

SA Health

Streamline Non Formulary Approval: Rivastigmine 1.5mg and 3mg Capsules Rivastigmine 4.6mg/24hr and 9.5mg/24hr Patches

Rivastigmine 1.5mg and 3mg capsules and rivastigmine 4.6mg/24hr patches and 9.5mg/24hr are not listed on the South Australian Medicines Formulary however is available on request for management of anticholinergic delirium on the advice of Toxicology/ Poisons Information Centre. Treatment duration is up to 72 hours.

The following information is required to be provided by the prescriber prior to dispensing.

Patient details:

Name:		
UR #:	Date of birth:	Gender:
Patient location (site/hospital):		

Patient eligibility for rivastigmine capsules and patches:

1. Requires maintenance treatment of anticholinergic delirium in the setting of acute anticholinergic intoxication / overdose successfully reversed by physostigmine

AND

2. Under Toxicology unit
OR
Recommended rivastigmine by Toxicology/ Poisons Information Centre
Name of Toxicology consultant:

Rivastigmine Formulation and Dose:

Capsules
Dose:
OR

Patches
Dose:

Outcome assessment:

Prescriber agrees to provide the following information from 24 to 72 hours after treatment to Drug and Therapeutics Committee (DTC):

- Treatment duration
- Acute behavioural disturbance according to altered mental state score (see below table) **pre-treatment** with rivastigmine, then at **2 hours** and **12 hours** post-initiation of rivastigmine
- Change/improvement in:
 - Glasgow Coma Scale (GCS)
 - Heart rate
 - Urinary retention
 - Temperature
 - Ileus (absence of bowel sounds)
 - Vision
- Signs and symptoms of cholinergic excess observed during treatment period including bronchospasm, diarrhoea, hypersalivation, vomiting, bradycardia (haemodynamically significant) and seizure.

Prescriber details:

I certify that the above information is correct	
Date:	
Prescriber Name:	
Position:	
Clinical unit, hospital:	
Telephone No:	Pager No:

Forward this form to your clinical pharmacist or Pharmacy Department who will forward this to the local DTC.

The Altered Mental Status Scale (Martel et al 2005)

Score	Responsiveness	Speech	Facial Expression	Eyes
4	Combative, violent, out of control	Loud outbursts	Agitated	Normal
3	Very anxious, agitated	Loud outbursts	Agitated	Normal
2	Anxious, agitated	Loud outbursts	Normal	Normal
1	Anxious, restless	Normal	Normal	Normal
0	Responds easily to name, speaks in normal tone	Normal	Normal	Clear, no ptosis
-1	Lethargic response to name	Mild slowing and thickening	Mild relaxation	Glazed or mild ptosis <1/2 eye
-2	Responds only if name is called loudly	Slurring or prominent slowing	Marked relaxation	Glazed and marked ptosis >1/2 eye
-3	Responds only after mild prodding	Few recognizable words	Marked relaxation, slacked jaw	Glazed and marked ptosis >1/2 eye
-4	Does not respond to mild prodding or shaking	Few recognizable words	Marked relaxation, slacked jaw	Glazed and marked ptosis >1/2 eye

Reference: Martel M, Sterzinger A, Miner J, et al. Management of acute undifferentiated agitation in the emergency department: a randomized double-blind trial of droperidol, ziprasidone, and midazolam. Acad Emerg Med. 2005;12:1167-1172.

PHARMACY USE INFORMATION

Entered in iPharmacy	Yes	No	Signature:
Entered in database	Yes	No	Date: