



Your A-Z of coping with nausea and vomiting

A guide for patients and their carers



Contents

| | |
|--|----|
| What is this guide about? | 3 |
| What causes nausea and vomiting? | 3 |
| Some common causes of nausea and vomiting | 3 |
| A guide to your anti-sickness medication | 5 |
| (Akinzeo®) Netupitant/Palonosetron | 6 |
| Aprepitant (Emend®) | 7 |
| Cyclizine (Valoid®) | 8 |
| Dexamethasone (Dexsol®, Martapan®). | 9 |
| Domperidone (Motilium®) | 11 |
| Fosaprepitant (IV EMEND®) | 12 |
| Granisetron patches (Sancuso®) | 13 |
| Haloperidol (Haldol®, Serenace®) | 14 |
| Levomepromazine (Nozinan®, Levinan®). | 15 |
| Lorazepam (Ativan®) | 16 |
| Metoclopramide (Maxolon®) | 17 |
| Olanzapine (Zyprexa®) | 18 |
| Ondansetron (Zofran®, Ondamet®). | 19 |
| Palonosetron (Aloxi®) | 21 |
| Prochlorperazine (Stemil®, Buccastem®) | 22 |
| Syringe drivers | 23 |
| What should I do if I feel sick? How can I help myself? | 23 |
| What should I do if I feel I'm not coping with the sickness? . . | 26 |

Christie website

For more information about The Christie and our services, please visit **www.christie.nhs.uk** or visit the cancer information centres at Withington, Oldham or Salford.

What is this guide about?

This guide has been written to help you understand more about nausea (feeling sick) and vomiting (being sick). It contains information you may find useful to help manage sickness.



What causes nausea and vomiting?

There can be many different causes of nausea and vomiting. Sometimes more than one cause is to blame, and often these are easily treated.

Some common causes of nausea and vomiting

Medicines

Nausea and vomiting may be a side effect of some of the medicines you are taking. Common types of medicines which can cause nausea and vomiting are:

- chemotherapy medicines (intravenous via a drip or taken by mouth)
- antibiotics
- painkillers such as morphine

Following radiotherapy treatment

- Treatments to the abdomen (stomach area), pelvis (groin area), back and head are the most likely to cause nausea and vomiting.

Bowel problems

Constipation or sluggish bowels can cause nausea and vomiting. Common causes of this include:

- Medicines – painkillers and anti-sickness medicines are examples of medicines that can cause constipation. Laxatives can be prescribed to prevent and to treat this.
- Problems caused by the cancer itself can affect the function of the bowels resulting in constipation.

Metabolic problems

Sometimes there can be a change in the balance of chemicals in the blood. This can lead to nausea or vomiting. A routine blood check will show up any abnormalities and these can often be treated.

Mouth problems

Common mouth problems (such as oral thrush or other infections) and sometimes thick sputum (phlegm) can lead to nausea. Often these can be easily treated with a simple course of medication.

Pain

Pain itself can lead to a feeling of nausea and even cause vomiting. Treating and managing the pain can help to improve both problems.

Anxiety

Anxiety is common in patients who are having treatment for cancer. It is a common cause of nausea and vomiting.

There are various treatments for anxiety including complementary therapies, psychological support and medication.

A guide to your anti-sickness medication

To prevent or treat sickness your doctor or nurse can prescribe anti-sickness medication.

Sometimes we advise you to take anti-sickness medication even if you are not feeling sick, as a preventative measure. It is often easier to prevent the sickness before it happens than it is to treat it when it is already there.

There are many different types of anti-sickness medications. They all work in different ways to help control nausea and vomiting. On the following pages there is an alphabetical list of anti-sickness medications that we may prescribe for you.

(Akynzeo®) Netupitant/Palonosetron

When do we use it?

Akynzeo® is a combination strong anti-sickness medication for patients having chemotherapy, which contains the medicines netupitant and palonosetron. It is not routinely used but may be prescribed in certain cases as advised by your oncology team. A single dose of Akynzeo® would be expected to have anti-sickness effects for up to 5 days.

How do I take it?

