Keeping Nausea Under Control

This handout contains information to help you control nausea and vomiting, and provides suggestions that will help you maintain good nutrition. If you have mouth sores and you are having a difficult time finding foods you can eat, please ask your doctor for a consult with a dietitian.

Most chemotherapy medicines cause nausea or vomiting within 24 hours of receiving the chemotherapy. Some chemotherapy drugs may cause nausea for a few days after the chemotherapy is completed. Your doctor may refer to this as “delayed” nausea and/or vomiting.

How and why do nausea and vomiting occur?

Nausea and vomiting are reactions to stress or to foreign substances in the body. The part of the brain that controls this reaction is known as the chemoreceptor trigger zone (CTZ). Chemicals released during treatment can stimulate the CTZ and cause nausea and/or vomiting.

Possible causes for nausea and vomiting in cancer patients are:

- Some chemotherapy drugs
- Radiation therapy to the abdomen
- Chronic unrelieved pain
- Blockage in the bowel
- Some medications
- Fatigue
- Fluid and mineral imbalances
- Changes in taste or smell
- Anesthesia

Remember that not all chemotherapy drugs cause nausea and vomiting. There are many chemotherapy drugs and many combinations of these drugs. Whether you have any nausea and/or vomiting with chemotherapy will depend upon the following factors:

- The type of chemotherapy drug you are taking
- Your dosage
- The way you are given the drug (for example, i.v. or pill)
- The time span used to give the drug (30 minute infusion or infusion lasting several days)

Your pharmacist has a list of all chemotherapy drugs with their side effects. Ask your pharmacist if nausea is a common side effect of your particular treatment plan.

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Nausea

Nausea is an uneasy, uncomfortable feeling in your stomach, which may or may not lead to vomiting or "throwing up."

Vomiting

Vomiting is throwing up the contents of the stomach through the mouth. It is not the same as coughing up drainage from the lungs or throat. "Retching" is the rhythmic tightening of the chest and stomach that goes along with vomiting. If no food is thrown up, this is called "dry retching" or "dry heaves."

What is anticipatory nausea and vomiting? Is it real or just in my mind?

Anticipatory Nausea and Vomiting, or ANV, is a conditioned, or learned response. For example, the nausea and vomiting that occur with a certain therapy may become linked with something else, such as the appearance of the hospital or a certain odor. That reminder or stimulus is then able to trigger ANV on its own. About one-third of the cancer patients who experience nausea develop ANV. It occurs more frequently among people who are young, highly anxious, prone to motion sickness, or taking treatment known to cause nausea. Medications can prevent this from occurring. Be sure to tell your doctor, nurse, or pharmacist if this occurs.

What medications are available to help control nausea and vomiting?

Ask your nurse, doctor, or pharmacist if your treatment commonly causes nausea and vomiting. If it does, ask your doctor to prescribe an antiemetic. Antiemetics are drugs that help control nausea and vomiting.

There are a number of effective antiemetics available to prevent or control chemotherapy-related nausea and vomiting. The best protection against chemotherapy-related nausea and vomiting is to prevent it by starting antiemetics **before** the chemotherapy is given and taking them for as long as the chemotherapy agent is likely to cause vomiting. Your doctor may prescribe an antiemetic to be taken 30 minutes to 1 hour before your chemotherapy starts. The antiemetic may be given by mouth or in the vein. You may need to bring the prescribed antiemetic with you to the clinic on the days you are scheduled to receive chemotherapy.

The doctor may also prescribe a different antiemetic to be used if you develop nausea after the chemotherapy has been given. You may be told to take this medicine around the clock or on an "only when needed" schedule.

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Different antiemetics work for different people. No one medicine controls nausea and vomiting 100% of the time, and it may be necessary to try more than one before you get relief. Do not give up. Tell your doctor, nurse, or pharmacist if you have nausea or vomiting so that they can help identify the medicines that work best for you. It is not unusual to take two or more different medicines to prevent or relieve nausea and vomiting.

It is important to know that some of these medicines may make you feel drowsy.

What should I eat on the day of chemotherapy treatment?

To decide what to eat on treatment days, you must find out what works best for you and eat what agrees with you. Appetite and interest in food can change from day to day. Since the body's first need is fluid, choose from the following:

- Fruit juice
- Jell-o®
- Popsicles®
- Lemonade
- Kool-aid®
- Water
- Soup
- Fruit punch
- Sports drinks

Adequate fluid intake is necessary to avoid dehydration. Try eating foods such as toast, crackers, salads, and fresh fruits (if allowed). These foods are light and easily digested.

