

What is a Nasojejunal (NJ) Tube?

A nasojejunal (NJ) tube is a thin, flexible tube that is inserted during a gastroscopy through your nose. It passes through the stomach, and duodenum into the jejunum. It is different from a nasogastric tube which ends in your stomach.

Why might I need an NJ tube?

Dr Ryan is inserting the tube because you have a compression of your duodenum from the SMA. It will be used to deliver food. You can continue to eat and drink as your symptoms allow you to.

What can I expect when I have an NJ tube?

It is the same as a gastroscopy. Occasionally your nose or throat may be sore/uncomfortable temporarily after the insertion.

Living with an NJ tube:

You may have a sore throat or feel like gagging for a little while after the tube is inserted. This is normal and should go away within a few hours. You can usually eat and drink small amounts of clear liquids while the tube is in place.

It's important to pay attention to your NJ tube and let your doctor know if you experience any of the following:

- The tube leaks fluid, even after you've checked the cap.
- The tape or patch holding the tube in place becomes loose.
- The tube comes out of your nose.
- The tube feels like it's moved out of place. You can mark the tube with a permanent marker to track its position.
- Your stomach feels very full and uncomfortable.
- You have nausea or vomiting that doesn't get better.
- You have a sore throat or nose that's getting worse, or you have pain in your eyes or sinuses.

Taking care of your NG tube:

- Wash your hands thoroughly before and after touching the tube or any equipment connected to it.
- Keep the area around your nose clean and dry.
- Avoid pulling or tugging on the tube.
- Flush the tube regularly as directed by your doctor.

Remember, an NJ tube is a temporary tool to help you get the nutrition and medication you need. Most people only need an NJ tube for a short period of time. If it remains in place, it will need to be changed every 3 months with a new tube.