Akynzeo® is administered as a single oral dose within an hour prior to chemotherapy. You will be given the medicine by nursing staff when you attend for chemotherapy, and will be advised to swallow the capsule whole with a glass of water. You will not usually need any further dose of Akynzeo® during or after your chemotherapy as one capsule should be effective for each cycle of chemotherapy.

What are the main side effects?

The main side effect is constipation. Eating high fibre foods and drinking plenty of water may help.

If constipation becomes a problem, please mention to your doctor or nurse who may prescribe a suitable laxative. You may also experience headaches, hiccups, reduced appetite, fatigue or acid reflux (heartburn). Any side effects should stop within a few days of taking medication.

Can I take it with my other anti-sickness medicine?

Yes, it can be taken alongside your other anti-sickness medications. If you are also taking dexamethasone, your doctor may decide to reduce the dose of dexamethasone.

Aprepitant (Emend®)

When do we use it?

Aprepitant is used for moderate to severe sickness caused by chemotherapy. It is not routinely used but may be prescribed in certain cases as advised by your oncology team.

How do I take it?

Aprepitant is available as a single treatment pack.

You take the 125mg capsule about an hour before your chemotherapy starts. You then take an 80mg capsule the day after the chemotherapy and on the following day.

What are the main side effects?

Aprepitant may cause hiccups, diarrhoea, reduced appetite, fatigue or constipation. Some people also experience acid reflux (heartburn).

Can I take it with my other anti-sickness medications?

Yes, aprepitant is used in combination with your other anti-sickness medications. However, if you are also taking dexamethasone your doctor may decide to reduce the dose of dexamethasone.

Cyclizine (Valoid®)

When do we use it?

Cyclizine is commonly used to help treat sickness. It can also be prescribed for patients who are having chemotherapy or radiotherapy.

How do I take it?

Cyclizine is available as a 50mg tablet or as an injection. It is usually taken three times a day.

Some people need to take cyclizine regularly to help control their sickness, but most people take it as needed when they feel sick.

What are the main side effects?

The main side effect is drowsiness which may reduce after a few days of taking the tablets. Less commonly, you may have other side effects such as a dry mouth and constipation.

Can I take it with my other anti-sickness medications?

It can be taken alongside other anti-sickness medications. However, the combination of cyclizine with metoclopramide (or domperidone) should be avoided.

Cyclizine can make you feel drowsy. **If you are affected, do not drive.**

Dexamethasone (Dexsol[®], Martapan[®])

When do we use it?

Dexamethasone is a steroid. It can be used as an antisickness medication for people having chemotherapy. It is available as a tablet, liquid or injection. It is also available as an oral solution.

How do I take it?

Dexamethasone is available as a 0.5mg and 2mg tablet.

We may ask you to take up to four tablets at a time. It is usually prescribed once or twice a day to prevent sickness. The tablets should be taken with food as they can irritate your stomach.

You should take the dexamethasone tablets even if you are not feeling sick. If you are having difficulty swallowing the tablets, they can be safely crushed and dissolved in water – or a liquid is available.

The last dose of tablets should not be taken after 6:00pm as they can keep you awake.

- If you are prescribed your tablets twice a day, the best times to take them are in the morning with breakfast and at lunch-time.
- If you are prescribed your tablets three times a day, the best times to take them are at breakfast, lunch-time and between 3:00pm and 6:00pm with food.

Your doctor may prescribe additional medication to protect your stomach from the effects of the steroids. Some patients may have a reducing course of steroids or a longer course. Please follow any instructions given with these tablets.

If you are prescribed aprepitant you will often have a dose reduction of dexamethasone as the aprepitant can increase the levels of dexamethasone in the body.

Before starting chemotherapy treatment

We will usually give you an injection of dexamethasone before you have your chemotherapy.

After chemotherapy treatment

Treatment with dexamethasone will usually be given for 2 days following each chemotherapy treatment (in tablet form). If you have your chemotherapy in the morning you can take your prescribed dose of dexamethasone before 6:00pm if you want to. Otherwise wait until the following morning to start.

What are the main side effects?

The main side effects are indigestion, heartburn, restlessness and difficulty sleeping if taken after 6:00pm.

