Abstract

Introduction. Percutaneous endoscopic gastrostomy (PEG) performed using the Pull technique is associated with a high rate of surgical infections. When PEG is performed using the Introducer technique, a lower rate of infection is seen. However, this technique can pose technical difficulties during gastropexy. Gastropexy using two straight needles, our initial method, causes the snare to be in contact with the sterile suture. We have recently used an original gastropexy technique performed with a long curved needle in which there is no contamination of the sterile suture. The aim of this study is to compare the rates of infection observed with these two methods of gastropexy. Methods. The Introducer technique was performed in all patients with two different gastropexy techniques used during two separate, consecutive periods. Antibiotic prophylaxis was not used during either procedure. Any surgical infections were treated with local wound care and/or antibiotic therapy with treatment based on the severity of the infection. The surgical infection rates in each group were compared. Results. Group I consisted of 142 patients who underwent gastropexy with two straight needles, and group II consisted of 435 patients on whom gastropexy was performed with a curved needle. The infection rates found in groups I and II were 2.8% and 0.2%, respectively (P = 0.03). Conclusions. Gastropexy performed with a curved needle was associated with a lower rate of infection when compared to gastropexy performed with two straight needles.

Keywords

Percutaneous endoscopic gastrostomy, gastrostomy, surgical procedures, minimally invasive, endoscopic surgical procedure, suture techniques.