Use of Guedel Airway as a guide to insert nasogastric tube under general anaesthesia: A simple and logical way

Faraz Shafiq  
*Aga Khan University, faraz.shafiq@aku.edu*

Faruq Hameed  
*Aga Khan University, faruq.hameed@aku.edu*

Khalid M Siddiqui  
*Aga Khan University, khalid.siddiqui@aku.edu*

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Dear Editor,

We all must have faced difficulty in inserting nasogastric tube (NGT) during general anesthesia (GA). Procedure seems to be very straightforward but has got consequences in terms of failure, which can cause bleeding and alteration in hemodynamic variables. The overall failure rate turned out to be around 50-60%. The kinking or coiling of distal part of tube in piriform sinus or at level of arytenoids cartilage is reported to be the frequent cause of this failure. However, it’s still not very clear, as many factors including anatomical variations of oropharynx or type of material used by manufacturer may be responsible. We hypothesized that base of tongue and oropharynx is the possible site of resistance causing difficulty to insert NGT. The situation get worsen in patients having GA due to relaxation of tongue and jaw muscles. (Fig.1). The use of proper size Guedel oro-pharyngeal airway may be beneficial for NGT insertion in patients under GA. (Fig.2). It does

Fig.1: Loss of tone at back of tongue during GA causing resistance to NGT passage.

Fig.2: Presence of Guedel airway prevents tongue fall and assisting NGT to pass down.

**Correspondence**

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Faraz Shafiq¹, Faruq Hameed², Khalid Siddiqui³

**KEYWORDS:** Guedel, Nasogastric, Anaesthesia.

doi: https://doi.org/10.12669/pjms.345.16572

**How to cite this:**


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1. Faraz Shafiq, Assistant Professor,
2. Faruq Hameed, Resident,
3. Khalid Siddiqui, Assistant Professor,
1-3: Department of Anaesthesiology, The Aga Khan University, Karachi Pakistan.

Correspondence:
Faraz Shafiq, Assistant Professor, Department of Anaesthesiology, The Aga Khan University, Karachi, 74800, Pakistan.
Email: farazhafiq76@yahoo.com

Received for Publication: August 31, 2018
Accepted for Publication: September 26, 2018
this by preventing tongue fall by minimizing the resistance and likelihood of NGT placement in first pass. We found this technique really useful. However recommend further clinical trial to judge its success alone or as at adjuvant maneuvers for NGT placement.

**Acknowledgments:** We acknowledge the efforts made by Mr. Aslam Bashir in drawing medical illustrations for this report.

**Conflict of interest:** None.

**REFERENCES**