We will give you a patient information leaflet with dexamethasone. However, please remember that you are only prescribed a short course (for sickness) and most of the side effects listed in this leaflet apply to people taking dexamethasone for a **longer period of time** (more than 5 days).

If you have any concerns or are experiencing any side effects please talk to your doctor, nurse or pharmacist.

Can I take it with my other anti-sickness medications?

Yes, it can be taken alongside other anti-sickness medications.

Domperidone (Motilium®)

When do we use it?

Domperidone is commonly used to help treat sickness.

How do I take it?

Domperidone is available as a 10mg tablet, as a liquid or as a suppository.

Domperidone is usually taken three times a day, but your doctor or nurse may increase the frequency to four times a day.

Some people need to take domperidone regularly to help control their sickness, but most people take it as needed when they feel sick.

What are the main side effects?

Domperidone is usually well-tolerated. Occasionally it can cause stomach cramps and diarrhoea but this is uncommon. Very rarely, it causes a reaction which leads to muscle spasm and problems with co-ordination.

Can I take it with my other anti-sickness medications?

Yes, it can be taken with your other anti-sickness medication. However, domperidone is very similar to metoclopramide and cyclizine so these should not be taken together.

You can buy domperidone from a pharmacy if you run out or if you are feeling sick. But if you do feel sick, please contact the hospital for advice before taking domperidone.

If you develop symptoms such as feeling faint or dizzy, or you experience a fast heartbeat, please seek urgent medical attention. Either contact your GP or The Christie Hotline on **0161 446 3658**.

Fosaprepitant (IV EMEND®)

When do we use it?

Fosaprepitant is a strong anti-sickness medication for patients having chemotherapy. It is available as an injection. It is not routinely used but may be prescribed in certain cases as advised by your oncology team.

How do I take it?

You will usually have an injection of fosaprepitant before you have your chemotherapy. You will not usually need any further doses of fosaprepitant during or after your chemotherapy as one injection should be effective for each cycle of chemotherapy.

What are the main side effects?

Fosaprepitant may cause hiccoughs, diarrhoea, reduced appetite, fatigue or constipation. Some people may experience acid reflux (heartburn).

Can I take it with my other anti-sickness medicine?

Yes, fosaprepitant is used in combination with other anti-sickness medicines. However, if you're also taking dexamethasone your doctor may decide to reduce the dose of dexamethasone.

Granisetron patches (Sancuso®)

When do we use it?

Granisetron is a strong anti-sickness medication for patients having chemotherapy. It is available as a transdermal (skin) patch, and as a tablet or injection. It is not routinely used but may be prescribed in certain cases as advised by your oncology team.

How do I take it?

You will be advised to apply the granisetron patch to a clean, dry area of skin 24-48 hours before starting your chemotherapy. You should continue to wear the patch for at least 24 hours after completion of chemotherapy. The patch can be worn for up to 7 days depending on the duration of the chemotherapy.

What are the main side effects?

The main side effect is constipation. Eating high fibre foods and drinking plenty of water may help. If constipation becomes a problem, please mention it to your doctor or nurse who may prescribe a suitable laxative. Headaches have also been reported. Any side effects usually stop within a couple of days of removing the patch. If you do need to remove the patch early, you should contact your medical team as you may need additional anti-sickness medication.

Can I take it with my other anti-sickness medicine?

Yes, it can be taken alongside your other anti-sickness medications. However, it is not recommended that you take with other similar anti-sickness medications at the same time, such as ondansetron and palonosetron as this will increase your risk of developing side effects such as constipation.

Haloperidol (Haldol[®], Serenace[®])

When do we use it?

Haloperidol is used for moderate to severe sickness.

How do I take it?

Haloperidol is available as a 0.5mg capsule, 1.5mg, 5mg and 10mg tablet and as a liquid. It is also available as an injection.

It is usually taken once a day at bed-time to help control sickness, but your doctor may prescribe it more often.

What are the main side effects?

Side effects include drowsiness, agitation, difficulty sleeping and restlessness. Rarely, it causes a reaction which leads to muscle spasm and problems with co-ordination.

Can I take it with my other anti-sickness medications?

Yes, haloperidol can be used in combination with most other anti-sickness medications. However, it should not be taken with metoclopramide, domperidone or prochlorperazine (as this can cause problems with side effects).

