

# Drugs acting on the digestive system: Emetics

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# Definitions

- By now it is expected that you have gone through the video on physiology of vomiting.
- What is Emesis: Act of forceful expulsion of gastric contents through the mouth, sometimes the nose
- It is often preceded by nausea
- Is vomiting useful in any way? **Write down your answers.**
- We will first go through drugs that are used to induce emesis.

# Learning outcomes

By the end of this session, you should be able to:

- Classify emetics and give at least two examples
- Describe their mechanism of action
- List indications for emetics
- List adverse effects and contraindications
- Write appropriate prescription for an emetic

# Emetics

- Let us now explore drugs used to induce emesis.
- They are Required when an undesirable substance has been ingested
- **Classification** : it is based on point of action.
  1. Stimulants of CTZ: eg Apomorphine
  2. Irritants of gastric mucosa
    - a. mustard
    - b. sodium chloride
  3. Both CTZ stimulant and irritant effect: ipecacuanha, digitalis
  4. Olanzapine

# Apomorphine

- This is a dopamine agonist, used in management of parkinsonism.
- Produce vomiting in 5-10 minutes after administration
- Route- subcutaneous/IM, Dose- 2 to 4mg
- Metabolised in the liver.
- Apomorphine is a CNS depressant so **in which situation would it be contraindicated?**
- Vomiting is accompanied by sedation
- Large doses can cause restlessness, tremors

# Ipecacuanha

- This drug is commonly available as syrup, and is also known as ipecac syrup. **From which plant is it derived?**
- Dose- 15 to 20ml (adults) once which may be repeated once with 15ml if vomiting doesn't occur within 20 minutes.
- Induces vomiting within 15 minutes
- It is considered safer than apomorphine
- If vomiting is not induced, there may be significant systemic absorption

## Ipecacuanha cont.

- Side effects include prolonged vomiting, aspiration, CNS depression,

# Mustard and sodium chloride

- Mustard is a household remedy to induce vomiting
- Dose- 1teaspoonful with water
- It is considered safe
- Sodium chloride
- A high concentration of Sodium chloride is usually used.
- It withdraws fluid from the cells lining the stomach, causes irritation and reflex emesis



# Uses/indications of emetic drugs

- Acute cases of poisoning except
  - in corrosive substances poisoning
  - if patient is not fully conscious
- Alcoholic intoxication
- Removal of foreign bodies from the oesophagus
- Certain cases of paroxysmal tachycardia

# Contraindications to emetic drugs

- Poisoning from the following substances:
  - Corrosive (acid/alkali) poisoning
  - Kerosene (petroleum) poisoning
  - Unconscious patients
  - Morphine (and CNS stimulants) poisoning
- Medical conditions:
  - Hernias
  - Aneurysm
  - Severe heart diseases
  - Peptic ulcer
  - Pulmonary TB
  - Prolapse of rectum or uterus
  - Threatened abortion
  - Weak / debilitated persons

