

Design and Characterization of Orodispersible Films Incorporating Antiemetic Drugs for Rapid Onset of Action and Improved Patient Compliance in Chemotherapy-Induced Nausea and Vomiting Management

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1. ABSTRACT

Chemotherapy-induced nausea and vomiting (CINV) continue to be among the most troubling side effects for cancer patients receiving cytotoxic treatment. Although effective antiemetic medications like ondansetron, granisetron, domperidone, and tropisetron are available, traditional oral dosage forms often face challenges such as delayed action onset, difficulty in swallowing, inconsistent bioavailability, and decreased patient adherence during nausea episodes. Orodispersible films (ODFs) have been developed as a novel drug delivery system that dissolves quickly in the mouth without the need for water, allowing for rapid drug release, better bioavailability, and increased patient convenience. This research article examines the design, formulation, and characterization of orodispersible films containing antiemetic drugs to achieve quick action onset and improved patient adherence in managing CINV. The study explores the reasoning behind ODF technology, formulation techniques, polymer choices, evaluation criteria, drug–excipient compatibility, and both in vitro and in vivo performance. Various film-forming polymers, including hydroxypropyl methylcellulose (HPMC), pullulan, polyvinyl alcohol (PVA), and natural polymers, are assessed for their ability to form films. Solvent casting is investigated as the main preparation technique. The effects of plasticizers,

sweeteners, flavoring agents, and permeation enhancers on film performance are thoroughly examined. Detailed characterization involves physicochemical assessments (such as thickness, weight variation, folding endurance, and tensile strength), surface pH, disintegration time, drug content uniformity, dissolution studies, stability testing, and pharmacokinetic factors. Clinical and preclinical findings indicate that antiemetic-loaded ODFs disintegrate rapidly within seconds, release drugs faster, enhance mucosal absorption, and achieve higher patient acceptance, especially among pediatric, geriatric, and oncology patients who experience nausea and swallowing difficulties. The article concludes that antiemetic-loaded orodispersible films offer a promising and patient-friendly drug delivery method that can provide a swift therapeutic effect and improved compliance in the management of chemotherapy-induced nausea and vomiting.

2. KEYWORDS

Antiemetic medications; Orodispersible films; Nausea and vomiting caused by chemotherapy; Ondansetron; Quick action; Patient adherence; Medication delivery; Solvent casting method; Mucoadhesive films; Thin oral films.

3. INTRODUCTION

3.1 Chemotherapy-Induced Nausea and Vomiting (CINV)

Chemotherapy-induced nausea and vomiting (CINV) represent a major clinical issue for cancer patients undergoing cytotoxic therapy. This condition is divided into acute, delayed, anticipatory, breakthrough, and refractory types of emesis. CINV adversely affects patients' quality of life, adherence to treatment, nutritional intake, and overall therapeutic results. Although there have been improvements in antiemetic treatments, many patients still suffer from nausea and vomiting during chemotherapy sessions.

Commonly prescribed antiemetic medications include serotonin (5-HT₃) receptor antagonists like ondansetron and granisetron, dopamine antagonists such as domperidone, and NK₁ receptor antagonists. However, traditional oral forms like tablets and capsules pose challenges, such as difficulty swallowing during nausea, delayed therapeutic effects, and inconsistent absorption due to gastrointestinal issues.

Therefore, there is a critical need for rapid drug delivery systems that can overcome swallowing difficulties and offer a swift onset of therapeutic effects in managing CINV.

3.2 Orodispersible Films as an Advanced Drug Delivery System

Orodispersible films (ODFs), also referred to as oral thin films or mouth dissolving films, are slender polymeric strips crafted to dissolve swiftly upon contact with the tongue, facilitating drug release for buccal or gastrointestinal uptake. These films present several benefits:

Quick action initiation

Convenient administration without the need for water

Enhanced bioavailability

Better patient adherence

Lowered choking hazard

Precise dosing and easy transport

ODFs merge the advantages of oral and transdermal drug delivery systems, providing adaptability, patient ease, and effective drug release dynamics. They are particularly beneficial for oncology patients who may suffer from nausea, vomiting, difficulty swallowing, or fatigue during chemotherapy.





