

Nausea and Vomiting

Signs & Symptoms

Nausea and vomiting may be caused by:

- No bowel movement for more than two or three days.
- Medications, such as chemotherapy, antibiotics, aspirin, and many others; ask your nurse if the medications you are taking could cause nausea and vomiting.
- Damage to the stomach and intestinal lining from the disease process or treatments for the disease.
- Anxiety.
- Uncontrolled pain.
- Motion sickness (travel-related).
- Some infections.
- Constipation or diarrhea.
- Coughing—thick secretions and/or coughing may trigger vomiting.
- Some foods.
- Strong odors.

What can help prevent or relieve nausea and vomiting?

There is much you, your caregivers and your care team can do for nausea and vomiting. The team will always try to discover the underlying cause and discuss treatments with your health care provider. If you can control nausea, you can often prevent vomiting.

Here are some suggestions to prevent and control nausea:

Caregivers should provide small, frequent meals of foods chosen by the patient. Large meals can feel overwhelming.

Try foods such as:

- Toast and crackers.
- Sherbet.
- Pretzels.
- Angel food cake.
- Chicken without skin (baked or broiled).
- Fruits or vegetables that are soft or bland (potatoes, canned peaches).
- Ginger, herbal remedies.

- Carbonated drinks that have gone flat.
- Sports drinks (such as Gatorade®); with children use Pedialyte®.

Do not offer these foods:

- Fatty, greasy, or fried foods.
- Spicy, hot foods.
- Dairy products, such as milk or ice cream.
- Foods with strong odors.
- Citrus foods, such as oranges and grapefruit, and acidic juices, such as cranberry, grape and apple.
- Foods containing caffeine, such as coffee or chocolate.

You can also try these tips:

- Eat foods at room temperature or cooler. Hot foods may trigger nausea.
- Suck on ice chips or take frequent sips of a liquid such as ginger ale.
- Avoid drinking liquids with meals.

Caregivers should provide frequent mouth care for the patient.

- Avoid strong odors such as perfume and deodorizers.
- Maintain a comfortable room temperature.
- Avoid constipation.
- Choose a quiet, relaxing, pleasant atmosphere for meals. Avoid eating in a room that is stuffy, too warm or has cooking odors or other strong smells.
- Caregivers may need to avoid cooking strong-smelling foods in the patient's presence.
- Try relaxation techniques, such as deep, controlled breathing and focusing on pleasant thoughts.
- Don't force eating—even favorite foods—when nauseated. This may cause a permanent dislike of those foods.
- Rest after meals because activity may slow digestion. It is best to rest sitting up for about one to two hours after meals.
- If nausea is a problem in the morning, try eating dry toast or crackers before getting up. Keep a supply next to the bed.
- Wear loose-fitting clothes.
- Try to keep track of when nausea occurs and what causes it (specific foods, events, surroundings). If possible, make changes in diet or schedule. Share the information with your care team.
- Ask your doctor or nurse about specific medications to help control nausea.

Here are some suggestions for coping with vomiting:

- Caregivers: Turn the patient's head to the side to prevent choking.
- After vomiting, have the patient rinse the mouth out with water, brush their teeth and/or rinse the mouth with a mouth rinse.
- Place a damp, cool cloth on the forehead, neck, and wrists.
- Do not drink or eat until the vomiting has stopped.
- Once the vomiting has stopped, try small amounts of clear liquids (apple juice, bouillon, gelatin). If you are unable to tolerate any fluids, please call your nurse.
- Once clear liquids stay down, try non-clear liquids. Gradually work up to a regular diet. Your nurse can help with ideas and suggestions.

Notify your care team anytime you have questions or concerns about nausea and vomiting.