Are there alternatives?

Whilst we try to use the gut as much as possible, if your gut needs to rest or is not working properly there are no alternatives.

Will my child be hungry and thirsty?

Generally people don’t feel hungry or thirsty whilst having PN. However, it is important to remember to brush your teeth even when not eating.

Can my child eat or drink whilst having PN?

Possibly, this will depend on why PN has been started and will be discussed by your medical team with you.

Will it affect my child’s bowels?

PN goes directly into the bloodstream bypassing the gut so it does not cause nausea, vomiting or diarrhoea. However, as your gut continues to produce mucus, cells and bacteria your child will still have some bowel movements and these will likely be different to when they are eating and drinking normally.

Further Information

Clinical contacts
Nutrition Clinical Nurse Specialist
02920 745331
Central Venous lines information leaflets (Sky Ward)

Websites
BAPEN (British Association for Parenteral and Enteral Nutrition) www.bapen.org.uk
PINNT (patients on intravenous or nasogastric nutrition therapy) www.pinnt.com
What is PN?

Some children are unable to eat or drink and need to be fed through their veins. Parenteral nutrition (PN) is a form of liquid food given directly into the bloodstream.

It contains a sterile mixture of:
- Glucose for energy
- Protein for growth and repair
- Fat for energy
- Vitamins and minerals to keep your child’s body healthy and working well
- Water

Why is it given?

PN is given to allow nutrition when the gut is not working properly or needs to rest to allow healing e.g. after surgery

What does it look like?

The PN comes in 1 or 2 special bags that are attached to the tube via an infusion pump. The feed is generally white and needs to be kept covered to stop light damaging the vitamins inside it.

How will it be given?

PN is given directly into the bloodstream via a large vein in the arm, chest or neck. A small tube called a central line will need to be inserted, often under a general anaesthetic, into a large vein and will then stay in place whilst the PN is being given.

Can my child move around?

To start with it is likely the PN will be given continuously, but later may be able to be given for shorter periods. The drip stands are mobile so your child should be able to move around if well enough.

How long will my child be on PN?

This will depend on why PN is started and will be discussed with your child’s doctors.

What are the risks and complications of PN?

- **Line infection** is the most common problem. It is important to keep the line entry site clean and monitor for signs of infection (redness, tenderness, discharge or fever).

  If these occur you must contact your doctor/specialist nurse so antibiotics can be started. Sometimes these don’t clear the infection and the central line needs to be taken out.

- **Raised blood sugar** levels can occur and therefore your child’s sugar levels will be monitored. This is not the same as diabetes.

- **Salt levels** are monitored by regular blood tests to make sure the correct amount of salt and nutrients are given in each bag of PN.

- **Line blockage** can occur but the line will be regularly checked and flushed to keep it open. If you are ever concerned please contact your doctor/specialist nurse.