

Nausea and Vomiting

■ What are nausea and vomiting?

Nausea and vomiting are common side effects of cancer and its treatment. Nausea is feeling like you are going to vomit. Vomiting, or throwing up, is when the contents of your stomach come out of your mouth. Nausea and vomiting may happen before treatment, within 24 hours after treatment, or 2 or more days after treatment. Retching, also called dry heaving, is when your body tries to vomit but nothing comes up.

■ What causes nausea and vomiting?

Many types of chemotherapy can cause mild to severe nausea and vomiting. Having a history of motion sickness, anxiety, or being younger than 50 (especially for women) may increase your risk of having nausea and vomiting. Radiation therapy, especially to the brain, spinal cord, abdomen, and pelvis, may also cause nausea and vomiting.

People who receive total body radiation therapy have the highest risk. Other causes may include cancer that has spread to the brain; a blocked intestine, also called gastrointestinal obstruction; electrolyte imbalance, which is the loss of minerals such as potassium and sodium; an infection or bleeding in the stomach and intestines; heart disease; and other medications. Ask your doctor if you are at risk of nausea and vomiting and what can be done to avoid or manage these symptoms.



■ What are the risks of nausea and vomiting?

Mild nausea and vomiting can be uncomfortable. Usually it does not cause serious problems. Vomiting a lot and often is a problem. It can cause dehydration, electrolyte imbalance, weight loss, and depression. Severe vomiting can reopen surgical wounds, break bones, or create tears in the esophagus. This is the tube through which food passes from the throat to the stomach. This may lead some people to stop cancer treatment. It is important to tell your health care team if you are concerned about or experience nausea or vomiting so they can help you prevent or manage it. It's best to treat nausea and vomiting as early as possible to try to stop it from getting worse.

■ How are nausea and vomiting prevented and treated?

It is normal to be concerned about nausea and vomiting, but it may be helpful to know that there are several ways to prevent or relieve these side effects of cancer treatment. Nausea and vomiting can be prevented with medication for most people who are receiving cancer treatment. However, some people may still have nausea even if they are not vomiting. Medications to prevent nausea and vomiting should be taken as prescribed, even after treatment, because the risk of vomiting can continue for several days after treatment. It is important to take these medications to prevent nausea and vomiting from becoming severe. If this happens, it can be more difficult to manage severe nausea and vomiting. If you have nausea and vomiting, even if you are taking your medication as prescribed, tell your health care team. They can recommend other medications. Other options may help, such as distraction, relaxation, positive imagery, and acupuncture. Some herbal products, like ginger, may help with nausea. However, you should talk with your health care team before starting any of these other options. Also, if you feel very worried or anxious about your upcoming cancer treatment, be sure to let your health care providers know that, too.

■ What if nausea and vomiting don't stop or get worse?

If your nausea and vomiting does not stop or gets worse, talk with your health care team. The cause may need to be identified. If you cannot keep food or water in your body because of severe nausea and vomiting, it can lead to serious dehydration and electrolyte imbalance. Dehydration can lead to other health problems. It is important to talk to your health care team if your symptoms get worse.

Questions to ask the health care team

Regular communication is important in making informed decisions about your health care. It can be helpful to bring someone along to your appointments to take notes. Consider asking your health care team the following questions:

- ▶ Does my treatment carry a high risk of nausea and vomiting?
- ▶ If I am very nervous about my treatment, what can be done to help me?
- ▶ What can be done to prevent and manage nausea?
- ▶ What can be done to prevent vomiting?
- ▶ Are some medications preferred over others? Why?
- ▶ What are the instructions for taking these medications?
- ▶ What are the side effects of these medications?
- ▶ What are the costs of these medications?
- ▶ If I'm worried about managing the costs of these medications, who can help me?
- ▶ Are there options that can help me manage nausea and vomiting that don't involve medications?
- ▶ If nausea and vomiting doesn't stop or gets worse, who should I talk with? And how soon?
- ▶ If I have a question or problem, who should I call?

Find more information on nausea, vomiting, and other side effects at www.cancer.net/sideeffects. For a digital list of questions, download Cancer.Net's free mobile app at www.cancer.net/app.

Words to know

Acute nausea or vomiting: Occurs within 24 hours of starting cancer treatment.

Anticipatory nausea or vomiting: Occurs before cancer treatment is given.

Antiemetics: Drugs that prevent nausea or vomiting.

Chemotherapy: The use of drugs to destroy cancer cells.

Chronic nausea or vomiting: Occurs regularly over a long time, typically in people with advanced cancer.

Complementary or integrative medicine: Therapies used in addition to conventional, widely used therapies.

Dehydration: The loss of too much water from the body.

Delayed nausea or vomiting: Occurs more than 24 hours after starting cancer treatment.

Emesis: Vomiting or throwing up.

Palliative care: The relief of side effects, also called supportive care.

Radiation therapy: The use of high-energy x-rays or other particles to destroy cancer cells.

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