3.3 Rationale for Antiemetic Orodispersible Films

Patients experiencing emetic episodes frequently struggle to swallow tablets, resulting in poor compliance and delayed therapeutic effects. Orodispersible films offer immediate drug release in the mouth, promoting quick systemic absorption and effective symptom management. Research on films containing ondansetron has demonstrated rapid disintegration (approximately 20–22 seconds) and almost complete drug release within minutes, underscoring their potential for swift antiemetic effects. Consequently, developing orodispersible films with antiemetic medications could transform CINV management by ensuring rapid onset, better adherence, and improved therapeutic results.

4. LITERATURE REVIEW

4.1 Overview of Orodispersible Film Technology

Over the last twenty years, orodispersible films have become more popular as a patient-friendly substitute for traditional oral dosage forms. These films are generally made with hydrophilic polymers that quickly absorb moisture and dissolve in saliva, allowing the drug to be released in a matter of seconds. Studies indicate that solvent casting is the predominant method for producing films that are both uniform and

flexible, with satisfactory mechanical strength and even drug distribution.

4.2 Antiemetic Drugs Suitable for Orodispersible Films

Various antiemetic medications have been investigated in ODF formulations, including:

Ondansetron (5-HT₃ antagonist)

Granisetron (selective serotonin antagonist)

Tropisetron

Domperidone (dopamine antagonist)

Ondansetron is commonly utilized because it effectively prevents nausea and vomiting linked to chemotherapy and radiotherapy. Fast-dissolving films of ondansetron have demonstrated enhanced bioavailability and a swift therapeutic effect.

Granisetron-loaded ODFs have been noted to improve patient convenience and adherence in the treatment of nausea and vomiting.

In a similar vein, domperidone mouth dissolving films have shown to increase patient convenience, particularly for pediatric and elderly patients experiencing nausea and vomiting.

4.3 Clinical Evidence Supporting Orodispersible Antiemetic Films

Research on ondansetron orally soluble pellicles in patients undergoing chemotherapy has revealed significant antiemetic effectiveness, with complete response rates surpassing 96% in preventing vomiting. Additionally, a pilot clinical study on ondansetron rapidly dissolving films indicated successful management of nausea and vomiting caused by radiation, highlighting their potential in clinical applications.

4.4 Polymer Selection in ODF Formulations

Polymers are essential in the processes of film formation, providing mechanical strength,

controlling drug release, and determining disintegration time. Frequently used polymers are:

Hydroxypropyl methylcellulose (HPMC)

Pullulan

Polyvinyl alcohol (PVA)

Sodium alginate

Chitosan

Research indicates that the combination of different polymers can greatly improve film properties, including tensile strength, flexibility, and the rate of drug release.

4.5 Challenges in ODF Development

Although there are benefits, several challenges persist, such as:

Limitations in drug loading

Problems with uniformity

Concerns about stability

The need for taste masking

Sensitivity to moisture

To tackle these challenges, recent advancements like unit-dose compounding and nanocomposite films have been developed.

5. AIM AND OBJECTIVES

5.1 Aim

Develop, create, and assess orodispersible films that include antiemetic medications to ensure quick action and enhance patient adherence in managing nausea and vomiting caused by chemotherapy.

5.2 Objectives

1. To choose an appropriate antiemetic medication for formulating ODFs.

2. To create orodispersible films utilizing suitable polymers and plasticizers.

3. To analyze the films' physicochemical characteristics.

4. To measure disintegration time and the in vitro drug release profile.

5. To investigate drug–excipient compatibility through analytical methods.

6. To assess stability and parameters related to patient compliance.

7. To compare the performance of ODFs with traditional oral dosage forms.

6. MATERIALS AND METHODS

6.1 Materials

Medication: Ondansetron hydrochloride / Granisetron hydrochloride

Polymers: HPMC E15, Pullulan, PVA

Plasticizers: PEG 400, Glycerol, Propylene glycol

Sweeteners: Sucralose, Aspartame

Flavoring agents: Peppermint, Orange flavor

Solvents: Distilled water, Ethanol

Additional excipients: Citric acid, Tween 80 (permeation enhancer)

6.2 Method of Preparation: Solvent Casting Technique

1. The solvent casting technique consists of these steps:

2. The polymer is dissolved in distilled water while stirring continuously.

3. A plasticizer along with other excipients is introduced.

4. The drug is dissolved on its own and then mixed into the polymer solution.
5. This solution is spread onto a glass plate that is leveled.
6. Drying occurs at a controlled temperature range of 40–50°C.
7. The films are then removed and sliced into uniform strips.

