

Cyclizine – What is your experience?

January – March 2018

Number of responses = 60

1) Where do you work? (one_of)

answer	votes	% of vote
Inside the UK	42	70%
Outside the UK	19	32%

2) For which indication(s), where an anti-emetic is required, would you generally use cyclizine first-line? (many_of)

answer	votes	% of voters
Raised intracranial pressure	40	67%
Vestibular symptoms	43	72%
Chemical causes of vomiting, e.g. morphine, hypercalcaemia, renal failure	13	22%
Gastritis, gastric stasis, functional bowel obstruction	9	15%
Other (see comments section below)	9	15%
Do not use cyclizine	4	7%

3) What is your general PO starting dose for cyclizine in palliative care patients? (one_of)

answer	votes	% of vote
50mg PO b.d.	5	8%
50mg PO t.d.s	45	75%
Other (see comments section below)	5	8%
Do not use PO	4	7%

4) What is your general parenteral starting dose for cyclizine in palliative care patients if you use repeated injection? (one_of)

answer	votes	% of vote
25mg SC/IV b.d.	2	3%
25mg SC/IV t.d.s.	6	10%
50mg SC/IV b.d.	2	3%
50mg SC/IV t.d.s.	27	45%
Other (see comments section below)	3	5%
Do not use repeated injection	20	33%

5) What is your general parenteral starting dose for cyclizine in palliative care patients if you use continuous subcutaneous infusion (CSCI)? (one_of)

answer	votes	% of vote
50mg/24h CSCI	4	7%
75mg/24h CSCI	1	2%
100mg/24h CSCI	12	20%
150mg/24h CSCI	34	57%
Other (see comments section below)	3	5%
Do not use CSCI	5	8%

6) When converting a patient from PO to parenteral route, do you: (one_of)

answer	votes	% of vote
Use the same total daily dose	53	88%
Halve the daily dose, i.e. 50% less parenterally	2	3%
Other (see comments section below)	0	0%
Have no experience of converting from PO to parenteral route	2	3%

7) Have you seen a 50mg PO dose of cyclizine: (many_of)

answer	votes	% of voters
Cause seizures	0	0%
Cause drug-induced movement disorders	4	7%
Worsen Parkinson's disease	2	3%
Misused/abused in a palliative care setting	0	0%

8) Have you seen a 50mg SC dose of cyclizine: (many_of)

answer	votes	% of voters
Cause seizures	0	0%
Cause drug-induced movement disorders	4	7%
Worsen Parkinson's disease	1	2%
Misused/abused in a palliative care setting	3	5%

9) Have you seen a 50mg IV dose of cyclizine: (many_of)

answer	votes	% of voters
Cause seizures	0	0%
Cause drug-induced movement disorders	2	3%
Worsen Parkinson's disease	0	0%
Misused/abused in a palliative care setting	5	8%

10) Is your organisation discouraging the use of cyclizine in preference for a cheaper alternative, e.g. ondansetron or granisetron? (one_of)

answer	votes	% of vote
Yes	6	10%
No	52	87%
Don't know	2	3%

10a) If yes, please give further details of the reasons, if known, and the alternative drug being used for which indications. (freetext)

Tend to only use cyclizine for limited indications, therefore discourage use apart from these limited indications, rather than limiting it for financial reasons
In Australia cyclizine has recently come onto the pharmaceutical benefits scheme again, prior to that it was limited by cost
Shortage of cyclizine and ondansetron cheaper. All post-surgery patients having ondansetron makes junior doctors more familiar with it
Ondansetron - either oral or via CSCI
Cyclizine only used by palliative care (and sometimes oncology) services. If used, ongoing outpatient supply must come from hospital (not community pharmacy)
Cost. Multiple other drugs used as appropriate to clinical situation.

Indication

In syringe pump for mild symptoms where no specific cause has been identified, if already on CSCI and/or can't take PO

Sometimes use for bowel obstruction if metoclopramide contraindicated due to colic

I would use cyclizine CSCI as the first line antiemetic in complete bowel obstruction combined with an anticholinergic e.g. hyoscine butylbromide

Usually try it for retching - some success

Use cyclizine first-line for pharyngeal irritation

Other indications for cyclizine first-line - Parkinson's disease or previous parkinsonism

Only use cyclizine first-line if patient has known adverse reaction to usual indicated first-line anti-emetic

Sometimes use a syringe driver with cyclizine for managing nausea and vomiting in complete bowel obstruction and in these instances consider combining with haloperidol

We usually consider metoclopramide for nausea unless contra-indicated. Cyclizine tends to cause drowsiness

Dose

My usual PO starting dose is 25mg t.d.s.

Many of the people I treat are elderly. If I was going to use cyclizine in the elderly I would usually try a 25mg dose initially (PO or SC), otherwise 50mg

Sometimes reduce the dose to 25mg t.d.s. if patient is drowsy

I usually start off with cyclizing 50mgs SC p.r.n. q8hourly as opposed to regular

Start 25mg t.d.s. PO Start 12.5mg t.d.s. SC

Starting dose of SC would depend on patient. Generally, 50mg SC t.d.s. unless renal failure/frail and then would use 25mg SC t.d.s.

Undesirable effect

I have seen IV 50mg bolus dose associated with unpleasant jitteriness/unease/restlessness to the extent patients refuse to have it again

I prescribe very little cyclizine due to its' common side effects of dry mouth, constipation & gastric stasis

When using Cyclizine 150mg/24h CSCI, we observe the site for inflammation and recommend to rotate sites and we often add dexamethasone 0.5mg to the infusion to avoid site irritation. A dry mouth is a common complaint with its use

Main reason for not using cyclizine as first-line, or at all unless all other options exhausted, is anticholinergic undesirable effects in palliative care patients using opioids

Other comments

We have no cyclizine in Spain.

I seldom use cyclizine, aside from specific indications as noted above, due to limited compatibility data in CSCI with other meds. Also, because of its potential histaminergic side effects

Cyclizine only available as part of 'Special Access Scheme' in Australia. Variable experience with it on part of other treating teams.

It seems to be very popular with our renal teams locally as their first-line choice for everything. We find it works best with hyoscine for bowel obstruction. Due to the nature of the SC prn injections "stinging" people are often put off having it.