# Summary

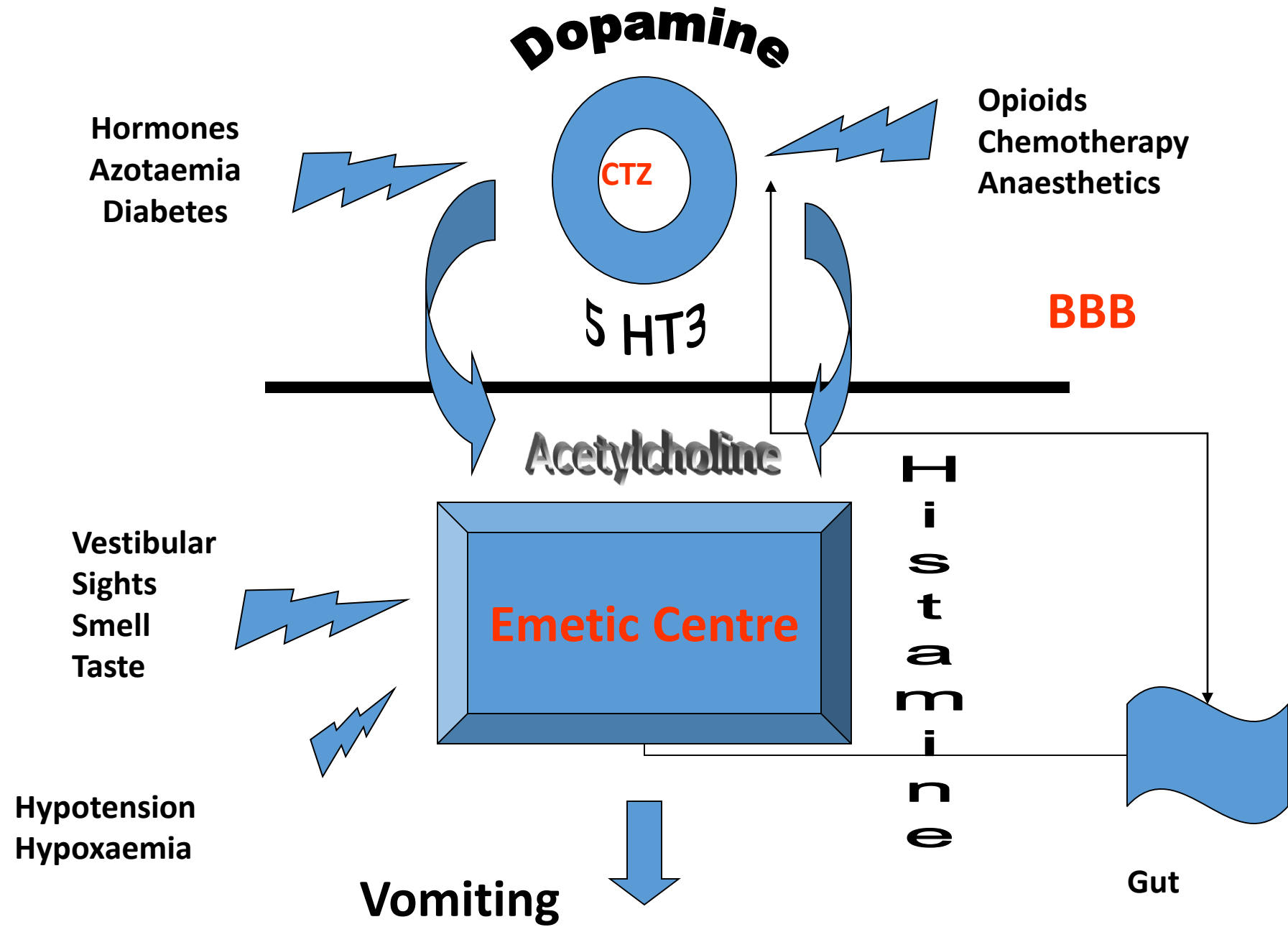
- This marks the end of the session on emetic drugs. We set out to:
  - Classify emetics and give at least two examples
  - Describe their mechanism of action
  - List indications for emetics
  - List adverse effects and contraindications
- Take a minute or two to go over these outcomes and identify any area where you still need help.

# Drugs acting on the digestive system: Anti-emetics

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# Introduction

- We will now go through drugs that are used to prevent and/or stop emesis. By the end of this session, you should be able to:
  1. Classify antiemetics and give at least two examples
  2. Describe their mechanism of action
  3. List indications for antiemetics
  4. List adverse effects and contraindications
- Before we move on, remind yourself the neurotransmitters that are involved in the vomiting process. They form the background to antiemetic mechanism of action



# Pause

- Vomiting may also occur in absence of an infection or direct stimulus like smell. **Name any of these situations**, also referred to as Irrational reflexes
- We pause here to remind us that many drugs can cause emesis as a side effect. **List** some of the ones you have come across in your earlier sessions.
- Remember there are drugs that cause serious vomiting; patients on these drugs often require antiemetics. This is the content of this session
- Some of the drugs we are going to discuss are used for prophylaxis while others are more useful in treatment.

