Spontaneous Rupture of Long-Indwelling Nasogastric Tube: An Unforeseen Complication

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Using nasogastric (NG) tube is a common in critically ill patient; and also associated with some well-known complications like migration, knotting and obstruction. We encountered an unusual complication of NG tube, where spontaneous erosion of tube happened while tube was in situ. A 17-year-old boy with Japanese encephalitis was on enteral feeding in our ICU. During a routine change of NG tube, some resistance was felt at the nasopharynx. When it was pulled out, we observed that tube was partially eroded (Figure 1). The breakage of enteral tube has been reported in 11–20% cases, mostly during gastric and esophageal surgery. Other reasons for breakage of tube in cases that are reported are manufacturing defect, prolong gastric acid exposure, excessive flushing for food/medication impactions. This case highlights that NG tube erosion/ breakage could happen without any symptom.

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