Variations in Self-Reported Nausea, Vomiting, and Well-Being During the First 10 Days Postchemotherapy in Women With Breast Cancer

Delmy Oliva, RN, MSc, Anna Sandgren, RN, PhD, Mats Nilsson, PhD, and Freddi Lewin, MD, PhD

Women with breast cancer undergoing chemotherapy experience nausea and vomiting, both common symptoms affecting quality of life. The aim of the current study was to describe how nausea, vomiting, and well-being vary during the first 10 days after chemotherapy in women with breast cancer. A pilot study with a repeated-measurements design was conducted at a Swedish county hospital where 39 women with breast cancer treated with adjuvant chemotherapy were observed. A structured 10-day diary was used for data collection. Of the 39 women in the study, 33 experienced nausea and 6 also experienced vomiting after chemotherapy. Changes in well-being as a result of nausea or vomiting during any part of the day, as well as distress for other reasons, were reported. Well-being also varied among the individuals. The pattern of change in experienced levels of well-being was not homogeneous, nor did it move in any certain direction. The results of this study show that an individualized treatment approach is required to better meet individual women’s needs.

Key words: breast cancer; chemotherapy; nausea; vomiting; well-being

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Delmy Oliva, RN, MSc, is a nurse in the Department of Oncology at Ryhov County Hospital; Anna Sandgren, RN, PhD, is a senior lecturer in the School of Health Sciences at Jönköping University; Mats Nilsson, PhD, is an epidemiologist and statistician at Futurum—the Academy for Healthcare, Jönköping County Council; and Freddi Lewin, MD, PhD, is an associate professor and the head of the Department of Oncology at Ryhov County Hospital, all in Jönköping, Sweden. The authors take full responsibility for the content of this article. The study was supported, in part, by the Cancer Foundation of the county of Jönköping and Futurum—the Academy for Healthcare, Jönköping County Council. The content of this article has been reviewed by independent peer reviewers to ensure that it is balanced, objective, and free from commercial bias. No financial relationships relevant to the content of this article have been disclosed by the independent peer reviewers or editorial staff. Oliva can be reached at delmy.oliva@lj.se, with copy to editor at CJONEditor@ons.org. (Submitted June 2013. Revision submitted July 2013. Accepted for publication August 8, 2013.)

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Breast cancer is the most common form of cancer and a common cause of death among women worldwide (Bray, McCarron, & Parkin, 2004; Shih, Wan, & Chan, 2009). In Sweden, the median age at diagnosis is 64 years and less than five percent of those diagnosed are younger than 40 years (Bergman, Jaresand, & Johansson, 2010). Common treatments include surgery, endocrine treatment, antibodies, chemotherapy, and radiation therapy (Abeloff et al., 2008). Chemotherapy and radiotherapy often are associated with varying degrees of side effects. The most common acute side effects related to chemotherapy are nausea, vomiting, and decreased production of white blood cells (Hassan & Yusoff, 2010). On occasion, those side effects interrupt the implementation of the treatment and can be triggered by underlying symptoms of anxiety, depression, and poor adherence to prescribed antiemetics, which may have cumulative effects on the incidence and severity of nausea and vomiting. That also can negatively affect the social perspective and, therefore, women’s well-being. Women receiving chemotherapy can experience stress if their personal economy is affected, and the whole family often is involved in the treatment. In addition, nausea and vomiting related to chemotherapy can lead to anorexia, metabolic problems, gastritis, and problems with the esophagus. Those effects can, in turn, impair cognitive and physical status and lead to isolation; in addition, they are particularly harmful to the patient’s quality of life during treatment (Hesketh, 2005; Hilarius et al., 2012; Molassiotis, Stricker, Eaby, Velders, & Coventry, 2008).

Different degrees of nausea and vomiting can be triggered depending on which type of chemotherapy is being used (Hesketh, 2005). Nausea and vomiting can be acute, delayed, or conditioned (Hilarius et al., 2012; Molassiotis et al., 2008). The intensity and frequency of chemotherapy-related nausea and vomiting are helpful signs to determine how serious these side effects are (Badger, Braden, & Mishel, 2001). The absence of disease is important for health-related quality of life, but the feeling