

Anti-nausea drug may help some cancer patients survive longer

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Patients with breast, pancreatic and certain other types of cancer may survive longer if given an anti-nausea drug during surgery, according to a large study being presented at the ANESTHESIOLOGY 2021 annual

meeting. Three months after their cancer surgery, more than three times as many patients who did not receive dexamethasone died, compared to those who received the drug, researchers found.

Dexamethasone is given to patients to prevent nausea and vomiting after surgery and during chemotherapy. Researchers found dexamethasone can improve mid- to long-term outcomes in patients with non-immunogenic cancers (those that don't provoke a strong immune response) such as sarcoma and cancers of the breast, uterus, ovary, esophagus, pancreas, thyroid, bones and joints.

"Dexamethasone has positive and negative effects—it inhibits cancer growth, but also suppresses the [immune system](#)," said Maximilian Schaefer, M.D., Ph.D., senior author of the study and director of the Center for Anesthesia Research Excellence, Beth Israel Deaconess Medical Center and Harvard Medical School, Boston. "Previous research has reported that in cancers in which the immune system controls [cancer](#) growth, the positive and [negative effects](#) of dexamethasone balance each other, so there is no benefit. Ours is the first large study to show that for a wide variety of cancers where the immune system does not play a major role, the positive effects seem to predominate."

Researchers analyzed the records of 74,058 patients who had surgeries to remove non-immunogenic cancerous tumors between 2005 and 2020 at Beth Israel Deaconess Medical Center and between 2007 and 2015 at Massachusetts General Hospital, Boston. Overall, 25,178 (34%) patients received dexamethasone during surgery. After 90 days, 209 (0.83%) of the patients who had received dexamethasone died vs. 1,543 (3.2%) of patients who did not receive the drug.

After taking into account various factors, including that dexamethasone is often administered to younger patients, those who received the drug still had a 21% reduced risk of dying within one year after surgery. A

second analysis determined dexamethasone was particularly beneficial for patients with cancers of the ovary, uterus or cervix.

"Based on our data, physician anesthesiologists should feel more confident in administering [dexamethasone](#) to [patients](#) undergoing surgery for non-immunogenic cancers," said Dr. Schaefer. "It not only helps with nausea, but it also may result in improved survival."

More information: www.asahq.org/annualmeeting

Provided by American Society of Anesthesiologists

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