

Doncaster & Bassetlaw Medicines Formulary

Section 4.6 Drugs Used in Nausea and Vomiting

Cyclizine 50mg tablets
Cyclizine 50mg injection
Dexamethasone 8mg injection
Domperidone 10mg tablets
Domperidone 30mg suppositories
Droperidol 2.5mg injection
Haloperidol 1.5mg tablets
Haloperidol 5mg injection
Levomepromazine 25mg tablets
Levomepromazine 25mg injection
Metoclopramide 10mg tablets
Metoclopramide 10mg injection
Ondansetron 4mg and 8mg tablets
Ondansetron 4mg and 8mg injection
Prochlorperazine 5mg tablets
Prochlorperazine 3mg buccal tablets
Prochlorperazine 12.5mg injection

Drugs Used in Vertigo

Betahistine 8mg and 16mg tablets
Cinnarizine 15mg tablets

Approved by Drug and Therapeutics Committee: December 2018

Review Date: December 2021

Prescribing Guidance:

MHRA Drug Safety guidance is available relating to use of [metoclopramide](#) and [domperidone](#).

Drugs Used in Nausea and Vomiting (Anti-Emetics):

- See [Formulary Post-Operative Nausea and Vomiting Guidance](#) for an algorithm advising on management of nausea and vomiting (N&V) in surgical patients
- See [Palliative Care Formulary](#) for information on managing nausea and vomiting in terminal care
- For advice on management of N&V in pregnancy, contact Medicines Information (at DRI – extension 644325)
- Seek specialist advice for management of cytotoxic-induced nausea and vomiting (CINV)

KEY: [UL] Unlicensed Preparation; **Drug** – first line choice; **Drug** – hospital only; **Drug** – **Amber** (TLS), **Drug** – Red (TLS), see <http://medicinesmanagement.doncasterpct.nhs.uk/>

Nausea and Vomiting: for disease-associated or drug-induced nausea and vomiting, the choice of antiemetic depends on the cause:

- Cyclizine can be useful for bowel obstruction, constipation associated nausea, motion sickness, and vestibular disturbances. This drug should be avoided in patients with a history of substance misuse.
- Domperidone should be used first line for treatment of nausea in Parkinson's Disease (as it does not cross the blood brain barrier) and conditions in which promotion of gastric and small bowel motility is desirable. It is associated with less extrapyramidal side effects than metoclopramide and prochlorperazine.
- Metoclopramide is often not effective except at higher doses, when extrapyramidal side effects may become a problem. Due to the incidence of extrapyramidal side effects and dystonic reactions, it should not be used in patients under 20 years old. Metoclopramide is useful for nausea in conditions when promotion of gastric and small bowel motility is desirable.
- Prochlorperazine is not normally recommended in medical patients unless nausea and vomiting occurs secondary to vertigo. Extrapyramidal side effects and dystonic reactions may be a problem in young adults. It is more sedative and can cause dry mouth and has a shorter half life.
- Ondansetron may have a valuable role in the management of nausea and vomiting in patients receiving cytotoxics who are unable to tolerate, or whose nausea and vomiting is not controlled by other anti-emetics.
- Levomepromazine is a broad spectrum anti-emetic, normally only used in palliative care (due it being unlicensed in this indication). It is often used where other agents have been ineffective.

Combining Anti-emetics:

When combining antiemetics, it is rational to select combinations of anti-emetics which act on different receptors sites. Domperidone, Metoclopramide and Prochlorperazine are dopamine antagonists and should not be used in combination as this will only increase the incidence of side effects without improving efficacy. They can however be used with Cyclizine (antihistamine) and Ondansetron (5HT₃ antagonist) which have different modes of action (see table below)

	Dopamine D₂ antagonism	Histamine H₁ antagonism	Muscarinic ACh_m antagonism	Serotonin 5HT₃ antagonism	Serotonin 5HT₄ antagonism
Metoclopramide	++	-	-	+	++
Prochlorperazine	++	+	-	-	-
Levomepromazine	++	+++	-	-	-
Domperidone	++	-	-	-	-
Ondansetron	-	-	-	+++	-
Hyoscine	-	-	+++	-	-
Cyclizine	-	++	++	-	-

* Metoclopramide in higher doses (>=100mg) demonstrates 5-HT₃ receptor antagonism

Prescribing outside this formulary should only take place via a New Product Request