

# cancer NEWSLINE

>> Welcome to Cancer News Line, your source for news on cancer research, diagnosis, treatment, and prevention. I'm your host, Lisa Garvin. Alicia, we're going to talk about nausea today. How common is nausea in cancer patients?

>> You know, I think it depends on where they are in their treatment and what kind of treatment. Sometimes some of my patients receive chemotherapy that doesn't cause any nausea at all. There's different forms of nausea too, so I think that's important to understand. There's anticipatory nausea, nausea that patients experience just because they associate a smell, or a location, or even the same route to receiving a treatment. And then there's nausea that can be caused from the chemotherapy itself, or some of medications that they're taking. And then there's nausea that can be caused from side effects from other kinds of treatment, for example, radiation.

>> So, radiation can have nausea as a side effect.

>> It can. I work with a lot of head and neck patients right now and when they get radiated, a lot of times, their saliva gets really thick, and so it's not necessarily the radiation itself that causes nausea, but it's that thick saliva that causes them to feel nauseated.

>> Why is it important to control nausea?

>> Well, if you're nauseated, the last thing you want to do is eat and so -- and that can be a big challenge. It's really important when you're receiving treatment to maintain good nutrition status, to keep yourself strong, to keep yourself nourished, to hold onto that lean body mass. And when you feel nauseated, it's really challenging to drink enough to maintain hydration or receive enough calories or protein to keep you strong and help you as well as you can do treatment.

>> Are most healthcare teams pretty anticipatory about nausea? Are they proactive about controlling nausea?

>> Yes, they are here at MD Anderson. They always talk with their patients. They meet with their patients, see how their side effect management is going. If they are experiencing nausea, then they do try to understand what that's caused by because there's different kinds of nausea medications that can be prescribed.

>> And they're called antiemetics as a group, right?

>> Right, that's correct.

>> So, there's a range of medications available?

>> Right, and there's some that are just, you know, general nausea and then there's, you know, the big guns, the ones that control different parts of the body to help control the nausea.

>> Are there self-care methods that patients can use to help, you know, treat it -- for self-treatment?

>> As far as things that they can do for their diet or other things that they can do to help control nausea?

>> Yes.

>> Sometimes guided imagery is helpful. Our social work department and our integrated medicine department can help with that. Then there's also things that they can do as far as using ginger, you know, trying to keep themselves eating, keeping something in their system at all times, choosing the right kinds of food, usually bland, mild, dry foods are easier to tolerate if you are feeling nauseated. Sometimes with my patients, I recommend let's just start with water, let's just start with ice, and let's see if we can, you know, maintain hydration first. Let's try something with ginger in it and then, you know, start with something dry. And then as they feel more up to it, and then we encourage them to eat. I'd rather them eat than drink the nutritional supplements, that they can eat regular food and eat a normal amount, then I'd rather them get the nutrition from food. But if they are having challenges, you know, they can always do a smoothie or a shake to help meet those means.

>> I heard don't eat foods that you like while you're feeling sick because you will associate feeling sick with that food.

>> That is correct. I do have patients who are off of foods forever because they ate those foods during times when they felt nauseated and now they associate that food with the feeling of nausea and they never want it again.

>> Is nausea usually a short-term symptom for most people?

>> That's a good question. I think it's probably different for everyone. Sometimes, some certain treatments, I have some patients who are always kind of borderline nauseated. And then I have some that just kind of have a little bit and it probably just depends on the management. We have some patients that don't want to take medications and so, sometimes they don't. They're always going to be nauseated. But it's really been amazing, I've been working with cancer patients for 12 years and in this past 12 years, I've seen just an amazing amount of great new medications that help control nausea. So, I like to think that -- and I tell my patients that if you're nauseated, that means that we're not doing our job.

>> Great, thank you very much. For more information, visit [mdanderson.org](http://mdanderson.org). Thank you for listening to Cancer Newslines. Tune in for the next episode in our series.

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