

ANTIEMETICS

Ondansetron

Selective serotonin (5-HT₃) receptor antagonists

Action:

- works by blocking action of **serotonin** - a natural substance that may cause N/V

Uses

- **prevent** nausea & vomiting caused by cancer chemotherapy, radiation therapy, & surgery → use **BEFORE** chemotherapy & before or with pain meds that cause nausea (30 mins before, repeat dose 4 hours after)

Nursing considerations

- * If given IV: must be **slowly** administered (over 15 mins)
- can be given orally in **sublingual** pill for pts with extreme nausea
- during chemo report of N/V: **STOP** chemo, flush, & adm ondansetron

Adverse effects:

- headache/dizziness*
- constipation
- weakness/tiredness
- chills
- may ↑ feelings of nausea in some patients

Priority side effect:
Torsades de Pointes (tachycardia)

Serious:

- irregular heartbeat
↳ may affect electrolyte imbalance esp those at risk of QT prolongation
- **serotonin syndrome**

Contraindications

- amorphine use
- QT prolongation
- liver impairment

Metoclopramide

GI Stimulants: **accelerates** gastric emptying by ↑ intestinal motility gets food out very quickly

Uses:

- **prevent** & reduce nausea & vomiting
- GERD/gastroesophagus

Nursing considerations

- adm 30 mins before each meal & before bed
- avoid activities that require alertness 2 hours after doses
- assess for hx of neurological disorders since drug may cross **blood brain barrier** & cause **extrapyramidal symptoms**

Adverse effects

- restlessness
- fatigue/drowsiness
- GI disturbances

Contraindications

- GI hemorrhage, obstruction, or perforation (**bleed in GI**)
- ↳ duodenal ulcer
- Parkinsons or other movement disorders
- seizure disorder
- hx of tardive dyskinesia or neuroleptic malignant syndrome

Serious:

- **extrapyramidal symptoms**:
↳ involuntary muscle movements (lip smacking, esp in older adults **blinking**)
- ↳ tardive dyskinesia*
- **neurological effects**
↳ anxiety, agitation
- QT prolongation

Potassium Chloride

Uses:

- prevent or treat low blood levels of K⁺ (hypokalemia)
- K⁺ levels can be low as a result of:
↳ disease from taking certain meds
↳ prolonged illness with **diarrhea** or **vomiting**

Nursing considerations

- always check K⁺ levels before giving
- administer with **full glass** of water & with **meals**
- IV **infusion** only; **never** IV push or IM
- educate to report all sources of K⁺ & **avoid** extra dietary K⁺

Adverse effects

- GI effects
- N/V
- abdominal discomfort

Contraindications

- hyperkalemia
- severe **renal** impairment
- Addison's disease
- potassium-sparing **diuretic**

Serious:

- overdose & accidental rapid infusion (hyperkalemia)
- uneven heartbeat
- muscle weakness or limp feeling
- severe stomach pain
- numbness/tingling in hands, feet or mouth