PEDIATRIC EMERGENCY MEDICINE EVIDENCE-BASED PATHWAY

CANNABINOID HYPEREMESIS SYNDROME (CHS) © BCH Emergency Department

Definition: a condition caused by cannabis use that leads to recurrent and severe episodes of nausea, vomiting, dehydration, and abdominal pain with frequent visits to the emergency department.

Rome IV criteria (all must be present; fulfilled for last 3 mo, w/ sx onset at least 6 mo before dx):

- Stereotypical episodic vomiting resembling CVS in terms of onset, duration, and frequency
- Presentation after prolonged excessive cannabis use
- Relief of vomiting episodes by sustained cessation of cannabis use

*May be associated with pathologic bathing behavior (prolonged hot baths or showers)

Inclusion Criteria

Adolescent patients \geq 40 kg

Exclusion Criteria

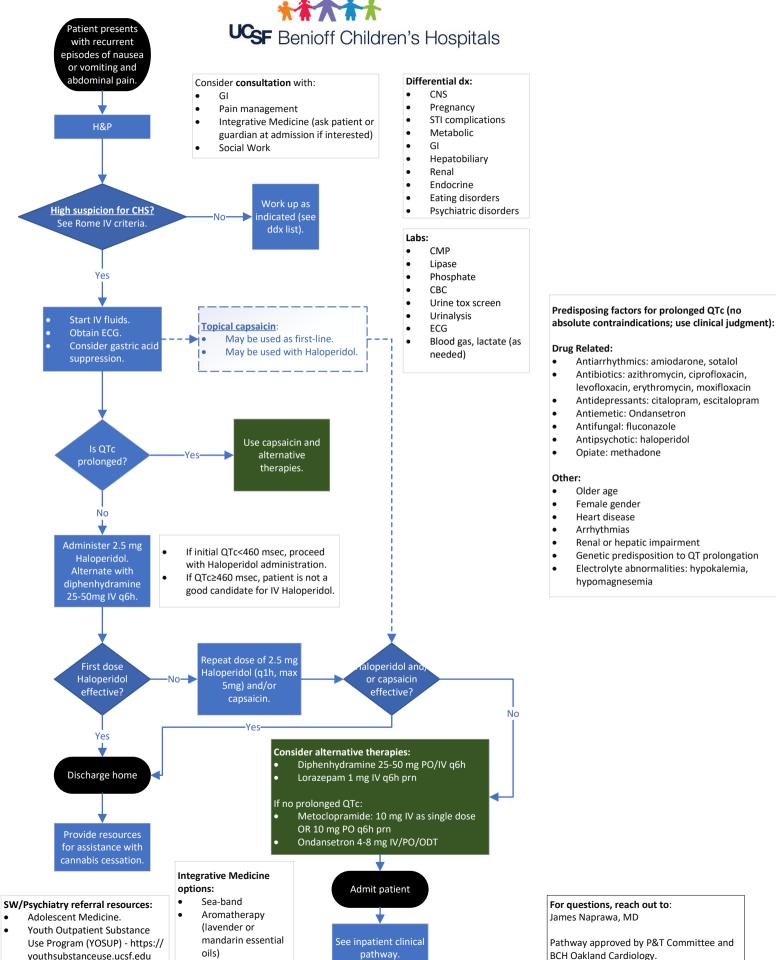
- Pregnancy
- < 40 kg
- Congenital long QTc

Key measures

- ECG (prior to Haloperidol)
- Documented reevaluation after every
- intervention
- Pain
- Nausea

Application of capsaicin (0.075%) cream:

- Prioritize regions patient identifies where hot water relieves sx, if any.
- Advise patient of potential initial discomfort and rapid mimic of hot showers.
- Avoid application near face, eyes, genitourinary region, and others areas of sensitive skin.
- Do not apply to broken skin.
- Do not use occlusive dressings over applied capsaicin.
- Use gloves and wash hands after application.
- Discontinue capsaicin as adjunct treatment upon skin irritation. Remove with milk.



Created by: CHS Working Group Last reviewed: 05/19/2022 Disclaimer: This algorithm functions as a guideline for clinical care under the direction of pediatric emergency medicine attendings.

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