Proposed Mechanisms of EmeTerm’s antiemetic effect

Afferents factors:
• Conflict between visual and vestibular/proprrioceptive signals
• Toxins in blood and CSF
• Visceral inputs

Vomiting center:
• Cerebellum
• Medulla oblongata
• Reticular formation

Efferents response:
• Marked reductions in gastric tone and motility
• Changes in gastric myoelectric activity
• Retrograde giant contraction

Sensory input inhibition:
➢ Sensory input from gastric distension is inhibited

Central antiemetic mechanisms:
➢ Through neurotransmitters such as endogenous opioid
➢ Activate the cerebellar vestibular neuromatrix

Protective response:
➢ Reduce gastric tachyarrhythmia
➢ Suppress retrograde peristaltic contractions
➢ Inhibit lower esophageal sphincter relaxations

Vomiting Mechanism
Induce vomiting
Reduced vomiting episode

How EmeTerm works?

WAT Med
Proposed Mechanisms of EmeTerm’s antiemetic effect

**Vomiting Mechanism**

- **Sensor:** A variety of stimuli such as: take a car, pregnancy, chemotherapy
- **Processor:** CNS reacts to the stimulus and sends vomiting instructions to stomach
- **Effector:** The stomach is abnormally shrinking

**How EmeTerm works?**

- **Sensor desensitization:** Reduces the intensity of the input signal
- **Processor optimization:** Calm down the vomiting center through neuromodulation mechanisms, reduce the vomiting instructions issued
- **Effector control:** Regulate the contraction of gastrointestinal smooth muscle

**Induce vomiting**

**Reduced vomiting episode**
References


