



## CONSULTANTS IN MEDICAL ONCOLOGY AND HEMATOLOGY, PC

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### NAUSEA MANAGEMENT

**Nausea:** There are several possible causes of nausea during your treatment. Most common cause is development of an underlying inflammation of the stomach (gastritis).  
**Goal:** minimize and control stomach (gastric) inflammation.

**Prevent** nausea by preventing gastritis: Take acid-reducing medications as prescribed:

- ✓ H2-blockers: Zantac or Pepcid
- ✓ Antacids: Maalox
- ✓ Proton-pump inhibitors: Prilosec, Prevacid, Aciphex, Nexium

**Treat** nausea PROMPTLY with Ativan 0.5 mg every 4 hours as needed.

Drink 6 to 8 glasses (8 ounces each) of clear liquid daily:

- ✓ Gatorade, broth, Jello, fruit juices, water ices, soda, ginger ale, 7-UP, peppermint or ginger tea

Eat frequent, small light meals per day and chew food well. Make schedule for eating and follow it.

Eat cool foods or dry bland foods, such as crackers, toast, cereals, pretzels, and ginger cookies.

Try to have others prepare your meals.

Rinse your mouth before and after eating to avoid sour taste. Suck on mints or hard candy.

Use relaxation techniques (meditation, deep breathing) and guided visual imagery.

**Avoid:** Fatty or fried or spicy foods.

Avoid odors that upset your stomach (cooking odors, perfume, smoke).

Avoid laying flat for at least 2 hours after meals.

Avoid alcohol on day of chemotherapy or when nauseated.

Intravenous fluids (IV) may be necessary if you are dehydrated.

#### WHEN TO CALL:

Please call if you are concerned - on any day -at any time- about any issue!

Please call EARLY if symptoms not controlled, so that office visit may be scheduled if needed.

Any bloody or coffee-ground appearing vomit or black Bowel Movements

Temperature above 100.4°

Vomiting

Abdominal pain, cramping, or swelling

Inability to eat or drink

Lightheadedness, dizziness, or weakness