

USE OF AN ESOPHAGEAL TUBE AS A SUCCESSFUL METHOD OF TUBE FEEDING IN CATS WITH MANDIBULAR FRACTURES

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The popular method of tube feeding in cats is *via* a nasogastric (NG) tube. The disadvantages of this method are severe irritation and trauma to nasal mucosa predisposing the animal to remove the tube and the need of a very small gauge tube, which gets blocked easily. The objective of this paper is to describe more effective method of enteric feeding, in cats.

This study was carried out in the Veterinary Teaching Hospital from January to August 2006. Ten cats injured by road traffic accidents, following mandibular fracture correction were used as the control group. All the cats were fed through a NG tube (5-6 G infant feeding tube) and an Elizabethan collar (EC) was used to prevent the removal of the tube. All cats were hospitalized and observed for 3 weeks. The test group included 6 cats following the same kind of fracture correction. Instead of the NG tube, oesophageal (OE) tubes (Levin's type Fr 16 stomach tube) were placed in the test group and Elizabethan collars were not placed in those cats.

Each animal was anesthetized and after correction of the fracture, it was placed in right lateral recumbency. The jaws were opened and a curved haemostat was inserted through the pharynx to propel the esophagus to lateral cervical area. Tip of the haemostat was used as a guide to place the incision through the palatopharyngeal arch using a scalpel. After placing the incision over the tip of the haemostat it was taken out through the incision and the jaws of the haemostat opened to grasp the tip of the OE tube. The tube was then pulled through the mouth of the cat while the distal end was kept just outside the incision. The tube was redirected caudally, so as to place it in the esophagus. Stay sutures were placed through the incision to secure the tube and the incision was covered with a bandage placed around the neck.

All the cats in the control group removed their tubes within 3-7 days. During this time 60% of the tubes were replaced due to obstruction. None of the animals in the treatment group removed the tubes for the whole 3 weeks. Only 23.5 % of the tubes were blocked but were cleared easily. There was no necessity to suture the incision after the tube was removed. It could be concluded that the OE tube feeding is more effective than NG feeding in cats for enteric feeding and the same method could be applied to dogs.