

Article details



Title

Unscheduled hydrations: redefining complete response in chemotherapy-induced nausea and vomiting studies



Authors

Rudolph M Navari & Eric J. Roeland



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Chemotherapy-induced nausea and vomiting prevention

- There are numerous options for effective antiemetic prophylaxis; however, control of CINV remains suboptimal
- Patients who experience CINV may experience deterioration in their quality of life



Breakthrough CINV

- Breakthrough CINV is nausea and/or vomiting that occurs within 5 days of chemotherapy administration despite the use of guideline-directed prophylactic antiemetics
- Prevalence of breakthrough CINV is high (30-40%) and usually requires immediate treatment, or "rescue" medication



5 days



Managing breakthrough CINV

For breakthrough CINV treatment, antiemetic guidelines recommend including:



an antiemetic agent from a different class not used in prophylaxis



intravenous hydration



olanzapine

Hydration as part of a composite end point

Costs associated with breakthrough CINV can be substantial, including those related to:



emergency department visits



hospitalizations



unscheduled hydrations



Unscheduled hydrations, which require evaluation in the clinic, may provide an additional measure of CINV control and serve as a surrogate of associated healthcare utilization

Discussion

The addition of unscheduled hydration to no vomiting and no rescue antiemetic use could expand the definition of complete response to capture impact on healthcare utilization