Gastric and Jejunal Enteral Access

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Figure 5: Endoscopic appearance of acute caustic GOO during CRE dilatation; (a) narrowed pyloric opening with active ulceration; (b) CRE balloon in situ; (c) CRE balloon inflated; (d) pyloric channel opening after CRE dilatation.
Cosmetic Advantages Low-Profile Device
PEG Placement and the External Bolster Placement

Tight

Direct Apposition

1-2 cm Away

Does it Matter?
Tissue Compression

- Increased tissue tension
- Reduced blood flow
- Reduced oxygen/nutrient delivery
- Ischemia
Ying or Yang

Direct Apposition

Loose
The Duodenum Is Relatively Short
Percutaneous Endoscopic Gastrojejunostomy

- Jejunal Tube
- Gastric Tube
- Gastric Port
- Jejunal Port
*** Notice Air Gastrogram

Duodenal C-Loop

Tip of J-Tube

PEG
Direct Small Bowel Access – Surgical Jejunostomy

“Was the Gold Standard”

5fr – 7 fr

Vivonex

Needle Catheter Jejunostomy
How the hell do I tell them I haven't a clue where we're going?