

PREDICTIVE FACTORS FOR CHEMOTHERAPY-INDUCED NAUSEA IN PATIENTS WITH GYNECOLOGICAL CANCER

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Introduction and aim

Chemotherapy-Induced Nausea (CIN) is a distressing side effect for patients undergoing chemotherapy, which deeply affects their quality of life and everyday activities¹. Several treatment-related and patient-related factors may be involved in the expression of CIN². This study aims to identify predictive factors for nausea after the first chemotherapy infusion in a sample of women with gynecological cancer.

Method

One hundred and sixty-five patients (mean age = 58.23, SD = 13.19) treated for gynecological cancer at the San Raffaele Hospital completed the MASCC Antiemesis Tool (MAT)³ in order to register the presence of acute (within 24 hours) and delayed (24-72 hours) nausea after the first chemotherapy infusion. Socio-demographic and clinical characteristics that could represent risk factors for nausea were collected with an ad hoc questionnaire designed by the research team. Logistic regression analyses were performed to predict acute or delayed CIN; significance level was set at .05.

Results

Sixty-three (38.7%) patients experienced acute nausea after their first chemotherapy infusion; 46% (n=75) of the sample experienced delayed nausea. Neoadjuvant (vs. adjuvant) chemotherapy represents a protective factor for delayed CIN (OR=0.350; p=.033). Hyperemesis gravidarum and anticipatory nausea both represent risk factors for delayed nausea (OR=2.307, p=.026; OR=4.316; p=.004, respectively). No significant association was found with acute nausea.

Variables	N	n(%)
Acute nausea	163	63 (38.7%)
Delayed nausea	165	75 (46%)

Table 1. Frequency of acute and delayed nausea after the first chemotherapy infusion.

Variables	OR	p-value
Neoadjuvant (vs. adjuvant) chemotherapy	0.350	0.033
Hyperemesis gravidarum	2.307	0.026
Anticipatory nausea	4.316	0.004

Table 2. Logistic regression analyses for delayed nausea after the first chemotherapy infusion

Conclusions

Despite advancements in antiemetic therapy, results show that CIN still represents a common chemotherapy side-effect for women with gynecological cancer. Specific patient-related and treatment-related characteristics seem to influence the onset of delayed nausea after the first chemotherapy infusion. The knowledge of risk factors for CIN could help identify patients who are more vulnerable to this symptom and implement specific psychological and medical interventions in order to promote a better adjustment to the disease and its treatment.

References

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