

# Nutritional Guidelines for Symptom Management

## NAUSEA

**DEFINITION:** the sensation that often leads to the urge to vomit.

### POSSIBLE CAUSES

- Chemotherapy drugs
- Increased intracranial pressure
- G.I. obstruction
- Liver metastases
- Radiation to the brain or to the upper GI tract, nasopharynx.
- Gastric surgery
- Medications antibiotics, narcotics, antifungal agents
- Psychological factors such as anxiety, tension, nervousness (anticipatory nausea)
- Hypercalcemia or uremia
- Delayed gastric emptying

## NUTRITIONAL GOALS

- 1. To help prevent or relieve the discomfort of nausea through changes in food and or fluid intake and through the use of other management strategies.
- 2. To maintain optimal nutritional status despite nausea.

## STRATEGIES FOR NUTRITIONAL MANAGEMENT

- Eat small frequent meals or snacks to keep a small amount of solid food in the stomach.
- Sip fluids at frequent intervals separate from solid foods to help maintain hydration and settle stomach.
- Avoid food preparation as the smell of cooking may make symptoms worse.
- Try cold or room temperature foods as they may be better tolerated as they have less odor.
- Try not to eat favorite foods if nausea is anticipated as this may result in an aversion later.
- Avoid taking a multivitamin on an empty stomach.
- Avoid lying down immediately after meals. If this is unavoidable, keep head elevated.
- Try starchy foods may help settle the stomach.
- Try sour foods such as pickles or salt/vinegar flavored food.

• Rinse the mouth often throughout the day with a baking soda and water mouth rinse (1/4 tsp baking soda to 1 cup water), especially before and after meals or snacks.

#### **OTHER MANAGEMENT STRATEGIES**

- Antiemetic medications such as Gravol, Stemetil (prochlorperazine), Zofran (ondansetron), Decadron, (dexamethasone), Reglan (metoclopramide). Check that medications are taken as prescribed. The patient may need to be referred back to the physician if nausea is not controlled with current regime.
- Adjust environment e.g. fresh air, music, and darkened room.
- Try a cold face cloth on the face.
- Wear loose clothing at meal times.
- Sleep at times when nausea is anticipated.
- Sniff a fresh lemon.
- Try behavioral strategies such as relaxation, guided imagery or hypnosis (refer to Counseling Department as needed).
- Sip ginger tea.

#### PATIENT EDUCATION RESOURCES

- Food Choices to Help Control Nausea (BCCA) Available in English and Chinese. Useful for people who are experiencing nausea and/or vomiting, but still able to tolerate small amounts of fluids and foods.
- **High Energy, High Protein Ideas (BCCA)** Useful once nausea and vomiting have settled, for those who may require energy/protein dense foods to maximize intake.

#### REFERENCES

- 1. Nutritional Management of the Cancer Patient, Abby Bloch. 1990.
- 2. BCDNA Manual of Nutritional Care. Fourth Edition. 1992.
- 3. Current Cancer Therapeutics, John Kirkwood, First Edition. 1994.
- 4. Manual of Clinical Dietetics. American Dietetic Association and Dietitians of Canada. Sixth Edition. 2000.

Copyright© by BC Cancer Agency, Oncology Nutrition September 1996, revised August 2005

This information is not meant to replace the medical counsel of your doctor or individual consultation with a registered dietitian. This information may only be used in its entirety.