

ABSTRACT

FEEDING BURN PATIENTS VIA A GASTRIC TUBE UP UNTIL SURGERY TO ENHANCE CALORIC AND PROTEIN INTAKE

Burn injury causes hypermetabolism, hypercatabolism, and increased nutritional needs. Nutritional support is vital to help decrease the deterioration of lean body mass, promote wound healing, and sustain immune function. Many burned patients require tube feedings to help meet their increased nutritional needs. However, it is common practice for tube feedings to be stopped several hours before surgery to prevent aspiration. Burn patients may have numerous operations and experience caloric and protein deficits due to this practice.

The purpose of this study is to determine if the amount of time tube feeding is withheld prior to surgery performed on burned patients can be safely decreased in order to increase total nutritional intake. Testing sputum for glucose and pH served as makers for aspiration. The results of this study suggest that continuing tube feeds before surgery is a safe practice, especially if the patient has a protected airway prior to the operation.

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