ABOUT YOUR MEDICINE

# Galantamine

Razadyne, Razadyne ER (formerly Reminyl), a memory medicine for mild to moderate Alzheimer's disease

Galantamine helps the brain hold on to a chemical used for memory and attention in early Alzheimer's disease.

| WHAT IT TREATS | HOW YOU TAKE IT | WHEN IT WORKS | HABIT FORMING |
|---|---|---|---|
| Mild to moderate Alzheimer's | With food, 1 or 2 times a day | Judge it at 3 months | No |

This medicine carries **no special FDA safety warning** of that kind.

## WHAT THIS MEDICINE DOES

- **Galantamine** protects a brain chemical used for memory and attention, and it nudges the brain to use that chemical better.
- Being honest: it does not stop or reverse Alzheimer's disease. It can slow the fading of memory and everyday skills.
- A good result usually looks like holding steady for months rather than a clear improvement you can point to.
- It is used in mild to moderate disease, and it is not habit forming or sedating.

## HOW TO TAKE IT

- Take the twice-daily tablet with breakfast and dinner. Take the long-acting capsule once each morning with food.
- Food matters here. Taking it on an empty stomach is the main reason people feel sick on this medicine.
- Drink plenty of fluids through the day, which helps with both the nausea and the dizziness.
- The strength rises in steps, at least **4 weeks** apart. Going up faster is what causes most of the stomach upset.
- If more than **3 days** are missed, call the prescriber. Restarting at the old strength can bring on hard vomiting.

## WHAT TO EXPECT

- Give it **3 months** at a steady strength before judging it. The changes are gradual and easy to miss up close.
- Families often notice small things: more words in conversation, less apathy, easier dressing, washing, or mealtimes.
- The disease keeps moving forward. Staying on it while symptoms slowly progress is still the medicine doing its work.
- Not everyone benefits. If nothing has changed after a fair trial, that is worth an honest conversation.
- Care partners are the best judges. Keep short monthly notes on mood, memory, and self-care to bring to visits.

## COMMON SIDE EFFECTS

- Nausea, vomiting, and loose stools are the most common effects and cluster right after a step up in strength.
- Food with every dose, more fluids, and a slower climb fix most of the stomach trouble. Ask before stopping the medicine.
- Appetite loss and weight loss can build quietly. Weigh weekly at home and mention any steady downward drift.
- Dizziness and unsteadiness raise fall risk. Stand up slowly, clear the walkways, and use handrails on stairs.
- Headache and tiredness are common early on and usually settle within a few weeks.
- Trouble sleeping or vivid dreams sometimes happen. Moving the last dose earlier in the day often helps.

## CALL YOUR PRESCRIBER OR GET HELP RIGHT AWAY IF

- Call **911** for fainting, a very slow pulse, or a fall with a head injury.
- Call **911** for black or tarry stools, or vomit that looks like coffee grounds.
- Go to the ER for a rash that blisters or peels, especially with a fever.
- Call the prescriber for vomiting that will not stop, or trouble passing urine.

## WHAT TO AVOID

- Tell the prescriber about kidney or liver problems, because both change how much of this medicine is right.
- Alcohol adds to dizziness and confusion and makes falls more likely, so it is best kept small or skipped.
- Some bladder, stomach, and allergy medicines work against this one. Have a pharmacist check the full list.
- Ibuprofen, naproxen, and similar pain pills together with this raise the risk of a stomach ulcer.
- Tell every surgeon and dentist about this medicine, since it changes how some anesthetics behave.

## STOPPING IT SAFELY

- Do not stop on a hunch. Stopping can bring a drop in memory and daily function that does not always return.
- If cost or side effects are the problem, say so. A slower climb or a different medicine may work better.
- In advanced illness there comes a point where stopping is reasonable and kind. Bring it up openly at a visit.
- After any break of more than a few days, restarting begins at the lowest strength and climbs again slowly.

## QUESTIONS TO ASK

- Should we use the once-daily capsule or the twice-daily tablet?
- How slowly can we raise the strength if the nausea is bad?
- What signs would tell us this medicine is worth continuing?
- Do the kidneys or the liver change what is safe here?

# Where this information comes from

Alzheimer's Association. (n.d.). *Medications for memory, cognition and dementia-related behaviors*. https://www.alz.org/alzheimers-dementia/treatments/medications-for-memory

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**NOTE**

Sources are listed in APA 7th edition style. This handout is general information about a medicine, not medical advice, and it does not replace the instructions from your own prescriber or pharmacist. Never start, change, or stop a medicine on your own. If you think you are having a serious reaction, call your prescriber; if you cannot breathe, cannot stay awake, or are thinking of harming yourself, call 911 or 988 right away.