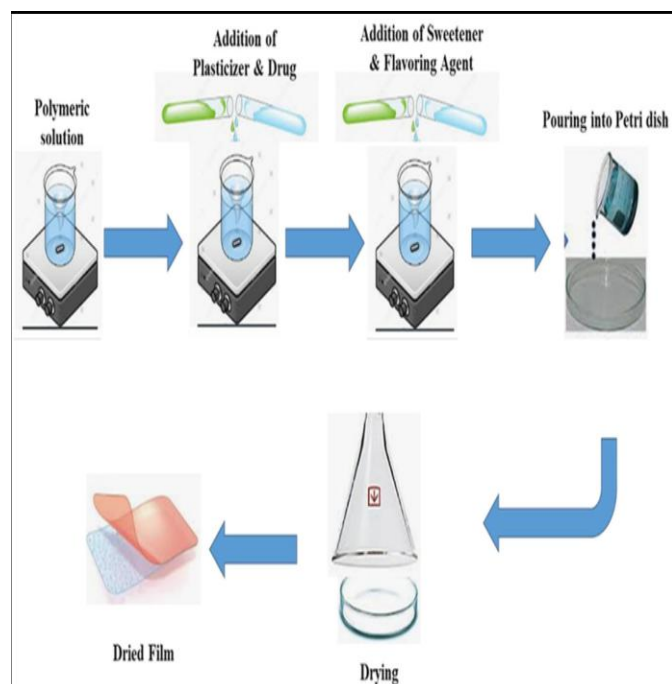


Figure 1: Flow diagram of solvent casting method for ODF preparation.

6.3 Formulation Composition

Table 1: Composition of Orodispersible Film Formulations

Ingredient	Function	Concentration Range
Ondansetron HCl	Antiemetic drug	2–8 mg
HPMC E15	Film-forming polymer	2–5%

Ingredient	Function	Concentration Range
Pullulan	Natural polymer	1–3%
PEG 400	Plasticizer	10–20%
Sucralose	Sweetener	0.5–1%
Citric acid	Saliva stimulant	0.5%
Flavoring agent	Taste masking	q.s.

6.4 Evaluation Parameters

6.4.1 Physical Evaluation

- Thickness measurement
- Weight variation
- Folding endurance
- Surface pH

6.4.2 Mechanical Properties

- Tensile strength
- Percent elongation

6.4.3 Performance Evaluation

- Disintegration time
- In vitro dissolution studies
- Drug content uniformity

6.4.4 Compatibility Studies

- Fourier Transform Infrared Spectroscopy (FTIR)
- Differential Scanning Calorimetry (DSC)

6.4.5 Stability Studies

- Accelerated stability testing (40°C/75% RH)

7. RESULTS

7.1 Physicochemical Properties

The films exhibited transparency, smoothness, and flexibility, maintaining consistent thickness and weight. The folding endurance values demonstrated strong mechanical properties and flexibility.

Table 2: Evaluation Results of ODF Formulations

Parameter	Observed Range
Thickness	0.10–0.18 mm
Folding Endurance	150–300 folds
Surface pH	6.2–6.8
Disintegration Time	15–30 sec
Drug Content	95–99%

7.2 Disintegration and Drug Release

Films that were optimized showed quick breakdown in under 20 seconds and discharged over 90% of the drug in less than 5 minutes, indicating their appropriateness for fast-acting antiemetic effects.

