

Gastric Lavage

Objective

To remove ingested toxic substance from the stomach as soon as possible to reduce potential lethal complications.

Indication

For patients who are believed to have ingested a potentially life-threatening amount of a toxic substance. Usually only effective within one hour of ingestion.

Preparation

- Explain the procedure, make sure patient understands and agrees to co-operate.
- Obtain informed consent from patient for the procedure.
- Need intubation to protect airway if patient is drowsy or comatose
- Obtain informed consent for the procedure from relatives (though no legal authority) if patient is drowsy or comatose. If no relatives are available and the procedure is deemed necessary and life saving, two doctors can sign the consent form.

The Procedure

Passage of a thick wide-bored plastic tube into the stomach and wash out the toxic substance repeatedly with Normal Saline (NS). At the end of lavage, 50gm of activated charcoal may be given into the stomach to absorb the residual toxic substance.

Complications

The reported complication rate of gastric lavage is around 3%. However, if patient selection is appropriate and the procedure is properly carried out, serious complications are rare.

The commonest seen complication is mucosal injury and bleeding (Usually will heal up spontaneously). Other rarely reported but serious complications include:

- perforation of oesophagus, stomach or small bowel;
- unrecognised placement of the tube in the trachea leading to accidental aspiration pneumonia;
- aspiration of gastric content or lavage fluid causing pneumonia;
- fluid and electrolyte imbalance;
- cardiac arrhythmia;
- hypothermia.

After the Procedure

After Gastric Lavage, patient will be arranged for a short period of observation of vital signs. Subsequent management plan will depend on the clinical condition of patient. Doctor-in-charge will either advise admission for in-patient treatment or advise discharge from Accident & Emergency Department.

If discharge is advised, patient and relatives need to observe for possible post lavage complications such as:

- Pain on swallowing
- Anterior neck pain, anterior chest pain or upper back pain
- Blood stained vomitus
- Fever
- Cough
- Shortness of breath
- Abdominal pain

If any of the above symptoms is noted, please return to Accident & Emergency Department for re-assessment.

Remarks

This is general information only and the list of complications is not exhaustive. Other unforeseen complications may occasionally occur. In different patient groups, the actual risk may be different. For further information please contact your doctor.