The Perugia Consensus On Nausea And Vomiting: Chemotherapy-Induced Delayed Emesis
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Objectives

1. Briefly describe the mechanisms of CT induced delayed emesis
2. Efficacy of standard therapy in delayed emesis
3. Efficacy of new drugs in delayed emesis
4. MASCC recommendations 2004

Delayed emesis has two components: early delayed and late delayed, which probably have different physiological basis. The early phase still has a serotonin mediated component, the late phase seems more driven by substance P/neurokinin-1. Cytotoxic agents induce various types of delayed emesis. Steroids, dopamine receptor antagonists and serotonin3 (5-HT3) receptor antagonists are proven to be efficacious in preventing delayed emesis. Neurokinin-1 receptor antagonists have added value. The MASCC Perugia 2004 consensus recommendations in this rea will be presented.

DELAYED EMESIS: AFTER ACUTE AND MODERATELY EMETOGENIC CHEMOTHERAPY

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Delayed emesis is a complex phenomenon with various physiologic determinants. It is dependent on the type of emetogenic agent. Most studies have centered on delayed emesis caused by cisplatin based chemotherapy, and the Perugia consensus will establish the respective roles of dexamethasone (the best studied corticosteroid), dopamine and 5HT3 receptor antagonists, as well as NK1 receptor antagonists. Excellent control of the acute phase is mandatory. Data on the incidence as well as on the efficacy of antiemetic
prophylaxis against delayed emesis induced by moderately emetogenic chemotherapy (MEC) are scanty. An overview of the literature has been done that showed the efficacy of dexamethasone in two of three randomized trials in MEC. Its optimal dose and duration of administration has not been defined. Instead, only one of four randomized studies showed a statistically significant efficacy of 5-HT3 antagonists (MEC). Finally, only weak evidences have been published on the efficacy of dopamine receptor antagonists. These data will be updated after ASCO 2004 and published by MASCC in its official Journal Supportive Care in Oncology

REFERENCES up to Early 2004


28.  Italian Multicenter study Group:  A double-blind randomized study comparing intramuscular (i.m.) granisetron with i.m. granisetron plus dexamethasone in the prevention of delayed emesis induced by cisplatin.  Anticancer drugs 5: 465-470, 1999.


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