# Classification of antiemetics

1. Dopamine antagonists
2. Serotonin 5HT<sub>3</sub> antagonists
3. Anticholinergics
4. Antihistamines
5. Neurokinin antagonists
6. Others



# 1. Anti-dopaminergic agents

- Examples include Chlorpromazine and Droperidol  
identify three more examples
- **MoA:** antagonism of dopamine, D<sub>2</sub> receptors
- PO, IV, IM; liver metabolism, renal excretion
- **Use:** used to treat and prevent nausea and vomiting  
Post operative vomiting, radiation vomiting, drug induced (cancer), emergency anaesthesia

# 1. Anti-dopaminergic agents cont.

- **List the side effects of these agents**

## 2. Serotonin 5HT<sub>3</sub> antagonists

- They tend to end with 'setron' Examples: Ondansetron, Granisetron.
- These block serotonergic receptors at vomiting centre, CTZ, vagal stimulation may also occur
- Available as per oral preparations, as well as IV especially prior to chemotherapy sessions
- Metabolised in the liver and excretion is renal and hepatic
- Uses: Post operative, chemotherapy, post radiation vomiting. They are not useful in motion sickness. **Why is this?**
- Side effects include headache and dizziness, constipation and diarrhoea

### 3. Anticholinergics

- **What drugs are found in this class and used as antiemetics?**
- **MoA:** antimuscarinic action in gut and centrally
- Preparations: PO, IM, patch
- **Use:** motion sickness-single dose for short journeys; vertigo and nausea post middle ear surgery
- **SE:** drowsiness, dry mouth, urinary retention

## 4. Antihistamines

- Example: Promethazine, cyclizine , Meclizine
- H1 receptor antagonists are particularly effective at treating nausea and vomiting whose cause is motion sickness or vertigo.
- They are also useful in post operative and drug-induced nausea and vomiting
- SE: Sedation; anticholinergic effects – dry throat, dry mouth, constipation; headache,
- Note that promethazine is an antipsychotic with antihistamine activities

## 4. Antihistamines cont.

- Contraindications
- benign prostatic hypertrophy
- With other sedating drugs
- Patients using antipsychotic drugs

## 5. Neurokinin antagonists

- eg: Aprepitant, rolapitant
- Centrally acting, block the NK<sub>1</sub> receptors
- **Use:** in combination with 5-HT<sub>3</sub>-receptor blockers and corticosteroids for the prevention of acute and delayed nausea and vomiting (especially during cancer therapy)
- Side effect: Fatigue / weakness, Neutropenia, Constipation, Itch, Dizziness, Headache, Liver enzyme elevation

