



Practice Tips

Treating nausea and vomiting with magnets

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Nausea and vomiting, especially during the early stages of pregnancy, is a common problem among patients of family physicians. Good treatments are available, but sometimes they do not work, and all require medications. Because they fear teratogenicity, some patients want to avoid traditional antiemetics. Complementary or alternative therapies can offer options to ease unpleasant and potentially dangerous nausea and vomiting.

After hearing about magnets being used successfully for motion sickness and seeing the results on a family member, I tried using magnets for a pregnant patient. This patient had presented at 13 weeks' gestation with uncontrolled nausea and vomiting despite having taken full doses of doxylamine succinate–pyridoxine hydrochloride (Diclectin[®]) since 9 weeks' gestation.

She estimated she was retaining only 500 mL/d of fluid (she has some paramedical training). I offered her

intravenous treatment in hospital or multipolar magnets on the insides of both wrists with close follow up. She chose the latter, and I contacted her three times a day for the following 2 days. She had no more vomiting on the day of application and “mild vomiting the next morning” (her words). She did not vomit again until the seventh morning when she returned to “violent vomiting” (her words). She had not put the magnets on following her shower the night before. She completed the pregnancy using the magnets with no further concerns. Few patients have nausea and vomiting this severe during pregnancy, but I did have another patient whom I treated successfully with the same method.

Magnets

The magnets used were 3.81 cm in diameter, had a multipolar array (**Figure 1**), and had a rating of 700 G. I applied the magnets two thumb widths proximal to the crease of the wrist (**Figure 2**) and

Figure 1. Disc Magnetic Pattern

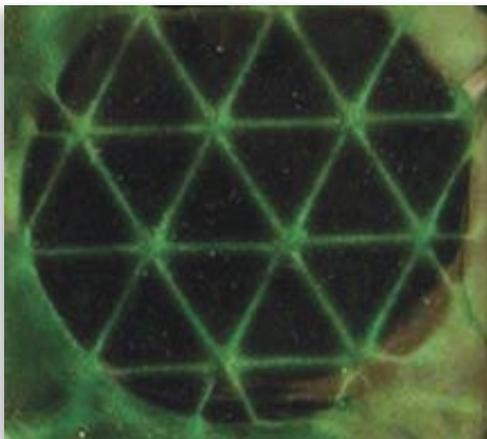


Figure 2. Magnet On P6



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held them in place with either a cloth band or tape. This application covers the P6 acupuncture point. (I, like most family physicians, have little knowledge of acupuncture, but learned through this experience that the P6 point is associated with nausea and vomiting.) No pressure is required.

There are no known side effects or risks with these magnets (except to the magnetic strips on credit cards). Patients simply remove the magnets when they feel better. These magnets (Kenko minis) have a unique patented internal pattern, are about \$30 each, and are available through Nikken Inc. The Nikken Company has many different magnetic products. The one chosen was convenient in size for the purpose. For more information, you can access the website www.Nikken.com or call Nikken at 1-800-669-8859.

Another application for magnets

I did a search of MEDLINE from 1966 through January 2003 using the MeSH terms nausea, vomiting, and pregnancy.¹ Nothing was found using the search word "magnet," but adding the word "acupuncture" turned up an interesting article by Dundee and McMillan.² These authors stated that the most rewarding results are obtained when P6 stimulation is used before cancer chemotherapy with a portable battery-operated stimulator connected to a large electrocardiogram surface electrode on the P6 point. They also noted that, while

modern antiemetics can control vomiting, they are relatively ineffective against nausea. Nausea can be controlled by regular use of the stimulator.

My experiences with the patients mentioned above suggest that the magnetic field has an effect similar to the electrical stimulation mentioned by Dundee and McMillan.²

I have also used magnets on the wrists equally successfully for patients with nausea due to other causes, particularly chemotherapy. It is gratifying to have another way to treat patients without increasing their anxieties. Nothing is ingested with use of magnets. There is no invasion of the person as with intravenous treatment. Magnets are easily applied by patients, and there is no risk of overuse. The product is inexpensive, very durable, and reusable for years. 

References

1. Aikins MP. Alternative therapies for nausea and vomiting of pregnancy. *Obstet Gynecol* 1998;91(1):149-55.
2. Dundee JW, McMillan CM. Clinical uses of P6 acupuncture antiemesis. *Acupunct Electrother Res* 1990;15(3-4):211-5.

We encourage readers to share some of their practice experience: the neat little tricks that solve difficult clinical situations. *Canadian Family Physician* pays \$50 to authors upon publication of their Practice Tips. Tips can be sent to Dr Tony Reid, Scientific Editor, *Canadian Family Physician*, 2630 Skymark Ave, Mississauga, ON L4W 5A4; by fax (905) 629-0893; or by e-mail tony@cfpc.ca.

