

Nausea and vomiting

This issue's special feature, on which these questions are based, was commissioned from independent authors. The Life-long Learning scheme 2007 is supported by an educational grant from Martindale Specials but the company has no editorial input. The information in the box below should help readers to identify knowledge gaps and undertake continuing professional development. Readers are also invited to complete the questions overleaf to test their knowledge of the articles, and send their answers, together with a stamped and addressed C5 envelope, to:

Life-long Learning – Nausea
Hospital Pharmacist
1 Lambeth High Street
London SE1 7JN

Name: _____

RPSGB registration number: _____

Address: _____

Post code: _____



Entries must be received by 23 July 2007. Results will be returned with a certificate of completion.

Life-long Learning competition

This is the fifth set of questions of the 2007 Life-long Learning competition, sponsored by Martindale Specials.

The entrant who achieves the highest marks in this series of six exercises will win attendance at the European Association of Hospital Pharmacists annual congress, to be held in Maastricht, the Netherlands, in spring 2008. The congress is entitled "Hospital pharmacists: added value for health".

The best five scores from the six exercises in this series, which will run until July/August 2007, will be taken into consideration.

The runner-up will receive registration and travel expenses for the *Hospital Pharmacist* conference in 2008. Third and fourth place will receive Pharmaceutical Press vouchers or British Society for the History of Pharmacy china mugs.

Your name, address and scores will be held on a database for the purpose of awarding prizes. Should you not wish your details to be held in this way, please tick the box. If you do this, you will be sent a certificate, but you will be ineligible for a prize.

How to undertake continuing professional development

Identify knowledge gaps

- ◆ The different causes of vomiting and the potential complications if untreated
- ◆ The different modes of action of antiemetic drugs and their side effects

Act

- ◆ Read the articles in this issue
- ◆ Test your knowledge by answering the multiple-choice questions overleaf

Evaluate

- ◆ What have you learnt?
- ◆ How has it added value to your practice?
- ◆ What will you do now and how will this be achieved?

The feature on nausea and vomiting has been accredited by the College of Pharmacy Practice against the Royal Pharmaceutical Society's general and hospital practice areas of competence, which can be accessed via *Hospital Pharmacist* online (www.pjonline.com/links/hp)

Reading the feature and completing the questions will help readers to fulfil aspects of the following competency areas, depending on their area of practice and application of learning: G1, G5, G8, G9, HP1, HP2, HP4, HP5, HP10.

Completion of the questions entitles undergraduates to one point towards the

Professional Development Certificate, a joint initiative between the British Pharmaceutical Students' Association and the College.

The assistance of the College of Pharmacy Practice is acknowledged in producing the CPD elements of this month's special feature.

Further information on how hospital pharmacists are approaching the challenges of CPD can be found in articles in the February 2005 issue of *Hospital Pharmacist* (2005;12:65–72).



To answer the questions, tick either the True or False column

	True	False		True	False
1. During the vomiting process:			6. Drugs to treat nausea and vomiting:		
a) A decreased volume of air is drawn into the lungs			a) The effectiveness of antiemetics depends on the cause of emesis		
b) The epiglottis closes			b) It is easier to treat the symptoms of vomiting than nausea		
c) The external muscles of the anus contract			c) There are no licensed transdermal antiemetics in the UK		
d) The soft palate drops			d) Scopoderm has a rapid onset of action		
e) Abdominal pressure increases			e) A universal antiemetic has recently been developed		
2. Regarding the vomiting process:			7. Antihistamines and antimuscarinics:		
a) The vomiting centre is considered to be a distinct anatomical structure			a) Antihistamines are indicated for motion sickness		
b) The chemoreceptor trigger zone (CTZ) is considered to be a distinct anatomical structure			b) Antihistamines are used first-line for chemotherapy-induced vomiting		
c) Vomiting can be initiated by the stimulation of pain receptors in the genitourinary tract			c) Promethazine is contraindicated in children		
d) Vomiting can be initiated by inhibition of the CTZ			d) Scopolamine antagonises H ₁ receptors in the vomiting centre		
e) Vomiting can be initiated by the stimulation of intracranial pressure receptors			e) Scopolamine is the antiemetic of choice for patients with narrow angle glaucoma		
3. Regarding chemotherapy-induced vomiting:			8. Dopamine antagonists and benzamides:		
a) Pre-school aged children are particularly prone to the condition			a) Dopamine antagonists can cause extrapyramidal side effects		
b) Men are less likely to experience the condition than women			b) Metoclopramide is contraindicated in pregnancy		
c) Elderly people are particularly prone to the condition			c) Metoclopramide decreases gastric intestinal motility		
d) Patients with increased stress are more likely to experience the condition			d) Metoclopramide should not be used following bowel surgery		
e) Those who drink less than 10 units of alcohol a week are particularly prone to the condition			e) Domperidone is contraindicated in patients with Parkinson's disease because it exerts a central effect		
4. The following drugs are particularly likely to cause vomiting:			9. 5-HT₃-receptor antagonists:		
a) Carboplatin			a) Are the mainstay of treatment for chemotherapy induced nausea and vomiting (CINV)		
b) Sevoflurane			b) Have limited use because they are poorly tolerated		
c) Halothane			c) Are not recommended for use in delayed phase nausea and vomiting caused by highly emetogenic chemotherapy		
d) Etomidate			d) Palonosetron has demonstrated efficacy in delayed CINV		
e) Doxorubicin			e) Ondansetron has shown to be superior to granisetron in efficacy		
5. Nausea and vomiting during pregnancy:			10. Regarding other antiemetics:		
a) Is associated with giving birth to an underweight baby			a) Aprepitant can be used to prevent nausea and vomiting induced by highly emetogenic chemotherapy		
b) Affects the majority of women			b) The dose of dexamethasone should be doubled when administered with aprepitant		
c) Usually occurs during the third trimester			c) In CINV phenothiazines are mainly used for the management of breakthrough emesis		
d) Is likely to be associated with fatty liver if it happens during the early stages			d) Haloperidol is mainly used in palliative care for opioid-induced emesis		
e) Is known as hyperemesis gravidarum if it persists past week 20			e) Lorazepam may minimise anticipatory nausea and vomiting in chemotherapy patients		

Answers will appear in the September issue

