Reply to: Adherence to recommendation for chemotherapy-induced nausea and vomiting prophylaxis: the proposal of a score

Henning Burmeister

Received: 3 July 2012 / Accepted: 16 October 2012 / Published online: 10 November 2012
© Springer-Verlag Berlin Heidelberg 2012

We thank Andrea Tendas and his colleagues for their interest in our findings. We probably all agree that chemotherapy-induced nausea and vomiting (CINV) remain a persistent problem in the management of our patients. Particularly underdosing of antiemetic agents seems to be more serious than overdosing in managing our patients. It is remarkable that adherence to antiemetic guidelines has not changed much in the last decade. We still observe an underdosing in high emetogenic regimes and overdosing in moderate, low, and minimal emetogenic potential groups, especially regarding delayed nausea and emesis. Our study shows the difficulties to implement recommended prophylaxis in our daily practice; the results are however limited by its single center and retrospective design. Further studies assessing

systematic evaluations of treatment outcome for prevention of CINV are strongly required. The article of Mertens et al. shows nicely that practice was changed among others when the prescribing physicians saw the results. The score proposed by Tendas could be an interesting tool to improve adherence. The evaluation of side effects however will be challenging because cancer or chemotherapy itself can induce similar symptoms. Therefore, we encourage the Italian colleagues to use the score which they have developed in the setting of a prospective study.

Conflict of interest The author declare no conflicts of interest.

H. Burmeister (✉)
Spital Thun,
Onkologie Krankenhausstrasse 12,
3600 Thun, Switzerland
e-mail: henning.burmeister@spitalstsag.ch