Haloperidol can make you feel very drowsy. **If you are affected, do not drive.** The drowsiness can last for several hours so you may still feel sleepy into the following day. Avoid drinking alcohol when you are taking haloperidol.

Levomepromazine (Nozinan[®], Levinan[®])

When do we use it?

Levomepromazine can be used for moderate to severe sickness.

How do I take it?

Levomepromazine is available as a 6mg tablet (Levinan[®]), a 25mg tablet (Nozinan[®]) or as an injection (Nozinan[®]) It is usually taken 'as required', although some people need to take a dose regularly (up to four times a day) to help control their sickness.

What are the main side effects?

The main side effect is drowsiness. You may also have a dry mouth. Rarely, it causes a reaction which leads to muscle spasm and problems with co-ordination.

Can I take it with my other anti-sickness medications?

Yes, levomepromazine can be used in combination with most other anti-sickness medications. However, the combination of levomepromazine and haloperidol should be avoided.

Levomepromazine can make you feel very drowsy particularly if taken with alcohol. **If you are affected, do not drive.**

Levomepromazine 6mg tablets are available from The Christie Pharmacy. They are also available from your GP or local pharmacy but can take longer to obtain.

Lorazepam (Ativan®)

When do we use it?

Lorazepam can be used for people who can feel sick at the 'thought' of chemotherapy or radiotherapy (known as anticipatory sickness).

How do I take it?

Lorazepam is available as 1mg and 2.5mg tablets. The tablets are scored so you can take half a dose if needed. They can be taken by mouth or dissolved under the tongue. It is usually taken before any treatment or procedure. Lorazepam can be taken the night before, the morning of or an hour before the treatment starts.

What are the main side effects?

Lorazepam can cause light-headedness. You may also feel unsteady on your feet and your concentration may be affected for a short time.

Can I take it with my other anti-sickness medications?

Yes, you can take lorazepam in combination with your other anti-sickness medications.

Lorazepam can make you feel very drowsy. **If you are affected, do not drive.** Avoid taking with alcohol.

Metoclopramide (Maxolon®)

When do we use it?

Metoclopramide is commonly used to help treat sickness.

How do I take it?

Metoclopramide is available as a 10mg tablet, a liquid or as an injection.

Metoclopramide is usually taken three times a day. However, your doctor or nurse may increase this dose.

Some people need to take metoclopramide regularly to help control their sickness, but most people take it as needed when they feel sick.

What are the main side effects?

Metoclopramide is usually well-tolerated. Occasionally, it can cause stomach cramps and diarrhoea but this is uncommon. Rarely, it causes a reaction which leads to muscle spasm and problems with co-ordination.

Can I take it with my other anti-sickness medications?

Yes, it can be taken alongside other anti-sickness medications. However, you should avoid taking metoclopramide with cyclizine, haloperidol, levomepromazine and domperidone.

Olanzapine (Zyprexa®)

When do we use it?

Olanzapine can be used for moderate to severe sickness that hasn't responded to other anti-sickness medications.

How do I take it?

Olanzapine is available as a tablet, or as an orodispersible tablet, which dissolves directly in your mouth, so that it can be easily swallowed. You can also place the orodispersible tablet in a full glass or cup of water, orange juice, apple juice, milk or coffee, and stir. With some drinks, the mixture may change colour and possibly become cloudy. Drink it straight away.

Olanzapine may be taken once or twice daily. If you are advised to take it once daily, it is recommended to take it at bedtime to as it may make you feel sleepy. **If you are affected, do not drive. Avoid taking with alcohol.**

What are the main side effects?

Olanzapine is usually prescribed for a short course of treatment, but occasionally in severe cases, it may be recommended on a continuous basis.

The main side effect is drowsiness. You may also have a dry mouth. In the early stages of treatment, some people may feel dizzy or faint (with a slow heart rate), especially when getting up from a lying or sitting position. This will usually pass on its own but if it does not, tell your doctor or nurse. Olanzapine may also increase the levels of sugar in the blood and urine, so if you are diabetic, you will be advised to monitor your blood sugar levels carefully, and seek medical attention if you feel unwell.

