

Patient presenting with **Nausea** and **Vomiting**



Over-the-counter conversations:

When responding to symptoms in the pharmacy, it is important to establish which medications a patient is taking. This is because:

- It could be a side effect to a medicine
- It could be a reason to stop a medicine
- It can influence the over-the-counter advice/treatments you can recommend

You may want to incorporate the following questions into your conversations:

- Do you take any medicines prescribed by your GP?
- Are you on any treatment in/from the hospital?
- What condition do you have hospital treatment for?

**IF A PATIENT IS ON CANCER TREATMENT OR TREATMENT FROM THE HOSPITAL,
ALWAYS REFER TO YOUR PHARMACIST FOR FURTHER ASSESSMENT AND ADVICE.**

The full Let's Communicate Cancer course is available by clicking [here](#)

Version 1: The information provided is in line current best practice guidance based on clinical practices March 2023. This guidance has been developed in line with the UKONS Acute Oncology Initial Management guidelines version 3

Patient presenting with Nausea and Vomiting



Pharmacist Intervention:

Assess the symptom

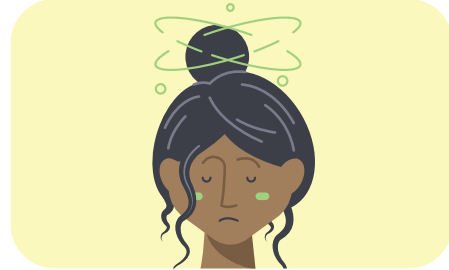
When assessing the patient's symptoms, it is important to try and address the following:

1. What type of cancer treatment they are receiving
 - Chemotherapy/Radiotherapy/Immunotherapy/Surgery
 - Route of administration - Oral/Injection/Infusion
2. Whether the symptom they are experiencing is a side effect that the hospital has made them aware of
 - Certain anti-cancer agents can cause more nausea/vomiting than others
3. Has the hospital provided any advice or medicines on how to manage this side effect
 - Some treatment regimes with highly emetogenic agents in them may send patients home with supportive anti-sickness medications to use either regularly or when required
 - Most common anti-sickness medications prescribed for cancer treatments are metoclopramide and dexamethasone, and sometimes ondansetron or cyclizine
4. The outcome of following this advice or supportive medications to try and manage the side effect
 - Has the patient accessed any anti-sickness medications already?
Which ones?
How often?
Any improvement in symptoms?
 - Has the patient followed the advice from the hospital regarding use of anti-sickness medications?
Are they taking them often enough?
Or at the doses prescribed?
 - If necessary, counsel patient on potential side effects of the anti-sickness tablets they have been given e.g. diarrhoea with metoclopramide and constipation with ondansetron/cyclizine

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Pharmacist Intervention (continued)

Assess the severity of the symptom

Ask patient about how long they have been feeling sick or how often they have been sick. Are they eating and drinking normally? Assess the severity (grade) of nausea/vomiting they are experiencing using the table below:

Grade	0	1	2	3	4
Change from normal?	None	Mild – able to eat/drink reasonably or 1-2 episodes of sickness in 24hrs	Moderate – able to eat/drink but intake is significantly reduced and/or 3-5 episodes of sickness in 24hrs	Severe – no oral intake or 6-10 episodes of sickness in 24hrs	No oral intake or >10 episodes of sickness in 24hrs
Action	OTC advice / treatment	OTC advice / treatment	OTC advice/ treatment and refer to cancer team if no improvement in next 24hrs	Referral to cancer team	Refer to the cancer team

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Advice and over the counter treatments which can be provided in the pharmacy **GRADE 0-1/GRADE 2**

- To reduce feeling of nausea, suggest patients take anti-sickness medications 30 to 60 minutes prior to meals
- Educate patients to maintain fluid intake (e.g. electrolyte replacement) and to report signs of dehydration including dizziness, reduced urine output and confusion. You could suggest using oral rehydration sachets to help with electrolyte replacement if tolerated
- Avoid alcohol and caffeine, fried food and foods with a strong smell
- Also, encourage smaller meals more often
- Peppermints, peppermint tea and ginger may help with nausea

When to refer cross sector primary/secondary care **GRADE 2/GRADE 3-4**

Advise patient to contact their hospital,

- If they cannot eat/drink anything at all
- If they are experiencing more than 6 episodes of vomiting in 24hrs
- If they have a temperature of 37.5°C or higher and/or they have chills, sweats, shivers or shakes
- If they have signs of dehydration e.g. light-headed, dizzy, confused, reduced urine output, headache, heart palpitations
- If they are on oral cancer tablets ask them to make contact with their cancer team as their medication may not be being absorbed and may require dose adjustment

How to refer cross sector primary/secondary care

- Clinical Nurse Specialist (CNS) in hospital cancer care team
- 24-hour hospital cancer treatment “hotline”

Additional Support

Comprehensive information regarding individual cancers, or cancer treatments, is available from the **Macmillan website**

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