

CADTH RAPID RESPONSE REPORT: REFERENCE LIST

# Nabilone for the Treatment of Nausea and Vomiting, or Anorexia: Clinical Effectiveness and Guidelines – An Update

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## Research Questions

1. What is the clinical effectiveness of nabilone for the treatment of nausea and vomiting, or anorexia in adults and adolescents?
2. What are the evidence-based guidelines associated with the use of nabilone for the treatment of nausea and vomiting, or anorexia in adults and adolescents?

## Key Findings

One systematic review and three randomized controlled trials were identified regarding the clinical effectiveness of nabilone for the treatment of nausea and vomiting, or anorexia in adults and adolescents. No evidence-based guidelines were identified.

## Methods

A limited literature search was conducted on key resources including PubMed, the Cochrane Library, University of York Centre for Reviews and Dissemination (CRD) Medline, Embase, Canadian and major international health technology agencies, as well as a focused Internet search. No methodological filters were applied to limit retrieval. Where possible, retrieval was limited to the human population. The search was also limited to English language documents published between January 01, 2016 and October 15, 2018. Internet links were provided, where available.

## Selection Criteria

One reviewer screened citations and selected studies based on the inclusion criteria presented in Table 1.

**Table 1: Selection Criteria**

<b>Population</b>	Adults and Adolescents ( $\geq 13$ years old) with nausea and vomiting, or anorexia
<b>Intervention</b>	Nabilone (Cesamet)
<b>Comparator</b>	Q1: Active comparators, placebo, no treatment Q2: No comparator
<b>Outcomes</b>	Q1: Clinical effectiveness (e.g., reduction in nausea and vomiting, control/change of weight), and safety (e.g., adverse events, abuse and misuse) Q2: Guidelines
<b>Study Designs</b>	Health technology assessments, systematic reviews, meta-analyses, randomized controlled trials, non-randomized studies, evidence-based guidelines

## Results

Rapid Response reports are organized so that the higher quality evidence is presented first. Therefore, health technology assessment reports, systematic reviews, and meta-analyses are presented first. These are followed by randomized controlled trials, non-randomized studies, and evidence-based guidelines.

One systematic review and three randomized controlled trials were identified regarding the clinical effectiveness of nabilone for the treatment of nausea and vomiting, or anorexia in adults and adolescents. No relevant health technology assessment, meta-analyses, non-randomized studies, or evidence-based guidelines were identified.

Additional references of potential interest are provided in the appendix.

### Health Technology Assessments

No literature identified.

### Systematic Reviews and Meta-analyses

1. Tafelski S, Hauser W, Schafer M. Efficacy, tolerability, and safety of cannabinoids for chemotherapy-induced nausea and vomiting--a systematic review of systematic reviews. *Schmerz*. 2016 Feb;30(1):14-24.

[PubMed: PM26787227](#)

### Randomized Controlled Trials

2. Turcott JG, Del Rocio Guillen Nunez M, Flores-Estrada D, et al. The effect of nabilone on appetite, nutritional status, and quality of life in lung cancer patients: a randomized, double-blind clinical trial. *Support Care Cancer*. 2018 Sep;26(9):3029-3038.

[PubMed: PM29550881](#)

3. Levin DN, Dulberg Z, Chan AW, Hare GM, Mazer CD, Hong A. A randomized-controlled trial of nabilone for the prevention of acute postoperative nausea and vomiting in elective surgery. *Can J Anaesth*. 2017 04;64(4):385-395.

[PubMed: PM28160217](#)

4. Cote M, Trudel M, Wang C, Fortin A. Improving quality of life with nabilone during radiotherapy treatments for head and neck cancers: A randomized double-blind placebo-controlled trial. *Ann Otol Rhinol Laryngol*. 2016 Apr;125(4):317-324.

[PubMed: PM26503964](#)

### Non-Randomized Studies

No literature identified.

### Guidelines and Recommendations

No literature identified.

## Appendix — Further Information

### Previous CADTH Reports

5. Narain T, Farrah K. Nabilone for Chronic Pain Management: A Review of Clinical Effectiveness and GuidelinesOttawa (ON): CADTH; 2017:  
<https://www.cadth.ca/nabilone-chronic-pain-management-review-clinical-effectiveness-and-guidelines-0>. Accessed Oct 19 2018.

### Guidelines and Recommendations – Not Specific to Nabilone

6. Allan GM, Ramji J, Perry D, et al. Simplified guideline for prescribing medical cannabinoids in primary care. *Can Fam Physician*. 2018;64(2):111-120.  
<http://www.cfp.ca/content/cfp/64/2/111.full.pdf>. Accessed Oct 19 2018.
7. Medical cannabinoids: Clinical practice guideline Edmonton: Toward Optimized Practice; 2018:  
[http://www.topalbertadoctors.org/download/2238/Medical%20Cannabinoid%20CPG.pdf?\\_20180320184543](http://www.topalbertadoctors.org/download/2238/Medical%20Cannabinoid%20CPG.pdf?_20180320184543) Accessed Oct 19 2018.  
See: *Management of Nausea and Vomiting*, page 3
8. Guidance for the use of medicinal cannabis for the prevention or management of nausea and vomiting in Australia. Canberra (AU): Australian Government, Therapeutic Goods Administration; 2017: <https://www.tga.gov.au/sites/default/files/guidance-use-medicinal-cannabis-prevention-or-management-nausea-and-vomiting-australia.pdf>  
Accessed Oct 19 2018.

### Review Articles

9. Badowski ME. A review of oral cannabinoids and medical marijuana for the treatment of chemotherapy-induced nausea and vomiting: a focus on pharmacokinetic variability and pharmacodynamics. *Cancer Chemother Pharmacol*. 2017 Sep;80(3):441-449.  
[PubMed: PM28780725](#)
10. Likar R, Nahler G. The use of cannabis in supportive care and treatment of brain tumor. *Neuro-Oncology Practice*. 2017 01 Sep;4(3):151-160.
11. Pergolizzi JV, Jr., Taylor R, LeQuang JA, Zampogna G, Raffa RB. Concise review of the management of iatrogenic emesis using cannabinoids: emphasis on nabilone for chemotherapy-induced nausea and vomiting. *Cancer Chemother Pharmacol*. 2017 Mar;79(3):467-477.  
[PubMed: PM28235999](#)
12. Taschler U, Hasenoehrl C, Storr M, Schicho R. Cannabinoid Receptors in Regulating the GI Tract: Experimental Evidence and Therapeutic Relevance. *Handb Exp Pharmacol*. 2017;239:343-362.  
[PubMed: PM28161834](#)

13. Davis MP. Cannabinoids for symptom management and cancer therapy: The evidence. *J Natl Compr Canc Netw.* 2016 07;14(7):915-922.  
[PubMed: PM27407130](#)
14. Maida V, Daeninck PJ. A user's guide to cannabinoid therapies in oncology. *Curr.* 2016 Dec;23(6):398-406.  
[PubMed: PM28050136](#)

#### Additional References

15. Anonymous. Cannabinoid agonists for nausea and vomiting. *Gastroenterol Nurs.* 2016 Mar-Apr;39(2):137-139.  
[PubMed: PM27070800](#)