Can I take it with my other anti-sickness medicine?

Yes, olanzapine can be used in combination with most other anti-sickness medications. However, the combination of levomepromazine and/or haloperidol should be avoided.

Ondansetron (Zofran[®], Ondamet[®])

When do we use it?

Ondansetron is a strong anti-sickness medication for patients having chemotherapy or radiotherapy.

Ondansetron with chemotherapy

You will usually have an injection of ondansetron before you have your chemotherapy.

We will advise you whether to take another dose before you go to bed on the day of your chemotherapy. We normally provide 2 days' supply (4 tablets). Take these twice daily until you have finished the course.

Take the ondansetron even if you are not feeling sick.

Ondansetron with radiotherapy

Radiotherapy to the stomach, abdomen, pelvis, back or brain can cause sickness. You can take a dose of ondansetron an hour before your radiotherapy to treat this.

You can take another tablet in the evening if you need to. However, one tablet daily is usually enough to control the sickness.

How do I take it?

Ondansetron is available as 4mg and 8mg tablets and as 4mg in 5ml syrup. It is taken once or twice a day (as described). It is also available as an oral melt and as a suppository.

What are the main side effects?

The main side effect is constipation. You may also have headaches. This will stop once you have finished the course. Eating high fibre foods and drinking plenty of water may help. If constipation becomes a problem, please mention it to your doctor or nurse who may prescribe a suitable laxative.

Can I take it with other anti-sickness medications?

Yes, it can be taken alongside your other anti-sickness medications. If you have been given a palonosetron injection with your chemotherapy then you will not need to have ondansetron.

Palonosetron (Aloxi®)

When do we use it?

Palonosetron is a strong anti-sickness medication for patients having chemotherapy.

Palonosetron with chemotherapy

You will usually have an injection of palonosetron before you have your chemotherapy. You will not usually need any further doses of palonosetron or ondansetron during or after your chemotherapy as one injection should be effective for each cycle of chemotherapy.

How do I take it?

Palonosetron is available as an injection and it is given as a single dose 30 minutes before chemotherapy.

What are the main side effects?

Palonosetron is often well-tolerated. Typical side effects may include a headache, constipation and dizziness.

Can I take it with my other anti-sickness medications?

Yes, it can be taken alongside your other anti-sickness medications. You should not take ondansetron after having a palonosetron injection.

Prochlorperazine (Stemil[®], Buccastem[®])

When do we use it?

Prochlorperazine may be used to help treat sickness.

How do I take it?

Prochlorperazine is available as a 5mg tablet or a 3mg buccal tablet (Buccastem[®]) which is placed high up between the upper lip and gum and left to dissolve.

There is also a 5mg/5ml liquid available and an injection. Prochlorperazine is usually taken two to three times a day, however, your doctor or nurse may increase this dose.

Some people need to take prochlorperazine regularly to help control their sickness, but most people take it as needed when they feel sick.

What are the main side effects?

Prochlorperazine is usually well-tolerated. It may cause a dry mouth. Rarely, it causes a reaction which leads to muscle spasm and problems with co-ordination. At higher doses it may cause photosensitivity, so you should avoid direct contact with sunlight. Taking prochlorperazine with alcohol and other sedative drugs may increase the risk of drowsiness.

Can I take it with my other anti-sickness medications?

Avoid taking prochlorperazine with metoclopramide, domperidone and haloperidol which have similar effects.

Syringe drivers

In some cases, anti-sickness medication is given via a small portable syringe pump called a syringe driver. Syringe drivers are sometimes used for 'difficult to control' sickness or in situations where there may be difficulties in swallowing anti-sickness medication. Syringe drivers can be used in hospital or at home.

What should I do if I feel sick? How can I help myself?

Feeling sick or being sick is unpleasant. The team of doctors and nurses looking after you will try to prevent you from feeling sick. If you do feel sick, here are some suggestions.