What should I eat when I'm nauseated?

- Try eating toast, crackers, or other dry foods.
- Eat small, frequent meals (6-8) throughout the day. Tart foods such as lemonade or pickles (dill or sour) may be helpful.
- Beef jerky and salty foods may taste good.
- Your sense of smell may change during treatment. Cold and/or bland foods like sandwiches, fruit, cottage cheese, and ice cream offer good nutrition without a strong odor.
- Drink plenty of fluids such as water, ginger ale, sports drinks, fruit-flavored drinks made from dry mixes, frozen fruit bars on sticks, ice chips, and carbonated drinks. Gelatin desserts or ice cubes can be made from these fluids.
- Try sipping your beverage slowly through a straw.
- Do not force yourself to eat. It is all right to avoid eating for a short time (i.e., 2 days at most). If nausea continues to be a problem, tell your doctor or nurse.

What foods should I avoid?

- Avoid fatty and fried foods, because they are harder to digest. Foods high in fat will cause a feeling of fullness and possibly trigger nausea.
- Avoid spicy, highly seasoned foods. Eat bland foods instead.
- Avoid food with a strong odor, which may trigger nausea. Cold and/or bland foods have less aroma and may be easier to eat.
- Avoid your favorite foods when you are nauseated. It may be difficult to enjoy them later.

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Tips on Eating

Remember, nutrition is an important part of your treatment.

- Take your nausea medicine as you have been told.
- Avoid an empty stomach.
- Eat 6 to 8 small meals a day. Avoid overeating at one meal.
- Drink 8 to 12 eight-ounce glasses (2 to 3 liters) of non-alcoholic, non-caffeinated fluids each day. Drink liquids like water, fruit juice, and sports drinks. Eat popsicles, clear soups/broths, and flavored gelatin.
- Drink carbonated drinks such as cola or ginger ale to settle your stomach.
- Drink liquids between meals instead of with meals. This may help lessen queasiness.
- Remember to eat cold and/or bland foods if strong odors bother you.
- Try eating sour foods like lemons, pickles, or lemonade.
- Chew foods well and eat slowly.
- Swish out your mouth with water before and after meals.
- Nausea and vomiting are sometimes associated with poor bowel function. Adequate fiber contributes to good bowel function. High-fiber foods include whole grains, legumes, and raw vegetables.
- After you sleep or rest, eat dry foods, such as crackers, toast, dry cereals, or bread sticks before you become active.
- Medications can easily alter your sense of taste. Foods that are normally your favorites may taste differently. If a food does not taste right, try another food.

What else can I do to prevent nausea and vomiting?

- Take your anti-nausea drug 30 minutes to 1 hour before you eat.
- Avoid lying down flat immediately after eating. If you wish to rest, sit or recline with your head elevated for at least 30 - 60 minutes.
- Eat in an open area to avoid the smell of food.
- Apply a cold, wet rag to your forehead or throat.
- Before your treatment, remove dentures or retainers.
- Avoid unpleasant odors.
- If you have a bad taste in your mouth, try sucking on peppermint candy or lemon drops. Practice good mouth care. Avoid commercial mouthwashes because they contain alcohol and can dry your mouth.
- If you are coughing and gagging due to thick secretions and this triggers nausea and vomiting, talk to your doctor about cough medicine.
- Open a window to feel and smell the fresh air. Go for a walk. Wear loose-fitted clothing. Move slowly so your sense of balance will be maintained.
- Get plenty of rest. Try to take a nap during the times you feel nauseated.
- Focus your attention on music, handwork, crossword puzzles, games, TV, jigsaw puzzles, letter writing, or reading.
- Learn relaxation techniques to help you control nausea. Audiotapes and books are available through both the Patient Family Library (Main Building, Floor 1, near The Aquarium) and

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The Learning Centers (Main Building, Floor 4, near Elevator A or Mays Clinic, Floor 2, near The Tree Sculpture). Relaxation videos can be viewed in patient rooms through MDA-TV. Yoga, meditation, and other relaxation and stress management classes are offered through the Place…*of wellness*. To contact Place. . . *of wellness*, please call 713-794-4700.

- Ask about patient education classes and support groups.
- Ask your doctor for a consult with a dietitian for additional ideas.

If you have a question regarding the above, call your home or clinic nurse. If you have any other questions or problems call any of the following numbers:

Ambulatory Treatment Center (ATC)
713-792-2312

ATC Pharmacy
713-792-2367 or 713-792-2873

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