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Gastrostomy Tube Feeding of Cystic Fibrosis Patients

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Objective: To identify the implication of gastrostomy tube feeding of Cystic fibrosis (CF) population in Saudi Arabia and its effect on mortality.

Method: A retrospective chart review of all confirmed CF patients for the period Nov.1994- Oct. 1998 for demographic, clinical and nutritional data.

Results: Of 96 CF patients, 81 (84%) CF patients are a live, 15 (16%) died. Fifty (52%) were males and 46 (48%) were females. Age at diagnosis 2.9 ± 3.5 years. The mean follow up period was 3.24 ± 2.8 years. Sixty five percent of patients were in the mild to moderate malnutrition stage (<90th percentile) weight for height percentile(Wt/Ht). Sixty three percent were in the mild to moderate stunted growth (<90th percentile) height for age percentile. Gastrostomy (GT) tube feeding was established in 8 patients, 5 were females and 3 were males. Age when GT inserted was 5.5 ± 2.8 years, a range of 2.6-11.5 years. 2 were still alive at the time of the study and 6 died after GT intervention. Duration of GT feeding was 13 ± 11 months, a range of 1.4-38 months. The weights and heights of all patients with GT improved minimally in the first 6 months, but remained the same thereafter. Comparison of all CF patients who are a live at the time of the study and patients with GT feeding have shown that factors contributed to early mortality of GT patients were: Mucoid pseudomonas colonization at diagnosis (p 0.03) and development of early resistance to Genta (p 0.04).

Conclusion: Early nutritional rehabilitation is necessary to improve the survival of CF patients. GT feeding may not improve survival if placed in patients with progressive lung disease and moderate to severe malnutrition stage.