

New research shows promise in treating cancer-related anorexia

June 5 2008

A new study by Rudolph M. Navari, director of the University of Notre Dame's Walther Cancer Center, reveals that a novel combination of two drugs shows great promise in treating cancer-related anorexia (CRA) and weight loss.

CRA and weight loss are major clinical problems found in 70 percent of patients with advanced cancers.

In previous studies Navari and his research team have shown that the drug olanzapine was highly effective in controlling chemotherapy's most common side effects.

Olanzapine, which carries the brand name Zyprexa, has been used since the 1990s to treat schizophrenia and other psychoses. In early studies, Navari and his researchers found that when olanzapine was added to corticosteroids and other antiemetics historically used to treat chemotherapy-induced nausea and vomiting, there was essentially no nausea or vomiting in the 24-hour period following treatment. The drug also prevented nausea and vomiting during the week after chemotherapy if it was given daily for two to five days.

Use of the drug megestrol acetate (MA) has resulted in weight gain in some CRA patients, but has been less effective in improving appetite and quality of life.

In the new study, Navari and Marie C. Brenner, a May Notre Dame

graduate who will attend Loyola University Medical School in Chicago, sought to determine if a combination of olanzapine and MA could serve as an effective treatment for CRA.

A group of patients with advanced gastrointestinal or lung cancer was randomly selected to receive either MA alone, or a combination of olanzapine and MA. The patients were evaluated at four weeks and eight weeks and the results showed that patients receiving MA plus olanzapine had significant improvements in weight gain, appetite, nausea and quality of life measures. Patients receiving the MA alone experienced weight gain, but there was no significant change in appetite, nausea or quality of life measures, suggesting that the combination of olanzapine and MA appears to be an effective intervention for patients with CRA.

Navari and Brenner reported their findings at a May 31 meeting of the American Society of Clinical Oncology in Chicago.

Source: University of Notre Dame

Citation: New research shows promise in treating cancer-related anorexia (2008, June 5)
retrieved 6 May 2024 from

<https://medicalxpress.com/news/2008-06-cancer-related-anorexia.html>

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