

Percutaneous Endoscopic Gastrostomy {further on PEG} has been performed for the first time in USA in June 1979. At that time it was received as a very risky method. Fortunately it did not last a very long time and this new method has changed in a skilled and very needed accomplishment. In Czech Republic this method appeared later - in 90th years of 20th century. But soon it has got in consciousness of doctors and other medical staff. And very promptly became a component of the programme in all of the major hospitals.

I am working as an endoscopic nursing sister at the gastroenterological department of the pediatric clinic of FN Motol. At our workplace we are engaged in the PEG method since the year 1996. Since this time we have introduced 134 PEG's and have carried out 42 exchanges. The working processes do not significantly methodically distinguish at the pediatric and adults patients. Accordingly to the age and namely to the weight of the patient it is necessary to choose the needed instruments {an endoscope and gastrostomy set}. It is possible to introduce the PEG successfully into small children. Our smallest pediatric patient, into which we have introduced the gastrostomy tube was 3 months old girl, with weight 4 kg. At some of our pediatric patients we have already realized one or more exchanges of the gastrostomy tube. On the other side, we have the pediatric patients - "record holders", which have the PEG introduced 5 - 6 years. Some defects, which conducted to the exchange of the gastrostomy tube may go to account of the producer. But most of the exchanges of the gastrostomy tube we have realized owing to the incorrect treatment with the tube by the children's parents. From the experiences from most of the workplaces, which are engaged in the PEG for the pediatric patients follows, that they prefer the collaboration with the anesthesiologist. At our workplace we realize the PEG in complete anesthesia.