵引即可拆卸；二是不可在体外拆卸（需内镜下拆卸或更换）；胃造口管的材质可以是硅胶或聚氨酯<sup>1,2</sup>，内外部的固定装置保证了饲管稳定在患者身体上。<sup>3</sup>

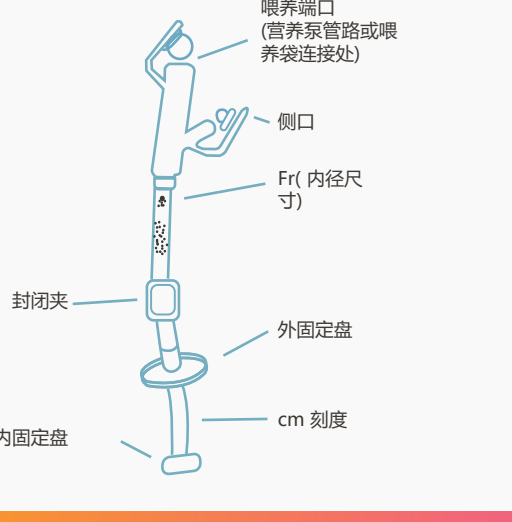
- 饲管胃内壁的保险杠防止饲管从胃中迁移出去（又称胃内固定盘）。<sup>3</sup>
- 饲管外腹壁的扁平外盘防止饲管从皮肤迁移出去（又称皮肤固定盘）。<sup>3</sup>



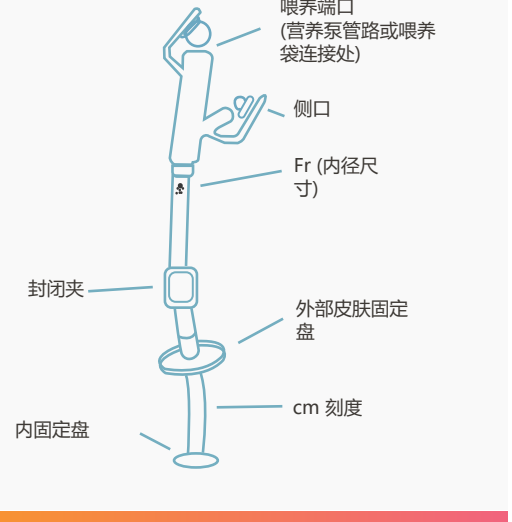
饲管在腹部位置的横截面<sup>4</sup>

## 普通型胃造口饲管构造

### 非球囊型胃造口饲管<sup>1</sup>



可折叠胃内固定盘  
非球囊式胃饲管



刚性胃内固定盘  
非球囊式胃饲管

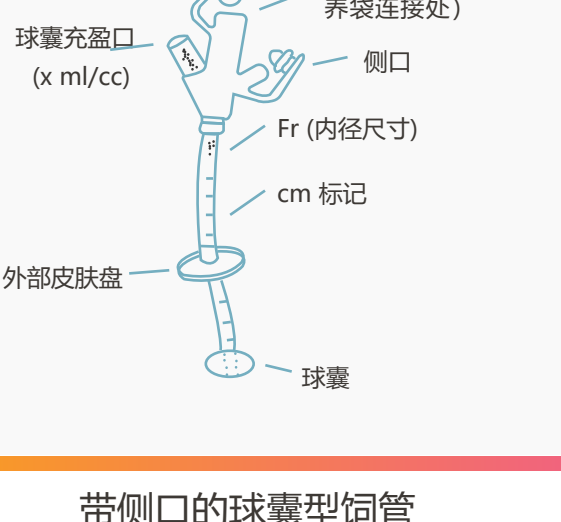
胃内固定盘可折叠的胃造口管更换时可通过简单地牵引拆卸——但拆卸时需要较大的力度——此时固定盘呈伞状内折叠；牵引折叠需要较大的力（保证饲管在拆卸前被安全固定，不会意外脱落）。这类饲管更换更安全，无需切口<sup>5,6</sup>

