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Titel des Beitrags:
Chemotherapy-Induced Nausea and Vomiting in the Treatment of Gastrointestinal Tumors and Secondary Prophylaxis with Aprepitant

Abstract:
Background: Chemotherapy-induced nausea and vomiting (CINV) belongs to the most feared side-effects of cancer treatment. Its incidence during chemotherapy of gastrointestinal tumors (GITs) with highly and moderately emetogenic regimens is not well documented. It is also unknown whether aprepitant, a neurokinin-1 receptor antagonist, can be used as secondary antiemetic prophylaxis in case of CINV during cycle 1. Patients and Methods: Patients with GITs who were treated with highly and moderately emetogenic chemotherapy received standard antiemetic prophylaxis including a 5-hydroxytryptamine-3 receptor antagonist and dexamethasone. In case of CINV > grade 1 (National Cancer Institute classification) during the first chemotherapy course, aprepitant was additionally administered with further cycles. Results: We screened 109 patients. 16 patients (15%) experienced acute and/or delayed CINV. Features associated with CINV were low-dose cisplatin-containing chemotherapy (15/16 patients), female gender (11/16 patients), abstinence to alcohol (11/16 patients) and former emesis gravidarum (11/16 patients). 11 patients who got further courses of the same chemotherapy received aprepitant. 7 are fully assessable for response. 5 of 7 patients had a complete protection from CINV (71%) and 1 patient had improved symptoms. Conclusions: In
the majority of cases, primary standard antiemetic prophylaxis provided adequate protection against CINV. In case of failure to primary prophylaxis, secondary prophylaxis with aprepitant showed a high efficacy against CINV.

Stichworte: Neurokinin-1 receptor; Chemotherapy-induced nausea and vomiting; Gastrointestinal tumors; Aprepitant

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