



Key Points

1. PEG tube placement is associated with significant short- and long-term risks.
2. There is no decrease in risk of aspiration pneumonia with placement of gastric or post-pyloric feeding tube and there might be increased risk.
3. There is no evidence enteric nutrition by feeding tube improves nutritional markers or decreases the risk for pressure ulcer formation or improves healing of ulcers in a demented patient.
4. PEG tubes do not appear to contribute to comfort at the end of life.

<https://www.the-hospitalist.org/hospitalist/article/123501/do-feeding-tubes-improve-outcomes-patients-dementia>