带有刚性胃内固定盘的胃造口饲管通常在内窥镜下取出。<sup>7</sup>

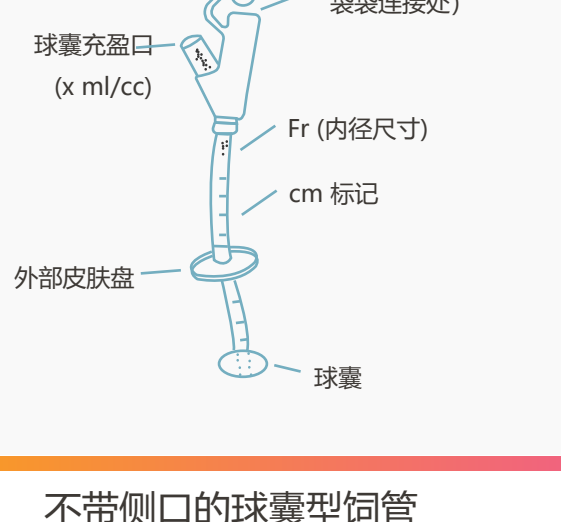
### 球囊式胃造口饲管<sup>1</sup>

这类饲管使用球囊(用无菌水充盈)作为饲管在胃内的固定物。<sup>7</sup>饲管插入胃部后，使用无菌水充盈球囊使其膨胀，可以在护士的指导下由家庭护理人员插入。<sup>8</sup>

然而也不能排除某些情况下，球囊意外泄露或破裂，此时可能会有潜在的管道脱落的风险。<sup>9</sup>



带侧口的球囊型饲管

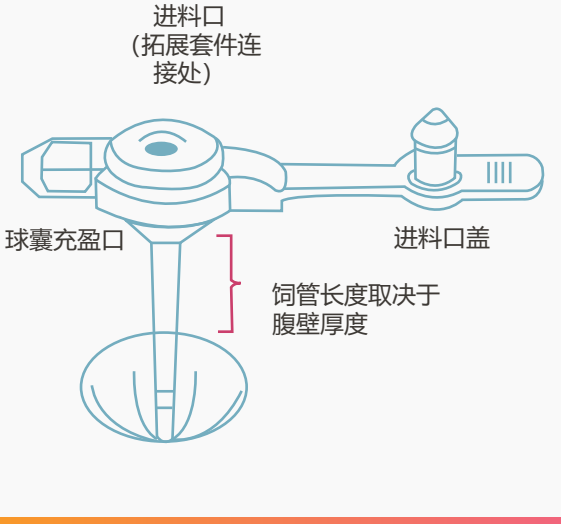


不带侧口的球囊型饲管

带侧端口的球囊式胃造口管允许通过侧端口给药<sup>10</sup>

### 低位(贴近皮肤)胃造口装置<sup>1</sup>

胃造口管贴近皮肤，不会引人注目，易于隐藏和护理，提升患者生活质量；低位的饲管喂养时须连接延长管<sup>2,8</sup>



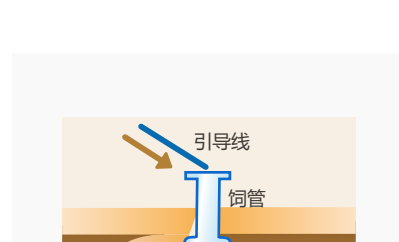
内固定为球囊型的  
低位胃造瘻管



内固定为保险杠(非球囊)的  
低位胃造瘻管

保险杠型(非球囊型)的低位胃造口管胃内固定物是一个扩大的尖端(作为内固定盘)，这类饲管必须由医生或训练有素的护士用特殊的引导器完成放置。<sup>8</sup>

内固定为保险杠型(非球囊型)的导管尖端较粗，插入时可能需要更大的力量，增加了导管与引导丝分离的风险，可能有饲管在胃内移位的潜在风险(如图所示)。



## 您了解吗?

选择最合适的胃造口饲管需要考虑患者的特点<sup>1</sup>

患者因素	饲管特点
患者/照护者偏好	饲管的尺寸/管径
使用后患者/照护者的能力或经济范畴	贴近皮肤的纽扣式/拖拽的长饲管
患者年龄	内固定的球囊方便更换/内固定盘须要麻醉取出
麻醉风险	喂养配件
患者有拔出饲管的风险	饲管使用的熟知度
患者的活动/社交隐私需求	
饲管更换的便捷性需求	
放置位置的需求	

