

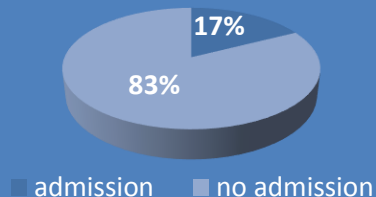
Radiologically Inserted Gastrostomy as day case : a novel, safe and cost-effective alternative to inpatient admission?

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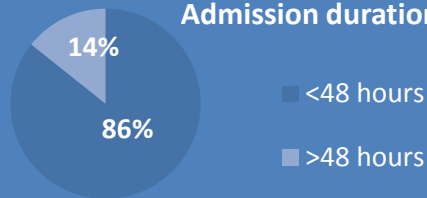
Learning objectives: -Understand the unplanned admission rate and complications following a day case Radiologically Inserted Gastrostomy (RIG.)
-Implement a standard from the lessons learnt.

Background: -30-day complications from 40 sequential outpatient day cases (37 Head & Neck cancers, 3 Motor Neuron Disease).
-RIG indication was primarily elective to anticipate difficulty swallowing during radiotherapy for Head & Neck cancer.

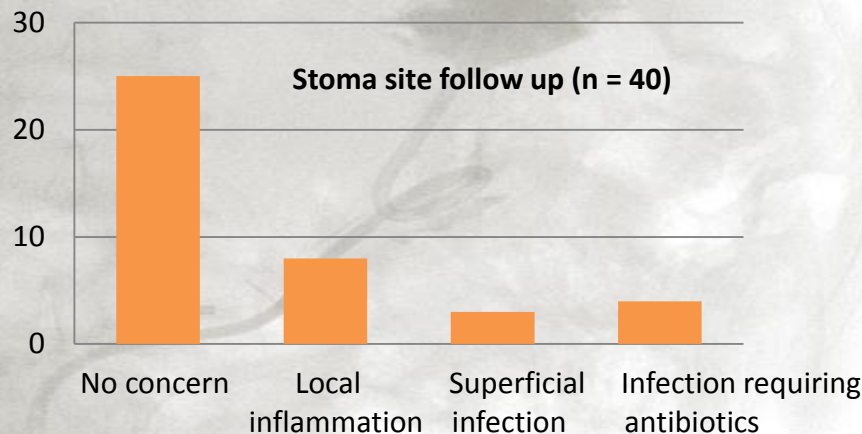
Unplanned RIG related admissions



Admission duration

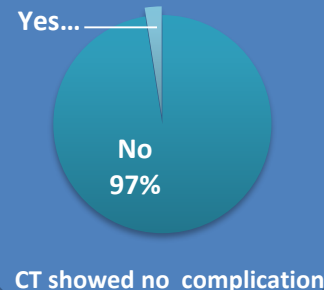


Procedure details:



One patient had the RIG replaced for alternative type of G-tube due to vomiting

Abdominal CT performed?



CT showed no complication

Conclusions: -No permanent adverse outcomes in 30 day follow up. No sepsis, haemorrhage, peritonitis or perforation.
-Admission rate 17%, 86% of admissions were under 48 hours duration; 57% admissions were a precautionary measure only.
-RIG replaced by an alternative tube in 2.5%. 10% required oral antibiotics for stoma site infection. Simple tube occlusion occurred in 5%.