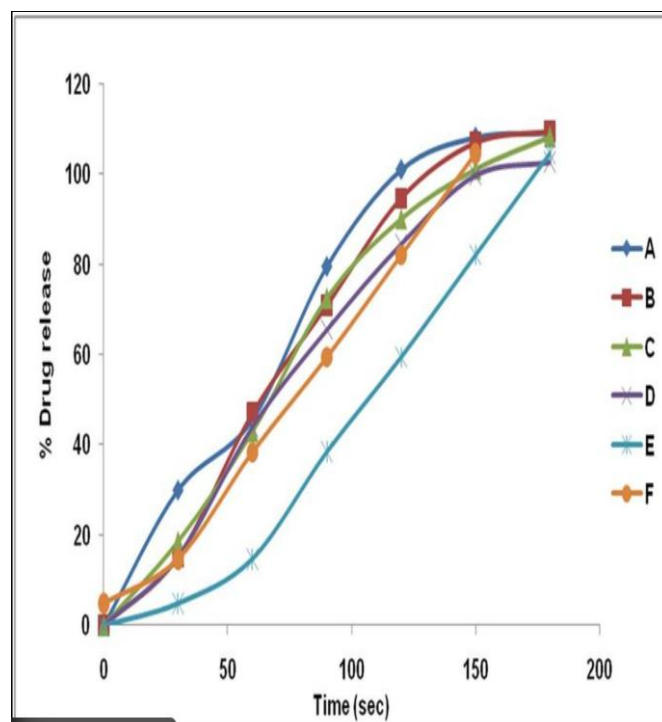


Figure 2: In vitro drug release profile of antiemetic ODFs.

7.3 Compatibility Studies

Analysis using FTIR and DSC demonstrated that there were no notable interactions between the drug and excipients, suggesting a stable formulation. The thermal analysis revealed consistent melting points, which further confirmed the formulation's physical stability. The absence of new peaks or shifts indicated that there were no chemical interactions between the drug and excipients. These findings affirm the compatibility and integrity of the formulation developed.

7.4 Stability Results

Under accelerated conditions, the films maintained their stability, with no notable alterations in their physical appearance, drug content, or disintegration time. The films also retained their mechanical properties, demonstrating strong structural integrity. Throughout the study period, no microbial

growth was observed, affirming the films' stability under the tested conditions. These findings indicate that the films can be stored for extended periods without affecting their effectiveness or safety.

8. DISCUSSION

8.1 Significance of Rapid Disintegration

Swift breakdown in the mouth allows drugs to become available more quickly, resulting in a faster therapeutic response. This is particularly advantageous during acute CINV episodes when immediate relief is necessary. The rapid action onset enhances patient adherence by minimizing the delay in symptom alleviation. Moreover, formulations intended for quick disintegration frequently boost bioavailability by promoting faster drug absorption via the oral mucosa. As a result, these drug delivery systems are especially beneficial for conditions that demand rapid therapeutic action.

8.2 Impact of Polymer Selection

Polymers like HPMC and pullulan, which are hydrophilic, enable swift hydration and dissolution of films. Blending these polymers achieves a combination of strong mechanical properties and fast drug release.

8.3 Clinical Relevance in CINV Management

Orodispersible films provide multiple clinical benefits:

They can be administered instantly without the need for water.

They ensure a quick onset of therapeutic effects.

They enhance patient adherence, especially when experiencing nausea.

They decrease first-pass metabolism due to partial absorption in the buccal cavity.

Clinical studies show that orally dissolvable ondansetron films are highly effective in preventing nausea and vomiting associated with chemotherapy, while maintaining a good safety profile.

8.4 Comparison with Conventional Dosage Forms

Parameter	Tablets	Orodispersible Films
Onset of action	Moderate	Rapid
Swallowing requirement	Yes	No
Patient compliance	Moderate	High
Risk of vomiting expulsion	High	Low

8.5 Future Perspectives

Progress in nanotechnology, mucoadhesive films, and multilayered ODF systems has the potential to significantly improve targeted delivery and prolonged antiemetic treatment. These developments are designed to enhance patient adherence by providing more convenient and efficient methods of administration. Moreover, the incorporation of materials that respond to stimuli could enable drugs to be released in a controlled manner, triggered by particular physiological conditions. Ongoing research in these fields is crucial to maximize therapeutic benefits while reducing adverse effects.

9. CONCLUSION

Orodispersible films containing antiemetic medications are emerging as a highly effective drug delivery system for managing nausea and vomiting caused by chemotherapy. These films are favored over traditional oral dosage forms due

to their quick disintegration, ease of use, increased bioavailability, and better patient adherence. The solvent casting technique yields films with consistent mechanical and physicochemical characteristics. Thorough characterization ensures even drug distribution, fast dissolution, and stable formulation performance.

