Clinical Outcome of Early Enteral Feeding on Patients Post Esophagectomy

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Abstract:

Objectives: Aim of our work is to study the effect of early enteral feeding through either nasoenteral or feeding jejunostomy tube post esophagectomy on patients recovery and hospital stay. Background: Postoperative nutrition is a well known aspect of care in recent years and has been shown to decrease the incidence of complications and hospital stay. Enteral nutrition has been shown to be superior to parenteral nutrition as it is more physiological, safer, cheaper and early enteral nutrition has been clearly confirmed to reduce postoperative morbidity. Methods: This is randomized combined retrospective and prospective study that is conducted in surgical oncology department, South Egypt cancer institute, Assiut University; from October 2012 to October 2016. Patients in this study were divided into two groups: group 1 includes patients with feeding jejunostomy and group 2 is patients with nasoenteral tube. Results: 25 Patients included in this study (19 males & 6 females). All cases were primarily diagnosed as esophageal cancer, middle and lower 1/3 esophagus or proximal gastric carcinoma infiltrating cardia by clinical data associated with abdominal sonar and/or C.T scan and upper endoscopy with biopsy. There was no significant difference in catheter related complications (P value 0.238). There was no operative mortality. Conclusion: Early postoperative enteral nutrition was feasible and safe for patients undergoing esophagectomy. There is no significant difference between NE and FJ. Enteral nutrition either through nasoenteral or feeding jejunostomy is an effective method for postoperative nutritional support in this type of major surgery.

Keywords:

Early Enteral Nutrition, Delayed Enteral Nutrition, Esophageal Cancer, Postoperative Complication Early Enteral Feeding, Feeding Jejunostomy, Nasoenteral Feeding, Cancer Esophagus

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