与胃造口管类似，空肠造口管和胃造口空肠管有球囊型、非球囊型和低位型三种

## AVANOS 解决方案

AVANOS MIC\* 和 MIC-KEY\* 品牌的肠内喂养饲管在中期和长期喂养应用中得到广泛的认可<sup>12</sup>

### 胃造口饲管<sup>12</sup>



MIC\*G 饲管<sup>12</sup>  
可充盈的硅胶内固定球囊 & SECUR-LOK\* 外部固定环



MIC-KEY\* G 饲管<sup>12</sup>  
贴近皮肤的设计，可充盈的硅胶内固定球囊

### 胃造口-空肠饲管<sup>12</sup>



MIC\*GJ 饲管<sup>2</sup>  
可充盈的硅胶内固定球囊 & SECUR-LOK\* 外部固定环

\*Each of the tube properties apply equally to both ENFit® and non-ENFit® connector tubes

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1. ACI NSW Agency for clinical innovation. A Clinician's Guide: Caring for people with gastrostomy tubes and devices: From pre-insertion to ongoing care and removal [Internet]. [2015 Mar; cited 2020 Jul 21]. Available from: [https://www.aci.health.nsw.gov.au/\\_data/assets/pdf\\_file/0017/251063/gastrostomy\\_guide-web.pdf](https://www.aci.health.nsw.gov.au/_data/assets/pdf_file/0017/251063/gastrostomy_guide-web.pdf). 2. Tang, S. Percutaneous Endoscopic Gastrostomy Tube Replacement. Video Journal and Encyclopedia of GI Endoscopy. 2014; 2(2): 70-73. 3. Overstreet, Maria RN, MSN How does a PEG tube stay in? Nursing2004. June 2004 - Volume 34 - Issue 6-p21. 4. Cleveland clinic.Percutaneous endoscopic gastrostomy[Internet]. [updated 2020. cited 2020 Oct 14]. Available from: <https://my.clevelandclinic.org/health/treatments/4911-percutaneousendoscopic-gastrostomy-pe>. 5. Product data sheet, Avanos MIC\* PEG standard and safety kits for push and pull method DH70EC14317 [Data on file. GL-DSR00143 / 1 - Retention Values for Competitor PEG Tubes Report] 6. Benatta MA. The Buried Bumper Syndrome: External Bumper Extraction after Radial Mini Incisions and Replacement through an Adjacent Tract. Case Rep Med. 2016;2016:5379291. 7. Ojo O. Balloon gastrostomy tubes for long-term feeding in the community. Br J Nurs. 2011; 20(1):34-8. 8. Fallier N, Lawrence KG. Comparing low-profile gastrostomy tubes. Nursing. 1993; 23(12):46-8. 9. Funaki B, Peirce R, Lorenz J, Menocci PB, Rosenblum JD, Straus C, Ha TV, Leef JA, Zaleski GX. Comparison of balloon- and mushroom-retained large-bore gastrostomy catheters. AJR Am J Roentgenol. 2001;177(2):359-62. 10. Gallegos M. Nursing considerations for enteral tubes [Internet]. [last updated 2012 Sep 10; cited 2021 Feb 02]. Available from: [https://cc.unm.edu/common/training/aspiration\\_mgmt/mary\\_gallegos\\_nursing%20considerations%20for%20enteral%20tubes.pdf](https://cc.unm.edu/common/training/aspiration_mgmt/mary_gallegos_nursing%20considerations%20for%20enteral%20tubes.pdf). 11. Knowledge Communication 2015 [Vol.3]. Digestive Health Avanos Japan [19DMKT46-1]. 12. Product data sheet, MIC\* and MIC-KEY\* enteral feeding product catalogue 2020.

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