Advice about your diet

If you are feeling sick

- Try salty foods such as crisps, crackers or cheese cubes, dry foods such as biscuits, toast, plain cake or bland foods such as chicken.
- Some foods may make you feel worse such as greasy or fried foods, spicy foods and foods with a strong smell.
- Eat and drink slowly.
- Avoid the smell of food or cooking – cold foods usually smell less. Drinks are better sipped through a straw. Getting someone else to prepare food for you can also help.
- Ginger or peppermint tea can help to reduce the feeling of nausea.
- Try a little light exercise or fresh air before eating.



- Sit up to eat and don't lie down immediately afterwards.
- If possible, try not to go without food for too long – nibbling frequently may help to keep the sickness under control.

If you are being sick

- Keep taking fluids – cold, clear fluids such as squash or fruit juice. They are sometimes better sipped through a straw. Slightly fizzy drinks may be helpful. Aim for 6 to 8 drinks a day. If you are consistently unable to keep fluids down, please contact your Christie doctor or GP for advice.
- As the sickness starts to settle down, you can include nourishing milky drinks.
- Gradually move on to light meals and snacks.

For more information on eating when you are feeling unwell, please read the Christie booklet 'Eating – help yourself'.

Complementary therapy

Relaxation techniques and hypnotherapy may help to reduce feelings of nausea associated with chemotherapy. If given before treatment, they can help to prevent vomiting before starting chemotherapy or anticipatory sickness.



Some research studies have shown that Acupressure of Neiguan (p6), which uses a specially designed band applied to an area of the wrist, can reduce chemotherapy-associated nausea and vomiting.

At The Christie, we have nurse therapists and senior complementary therapists with training in medical acupuncture and hypnotherapy.

For further information please contact the complementary health and well-being team on **0161 446 8236**. Please note these treatments are not a substitute for standard conventional treatment and may not be suitable for all patients.

Herbal and homeopathic medicines

There are a number of herbal and homeopathic medicines that can help ease nausea and vomiting. These can generally be used alongside your other medicines. However, you **must** ask your hospital doctor, nurse or pharmacist before starting any herbal or homeopathic medicines as some can interfere with the treatment you are having at The Christie.

Homeopathic medicine

Homeopathic medicines are made from a range of substances such as flowers, plants, metals, poisons and minerals. A very small amount of the substance is used in order to initiate a healing response. Homeopathic medicines come in different strengths and formulations (tablets, creams and liquids). **It is important to seek advice from The Christie before you try homeopathic medicines.**

Herbal medicine

Herbal medicines are made from plants. They can be effective in the treatment of a wide range of illness and ailments. Herbal medicines come in various formulations such as tablets, creams and tinctures (teas). **Again, it is important to seek advice from The Christie before you take any herbal medicine and you must seek advice on how much you can safely take.**

Other useful tips:

- wear loose clothing
- stay calm/try to relax yourself
- move away from the sight/smell of food
- place a cold cloth on your face
- open the window/go outside for fresh air/turn on a fan
- distract yourself (read a magazine, watch TV/a film)

Tell your doctor or nurse that you had an episode of nausea/vomiting when you next attend the hospital. Bring your anti-sickness medication with you to the appointment.

What should I do if I feel I'm not coping with the sickness?

There are different ways of getting help.

If you are still feeling or being sick after taking your regular anti-sickness medication, you can get advice from:

Between 9:00 - 5:00pm

Your GP, Macmillan or district nurse, The Christie Pharmacy on **0161 446 3432**

After hours

The out-of-hours GP service (the phone number should be on your local GP's answerphone message) or The Christie Hotline on **0161 446 3658** (if you are a Christie patient).

If you need information in a different format, such as easy read, large print, BSL, braille, email, SMS text or other communication support, please tell your ward or clinic nurse.

The Christie is committed to producing high quality, evidence based information for patients. Our patient information adheres to the principles and quality statements of the Information Standard.

If you would like to have details about the sources used please contact the-christie.patient.information@nhs.net

Contact The Christie Hotline for
urgent support and specialist advice

The Christie Hotline: 0161 446 3658

Open 24 hours a day, 7 days a week

Visit the Cancer Information Centre

The Christie at Withington **0161 446 8100**

The Christie at Oldham **0161 918 7745**

The Christie at Salford **0161 918 7804**

Open Monday to Friday, 10am – 4pm.

Opening times can vary, please ring to check
before making a special journey.

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