



## Common Questions About

# Cyclic Vomiting Syndrome (CVS)

### What is CVS?

CVS is a disorder with repeated episodes of severe nausea and vomiting that alternate with symptom free periods. It occurs in children and adults.

### What are the signs and symptoms of CVS?

The symptom episodes tend to follow the same pattern in each person with CVS over time. There are typically four phases:

- The first phase is relatively symptom-free. It occurs between vomiting episodes and usually lasts weeks to months.
- During the second phase the coming on of an episode is felt. There is nausea, but oral medicines may still be taken. This phase lasts minutes to hours.
- In the third phase there is intense nausea and vomiting, and an inability to eat, drink, or take medicines without vomiting. Other symptoms may include belly pain, hot sweats, cold chills, headache, sensitivity to light and sounds, and diarrhea. The person may be drowsy and withdrawn. This phase lasts from hours to days.
- In the fourth phase, recovery begins with the settling down of symptoms and ends with going back to a normal diet and a return to the relatively symptom-free period.

In CVS, the pattern of these episodes repeats over a long-term, with 3 or more episodes a year.

### How do I know if I have CVS?

A doctor can diagnose CVS based on a thorough history, physical exam, and the symptoms. There is no test for CVS. Tests may be done to rule out other conditions. A viral infection may at first be suspected. Repeated trips to emergency rooms are not uncommon, especially until a diagnosis is made. Many people with CVS also report migraine headaches or a family history of migraines.

### What causes CVS?

The cause of CVS is not yet known. Scientists are looking at genetic, hormonal, and other factors that may contribute to the symptoms.

### How is CVS treated?

In general, treatment includes avoiding potential triggering

factors, taking medicines to prevent episodes or reduce symptoms, and getting supportive care during episodes.

Triggering factors like stress, anxiety, or certain foods will vary between persons. Try to identify and avoid triggers.

Drug treatments may be divided into short-term treatment of the vomiting episodes and long-term treatment to try to prevent the episodes. In the short term, antiemetic agents can reduce nausea and vomiting. Antianxiety and antimigraine medications may also help. Long term, a tricyclic antidepressant can help prevent nausea and vomiting. Other medicines may also be used as preventive therapies.

Continual vomiting can cause other problems, which need to be treated as well. Examples include loss of fluids (dehydration), electrolyte imbalance, and irritation of the esophagus (food tube).

A letter from your doctor that describes CVS and the right treatment for you is often helpful to have on hand. Having a planned, quick, effective treatment helps put care into action early if emergency treatment is needed. It also helps reduce worry. Planned support and early action help improve the treatment of CVS.

### Where can I learn more?

Learn more on our websites at [www.aboutGI-Motility.org](http://www.aboutGI-Motility.org) or [www.aboutKidsGI.org](http://www.aboutKidsGI.org), or in our fact sheet No. 541.

---

#### About IFFGD

The International Foundation for Functional Gastrointestinal Disorders (IFFGD) is a 501(c)(3) nonprofit education and research organization. We work to promote awareness, scientific advancement, and improved care for people affected by chronic digestive conditions. Our mission is to inform, assist, and support people affected by gastrointestinal disorders. Founded in 1991, we rely on donors to carry out our mission. Visit our websites at: [www.iffgd.org](http://www.iffgd.org).

#### About the Publication

Opinions expressed are an author's own and not necessarily those of the International Foundation for Functional Gastrointestinal Disorders (IFFGD). IFFGD does not guarantee or endorse any product in this publication or any claim made by an author and disclaims all liability relating thereto. This article is in no way intended to replace the knowledge or diagnosis of your doctor. We advise seeing a physician whenever a health problem arises requiring an expert's care.

For more information, or permission to reprint this article, contact IFFGD by phone at 414-964-1799 or by email at [iffgd@iffgd.org](mailto:iffgd@iffgd.org).