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:

 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:			



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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:
 - o Glasgow Coma Scale (GCS)
 - o Heart rate
 - Urinary retention
 - o Temperature
 - o lleus (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 local DTC.

PHARMACY USE INFORMATION

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



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*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.

