

Anti-Emetic Medications

Medication	CTZ			VC			Vestibular Input		Gut			Cortex	CB1	
	D2	5HT3	NK1	H1	Ach-m	5HT2	5HT3	H1	Ach-m	5HT3	5HT4	D2		GABA
haloperidol	■											■		
prochlorperazine	■			■	■			■	■			■		
chlorpromazine	■			■	■			■	■			■		
domperidone				■	■	■	■	■	■	■	■	■	■	
olanzapine	■	■		■	■	■	■	■	■	■	■	■	■	■
promethazine	■			■	■			■	■			■		
hyoscine/scopolamine				■	■			■	■					
glycopyrrolate				■	■			■	■					
diphenhydramine				■	■			■	■					
hydroxyzine	■			■	■			■	■					
meclizine				■	■			■	■					
ondansetron		■					■			■				
palonosetron		■					■			■				
granisetron		■					■			■				
aprepitant/fosaprepitant			■											
metoclopramide	■	■								■	■	■		
lorazepam													■	
dexamethasone													?	
marijuana/dronabinol														■
nabilone														■
trimethobenzamide	■				■				■			■		

Updated 6/2017, adapted work from Kshelle Lockman, PharmD

Antipsychotics	Class Side Effects: Prolonged Qtc, EPS side effects (akathisia, dystonic reactions) May treat EPS side effects with Benadryl or benztropine	
Haloperidol (Haldol) PO/IV/SL-soln	0.5-2mg q4-12h, titrate up to 5-20 mg/day (Max 100mg/d) PO = ~ ½ IV	Least sedative in class
Prochlorperazine (Compazine) PO/IV/PR*	5-10mg q6-8h : *25mg PR q12 (PR)	
Chlorpromazine (Thorazine) PO/IV	10-25mg q4-6, can titrate to 50mg q6h	Most sedative; Useful in palliative sedation
Olanzapine (Zyprexa) PO/SL	2.5-5mg q6-24h (Max 20mg/d)	Useful in breakthrough emesis and nausea (RTC[DB]-reglan vs olanz) ; May cause neutropenia; Useful if pt has insomnia/delirium
5HT3 Antagonists	Class Side Effects Qtc prolongation, constipation, headaches	
Ondansetron (Zofran) PO/IV/SL	4-8mg q4-8h, generally NTE 32mg/d (Max 16mg/dose)	Effective for preventing acute CINV, less effective for delayed CINV
Granisetron (Sancuso) IV/PO/patch*	1mg daily-BID : *3.1 mg/24 hr patch q7d	
Palonosetron (Aloxi) IV	0.25mg q24-48	Superior to other 5-HT3 antagonists for preventing acute and delayed CINV Not studied in chronic N/V
Anti-histaminics	Class Side Effects Anti-cholinergic side effects	
Promethazine (Phenergan) PO/IV/PR*	12.5-25mg q4-6 : 25mg q12*	Qtc prolongation
Diphenhydramine (Benadryl) PO/IV	12.5-50mg q4-6 (Max 400mg/day)	Dissociative effect known with IV
Hydroxyzine (Atarax) PO	25-50mg q6	
Meclizine (Antivert) PO	25-50mg q6	Comes in chew tab
Anti-cholinergics	Class Side Effects Anti-cholinergic side effects	
Scopolamine (Transderm Scop) patch	1.5 mg patch q72 hrs	Can be expensive in comparison to other anticholinergics, slow on/slow off
Glycopyrrrolate (Robinul) PO/IV	1-2mg BID/TID : *0.2mg q4-6h	Oral bioavailability ~3%, IV preferred
NK1 Antagonists	Class Side Effects Drug-drug interactions. Associated with higher rates of significant infections	
Aprepitant PO/ Fosaprepitant IV (Emond)	125 mg PO day 1, 80 mg on day 2 and 3 : 150 mg IV x1	protection from delayed CINV, no change w/ acute CINV; NI to standard regimen with 3-day oral aprepitant in randomized study
Prokinetics	Class Side Effects Qtc prolongation, diarrhea	
Metoclopramide (Reglan) PO/IV	5-40 mg q6h/qAC & qHS	Dose with Benadryl if >20 mg/dose; At low doses, pro-motility>>anti-emetic; Helpful in those with associated GERD sx
Erythromycin PO/IV	250mg (50mg IV) qAC or qHS	
Domperidone PO	10-20mg TID (Max 30mg/d)	Not available in US, helpful in gastroparesis
Cannabinoid	Class Side Effects Dysphoria, sedation, hallucinations	
Dronabinol (Marinol) PO	2.5-10mg BID	Approved for CINV
Nabilone (Cesamet) PO	1-2 mg BID	Not as effective as 5-HT3 antagonists
Miscellaneous		
Dexamethasone (Decadron) PO/IV	2-8mg daily-BID	Useful for bowel obstruction; Included in pre-chemotherapy regimens for prevention of CINV SEs Dysphoria, sedation, hallucinations
Lorazepam (Ativan) PO/IV	0.5-2mg q4-8h	Anticipatory nausea SEs sedation, worsening psychosis
Trimethobenzamide (Tigan) PO/IM*	300mg q6-8h : *200mg q6-8h	No Qtc prolongation SEs Anticholinergic side effects, EPS