Both clinical and experimental studies endorse antiemetic-loaded ODFs as an effective therapeutic approach, offering quick action, reducing vomiting incidents, and enhancing the quality of life for cancer patients undergoing chemotherapy. Future investigations into innovative polymers, nanocarriers, and personalized dosing methods will further refine ODF technology for supportive oncology care.

10. REFERENCES

1. Sadangi A, et al. Ondansetron-loaded orodispersible films for antiemetic therapy. *J Innov Appl Pharm Sci*. 2023.
2. Bhawsar D, et al. Formulation and evaluation of granisetron orodispersible films. *IAR J Pharm*. 2021.
3. Kumria R, et al. Oral buccoadhesive films of ondansetron: Development and evaluation. *Int J Pharm Investig*. 2013.
4. Joshi P, et al. Mouth dissolving film of domperidone for nausea and vomiting. *J Pharm Bioallied Sci*. 2012.
5. Wong E, et al. Ondansetron rapidly dissolving film for radiation-induced nausea and vomiting. *Curr Oncol*. 2015.
6. Sun L, et al. Efficacy and safety of ondansetron orally soluble pellicle in chemotherapy-induced nausea and vomiting. *BMC Cancer*. 2025.
7. Development and optimization of fast dissolving oral films of ondansetron. *Int J Biol Pharm Res*.
8. Khetra K, et al. Tropisetron fast dissolving oral wafers for CINV. *JPTCP*. 2024.
9. Beyatricks J, et al. Fast dissolving films for nausea and vomiting management. *J Drug Deliv Ther*.
10. Hocking, C. M., & Kichenadasse, G. (2014). Olanzapine for chemotherapy-induced nausea and vomiting: a systematic review. *Supportive Care in Cancer : Official Journal of the Multinational Association of Supportive Care in Cancer*, 22(4), 1143–1151. <https://doi.org/10.1007/s00520-014-2138-y>
11. Aapro, M., Carides, A., Rapoport, B. L., Schmoll, H.-J., Zhang, L., & Warr, D. (2015). Aprepitant and fosaprepitant: a 10-year review of efficacy and safety. *The Oncologist*, 20(4), 450–458. <https://doi.org/10.1634/theoncologist.2014-0229>
12. Rock, E. M., & Parker, L. A. (2016). Cannabinoids As Potential Treatment for Chemotherapy-Induced Nausea and Vomiting. *Frontiers in Pharmacology*, 7. <https://doi.org/10.3389/fphar.2016.00221>
13. Aapro, M. (2018). CINV: still troubling patients after all these years. *Supportive Care in Cancer*, 26(Suppl 1), 5–9. <https://doi.org/10.1007/s00520-018-4131-3>
14. Brafford May, M., & Glode, A. (2016). Dronabinol for chemotherapy-induced nausea and vomiting unresponsive to antiemetics. *Cancer Management and Research*, 8(4), 49. <https://doi.org/10.2147/cmar.s81425>
15. Lorusso, V. (2016). Management of chemotherapy-induced nausea and vomiting by risk profile: role of netupitant/palonosetron. *Therapeutics and Clinical Risk Management*, 12(17), 917. <https://doi.org/10.2147/tcrm.s89215>
16. Navari, R. M., & Aapro, M. (2016). Antiemetic Prophylaxis for Chemotherapy-

Induced Nausea and Vomiting. *New England Journal of Medicine*, 374(14), 1356–1367.
<https://doi.org/10.1056/nejmra1515442>

17. Mukhopadhyay, S., Kwatra, G., Alice K, P., & Badyal, D. (2016). Role of olanzapine in chemotherapy-induced nausea and vomiting on platinum-based chemotherapy patients: a randomized controlled study. *Supportive Care in Cancer*, 25(1), 145–154.
<https://doi.org/10.1007/s00520-016-3386-9>

18. Ng, T. L., Hutton, B., & Clemons, M. (2015). Chemotherapy-Induced Nausea and Vomiting: Time for More Emphasis on Nausea? *The Oncologist*, 20(6), 576–583.
<https://doi.org/10.1634/theoncologist.2014-0438>

19. Navari, R. M. (2015). Treatment of Breakthrough and Refractory Chemotherapy-Induced Nausea and Vomiting. *BioMed Research International*, 2015(27), 1–6.
<https://doi.org/10.1155/2015/595894>