

# Chemotherapy induced nausea and vomiting in bone marrow transplant: the unmet need

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Received: 12 February 2015 / Accepted: 16 March 2015 / Published online: 28 March 2015  
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Dear Editor,

We have read with great interest the paper by Van Laar ES and colleagues entitled “Professional educational needs for chemotherapy-induced nausea and vomiting (CINV): multinational survey results from 2388 health care providers.” [1]. We strongly agree that surveys are paramount to detect health care providers needs and plan interventions. However, we would like to highlight a criticism on the results of the survey on the specific concern of CINV management in patients undergoing bone marrow transplant (BMT). This topic is not specifically discussed in the paper. In table 4, when survey results among hematologists/oncologists are reported topic by topic, the second lowest percentage of “strong agreement” and the highest percentage of “disagreement” in the judgment of physicians, with nurse judgment just barely better, are reported for the issue “Prevent/manage CINV in patients undergoing bone marrow transplant.”

It is our opinion that interviewers were not particularly expert in the field of BMT with a low educational need on CINV management in this setting. Indeed, CINV management in BMT is complex [2], knowledge of health care providers is limited, adherence to guidelines is low [3], and moreover, the strength of guidelines recommendations for CINV manage-

ment in high-dose chemotherapy is weak, when compared with recommendations for CINV in standard-dose chemotherapy [4]; consequently, contrary to what the reader might deduce, we strongly believe that health care providers need in the field of BMT is high, so that, in order to verify our opinion, we suggest to disseminate the same survey to physicians and nurses operating in this field.

**Conflict of interest** All authors disclose any financial and personal relationships that could inappropriately influence their work. Authors have full control of all primary data and agree to allow the journal to review their data if requested.

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