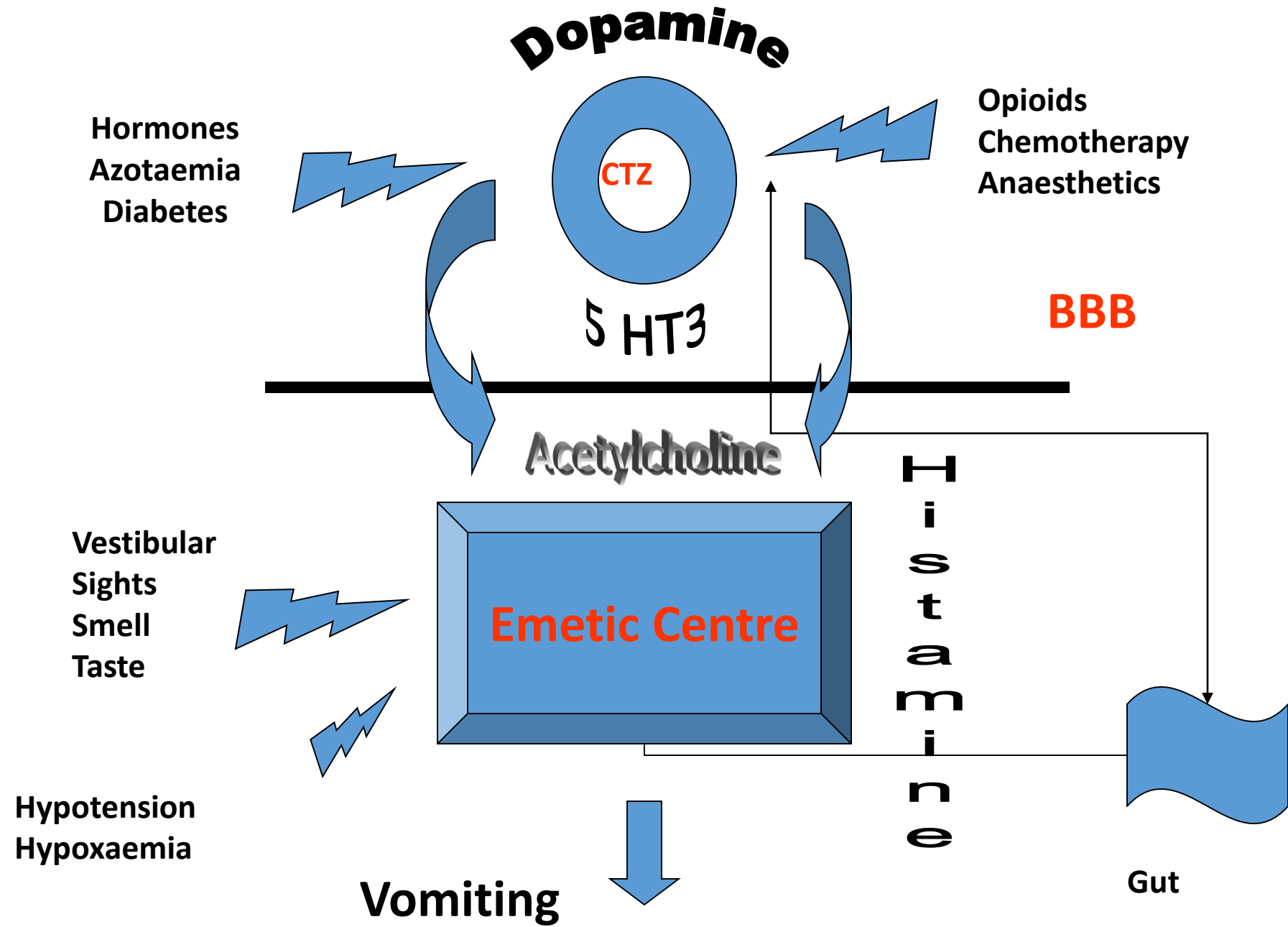
## 6. Others

- The drugs in this category are mainly used in other conditions but have antiemetic properties that are clinically useful.
- A. Glucocorticoids: dexamethasone, methylprednisolone
  - Use: cytotoxics, together with 5HT3 antagonists
- b. Benzodiazepines: eg diazepam. These are especially useful in nausea and vomiting caused by the patient's belief that they may be sick
  - Also used before cytotoxics



# Anti-emetic agents: Choice

- Postoperative
- Chemotherapy
- Travel sickness
- Parkinson's disease (especially apomorphine)
- Pregnancy



# General notes

- Symptomatic relief could delay diagnosis of a critical illness
- Antiemetic drugs are generally more effective in prophylaxis than treatment
- Cause should be diagnosed and managed accordingly
- Choice of drug depends on aetiology
- Nausea and vomiting in pregnancy: rarely use drugs coz of possible dangers

# Conclusion

- That is the end of this session. Test yourself to see if you can:
  1. Classify antiemetics and give at least four examples
  2. Describe their mechanism of action
  3. List indications for antiemetics
  4. List adverse effects and contraindications
- To aid your revision, do the assignment in the main page on the portal