

Nausea and vomiting

Fact sheet

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Nausea is *feeling* as though you could vomit and can exist as a symptom in its own right, separate from vomiting.

Vomiting is the forceful, mostly involuntary, emptying of the stomach contents back through the mouth. Retching is a spasm like vomiting, but nothing comes up.

In most cases nausea and vomiting can be managed or relieved - you don't have to 'put up with' them.

Before you vomit you may become pale, have a cold sweat, produce extra saliva, have an increased heart rate and generally feel miserable. Vomiting can sometimes relieve the feeling of nausea.

Nausea and vomiting are two of the ways the body reacts to harmful substances, or to slowing down and blockages of the digestive system.

What causes nausea and vomiting?

There is a part of the brain known as the vomiting centre. It includes an area called the Chemo-receptor Trigger Zone (CTZ) which receives and reacts to messages sent from other parts of the body or brain.

These messages are usually chemical messages and come from:

- The stomach and intestines: because of an obstruction, pressure on the stomach, irritation or infection, or constipation.
- Many pain relieving medications have the effect of slowing the movement of food through the digestive system, causing bloating and constipation.
- The body: the CTZ centre detects imbalances and abnormalities in the bloodstream, such as high calcium, cancer by-products, or waste products due to kidney or liver failure; some medications; and treatments such as chemotherapy.
- The brain: because of increased pressure in the head due to tumour growth.
- The senses: sight, taste, smell, and pain.
- The emotions: being frightened or anxious, or exhausted.
- The inner ear: feeling dizzy, motion sickness - when the messages your brain receives from your eyes do not match those from the balance centre in your inner ear.

What can be done about it?

Nausea and vomiting are managed by treating the cause, or if the cause is not reversible, by using medication to alter the messages being sent to the vomiting centre in the brain, or by altering how the brain reacts to the message.

If you can't keep anti nausea medication down, it can be given in a different way. Sometimes it is better for the medication to be given

continuously through a fine needle under the skin, using a small battery operated pump called a syringe driver. There is rarely just one cause, so often more than one treatment or type of medication is needed.

Self Care: 'What can I do?'

While many of the causes of nausea and vomiting are outside your control, there are things you can do to help yourself feel better. These include:

- Taking anti-nausea medication regularly – it is much more effective than taking it occasionally.
- If you can't keep your anti nausea medication down, let your doctor or nurse know.
- Constipation is commonly associated with nausea. Talk to your nurse or doctor about laxatives to treat constipation and to help prevent it in the future.
- Try to get fresh air by opening a window, using a fan or going outside.
- A cool face-washer or compress to the forehead or back of the neck can help.
- Keep your mouth clean; brush or rinse your mouth at least twice a day, and after vomiting.
- Ginger can relieve nausea, in tea or in a crystallized form.
- An empty stomach is more prone to nausea than one with something in it. Try eating small amounts throughout the day.
- If the smell of food is making you feel sick, try eating cold foods. Ask someone else to cook for you if possible.
- After eating, sit upright, or have the head of the bed raised, and rest for about an hour to relieve any pressure on the stomach.
- Distract yourself: Listen to music, read or watch a video. Being totally involved in an activity can help to reduce the misery of chronic nausea.
- Make use of complementary therapies such as relaxation, hypnosis or meditation. Some people find acupuncture or acupressure helpful.

Help from the health care team

If you are feeling or being sick, it is very important that you tell your doctor or nurse.

The **doctor** will try to identify the cause, and spend some time matching the right medication with the right cause e.g. if pain is the cause the doctor will treat the pain.

Nurses can help you and the family manage medication on a day to day basis, monitor your condition, and liaise with the doctor.

The **social worker** can provide practical strategies to manage issues of concern, and offer support for the family if the nausea is caused by worry or anxiety.

Volunteers can often provide company and much needed distraction, as well as support and respite for family and carers.

Call the doctor or nurse if:

- there is any blood in the vomit;
- there is very frequent vomiting and you are unable to keep medications or food or liquids down;
- weakness, dizziness or confusion occurs;
- there is pain associated with the nausea and vomiting; or
- you have not had a bowel movement for more than 3 days.

Related Fact Sheets

Medicines for nausea and vomiting

Constipation

Laxatives in palliative care

CONTACT DETAILS

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