

Three large, thick, green curved lines on the left side of the page, resembling a stylized 'C' or a series of arcs.

Controlling nausea and vomiting: anti-emetic therapy advice

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Chemotherapy

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Clatterbridge Cancer Centre Hotline 0800 169 5555

If you are unwell during or up to 8 weeks following your cancer treatment please call the Clatterbridge Cancer Centre Hotline.

Your call will be answered by a dedicated nurse advisor. This line is available 24 hours a day, 7 days a week.



This information leaflet is about ways to help prevent or reduce nausea (feeling sick) and vomiting (being sick), which can sometimes be caused by cancer or its treatment. It covers the medicines that are commonly used, which are known as anti-emetic drugs (or anti-sickness), as well as containing other ideas to help you manage these side effects. This information should ideally be read with our general information about chemotherapy or radiotherapy.

The reasons why a person can feel sick or vomit are complicated. Within the body, nausea and vomiting are controlled by an area of the brain known as the vomiting centre. This area may be stimulated to cause nausea or vomiting by nerves within the stomach or other parts of the brain. Psychological and emotional factors can also influence whether a person feels sick.

Treatments that may cause nausea and vomiting

Chemotherapy

Some types of chemotherapy can affect the vomiting centre or the gut and cause nausea and / or vomiting.

Radiotherapy

Radiotherapy to the brain, stomach, bowel, or close to the liver may lead to nausea and vomiting.

Morphine based medicines

These are used as painkillers. Some of these drugs can cause vomiting.

Physical reasons that may cause nausea and vomiting

- Sights and smells
- Other medication
- Constipation
- Anxiety - feeling anxious
- Anticipatory nausea - previous episodes of nausea and vomiting



How anti-emetics work

The type of anti-sickness treatment you receive will depend on the cause.

Sometimes, there is more than one cause of nausea and vomiting and more than one treatment may be needed. The drugs also work in different ways and are often used together to best effect.

Many different types of drugs are used to control nausea and vomiting. Some of these work on the brain by preventing the stimulation of the vomiting centre. Others work on the gut by speeding up the rate at which the stomach empties which helps move food through the intestines more quickly. The most effective way of controlling nausea and vomiting is by treating the cause, if possible.

Common anti-emetic tablets listed by drug name (brand name)

- Aprepitant (Emend)
- Dexamethasone
- Ondansetron (Zofran)
- Lorazepam
- Domperidone (Motillium)
- Cyclizine (Valoid)
- Levomepromazine (Nozinan)
- Haloperidol (Haldol)
- Metoclopramide (Maxolon)
- Prochlorperazine (Stemetil)

Possible side effects

Some anti-emetic drugs cause side effects. Different drugs will have different side effects and each person may react differently. Some of the more common effects are listed below:

Constipation (cyclizine, aprepitant, ondansetron) - This can be relieved by drinking plenty of fluids, eating a high fibre diet and taking gentle exercise. Sometimes you may need to take laxatives to stimulate the bowel.

Headaches (ondansetron, cyclizine, aprepitant) - Let us know if you get headaches whilst having one of these drugs as part of your anti-emetic therapy.

Flushing of the skin (ondansetron, dexamethasone) - Can cause flushing or a warm sensation.

Tiredness (cyclizine, haloperidol, levopromazine, aprepitant, lorazepam) - May cause drowsiness in some people. It is important to allow yourself plenty of time to rest, especially if you are having chemotherapy or radiotherapy as part of your treatment.

Indigestion - Can be caused by dexamethasone. It may help to make sure that you always take the tablets with or after food.

Hiccups - Can be caused by aprepitant.

Wakefulness - Dexamethasone may make it difficult for you to go to sleep. This problem can be reduced by ensuring that you take your last dose of the day at 2pm.



Urinary tension, blurred vision and dry mouth can all be caused by cyclizine.

Things you might like to do for yourself

- Diet - prepare small meals and eat little and often
- Relaxation - use relaxation tapes
- Avoid fried foods, fatty foods or foods with a strong smell
- Eat cold or warm food if the smell of hot food makes you feel sick
- Eat several small snacks and meals each day and chew food well
- Peppermints or peppermint tea may help some people
- Sip drinks slowly
- Ginger biscuits or ginger beer
- Don't drink a lot just before you have something to eat

My anti-sickness therapy diary

How to use the diary

After you have taken each dose of your anti-sickness tablets, write down the time you took them and the dose you took.

If you experience any side effects or have any questions for your doctor or nurse, write them down in the 'notes' section provided.

Please see below for an example of how to fill in the diary for your anti-sickness regime.

Anti-sickness diary example

	Medication			Notes
	Dexamethasone	Damperidome	Cyclizine	
Day 1	Dose: 4mg Time: 8am, 12pm, 4pm	Dose: 10mg Time: 8am, 12pm, 4pm, 8pm		Feeling OK
Day 2	Dose: 4mg Time: 8am, 12pm, 4pm	Dose: 10mg Time: 8am, 12pm, 4pm, 8pm		Feeling nauseous
Day 3	Dose: 4mg Time: 8am, 12pm, 4pm	Dose: 10mg Time: 8am, 12pm, 4pm, 8pm		Vomited x 2 rang triage nurse
Day 4			Dose: 50mg Time: 8am, 2pm, 8pm	Feeling much better
Day 5			Dose: 50mg Time: 8am, 2pm, 8pm	Feeling much better



	Medication			Notes
Day 1				
Day 2				
Day 3				
Day 4				
Day 5				
Day 6				
Day 7				
Day 8				
Day 9				
Day 10				

	Medication			Notes
Day 1				
Day 2				
Day 3				
Day 4				
Day 5				
Day 6				
Day 7				
Day 8				
Day 9				
Day 10				



	Medication			Notes
Day 1				
Day 2				
Day 3				
Day 4				
Day 5				
Day 6				
Day 7				
Day 8				
Day 9				
Day 10				

How we produce our information

All of our leaflets are produced by staff at The Clatterbridge Cancer Centre and this information is not sponsored or influenced in any way. Every effort is made to ensure that the information included in this leaflet is accurate and complete and we hope that it will add to any professional advice you have had. All our leaflets are evidence based where appropriate and they are regularly reviewed and updated. If you are concerned about your health in any way, you should consult your healthcare team.

We rely on a number of sources to gather evidence for our information. All of our information is in line with accepted national or international guidelines where possible. Where no guidelines exist, we rely on other reliable sources such as systematic reviews, published clinical trials data or a consensus review of experts. We also use medical textbooks, journals and government publications.

References for this leaflet can be obtained by telephoning 0151 556 5570.

If you need this leaflet in large print, Braille, audio or different language, please call 0151 556 5570.

If you have a comment, concern, compliment or complaint, please call 0151 556 5203.

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