

Rivastigmine

Exelon, Exelon Patch, a memory medicine given as a daily skin patch or capsule

Rivastigmine helps the brain keep more of a chemical used for memory, and the patch makes it gentler on the stomach.

WHAT IT TREATS

Alzheimer's and Parkinson's

HOW YOU TAKE IT

Daily patch, or capsules

WHEN IT WORKS

Judge it at 3 months

HABIT FORMING

No

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

WHAT THIS MEDICINE DOES

- **Rivastigmine** protects two brain chemicals used for memory and attention, so more stays available between brain cells.
- Being honest: it does not stop or reverse the disease. It can slow the fading of memory, attention, and daily skills.
- It is used for Alzheimer's disease and for the memory changes that come with Parkinson's disease.
- The skin patch delivers it slowly and steadily, which is why it upsets the stomach far less than the capsules do.

HOW TO TAKE IT

- Put the patch on clean, dry, hairless skin on the upper or lower back, the chest, or the upper arm. The back is hardest to peel off.
- **Remove the old patch before putting on a new one.** Wearing two at once has caused serious harm and even deaths.
- Use a different spot each day and wait a couple of weeks before repeating a spot. Press it down for **30 seconds** to seal it.
- Capsules are taken twice a day with breakfast and dinner. Food is not optional here, it is what keeps nausea down.
- If more than **3 days** are missed, call the prescriber. Restarting at the old strength can cause serious vomiting.

WHAT TO EXPECT

- Give it **3 months** at a steady strength before deciding whether it helps. Change is gradual and easy to overlook.
- A good result often looks like holding steady, or a small lift in alertness, conversation, and interest in things.
- For Parkinson's dementia, families sometimes notice clearer thinking and fewer frightening visual hallucinations.
- The disease keeps moving. Continuing while symptoms slowly progress is not proof the medicine has failed.
- Care partners see the real picture. Jot down what changed each month and bring those notes to every appointment.

COMMON SIDE EFFECTS

- Nausea, vomiting, and appetite loss are the main effects, and they cluster right after each step up in strength.
- Going up more slowly, and using the patch instead of capsules, solves most stomach trouble. Ask before stopping.
- Weight loss can build quietly over months. Weigh weekly at home and report a steady downward drift.
- Skin redness or itching under the patch is common. Rotating the spot and letting skin rest usually settles it.
- Vivid dreams, restless nights, and mild tremor can happen. Tell the prescriber, because timing changes may help.
- Dizziness raises the risk of falls. Clear the walkways at home, add night lights, and use handrails on stairs.

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.
- Call the prescriber for vomiting that will not stop, or for clear weight loss.
- Take off the patch and call for a rash that blisters, spreads, or weeps.

WHAT TO AVOID

- Never wear more than one patch at a time, and always check that the old one actually came off.
- Keep patches and used patches away from children and pets. A chewed patch can be dangerous to a small child.
- Do not cut a patch. Cutting it releases the medicine all at once instead of slowly over the day.
- Tell every surgeon and dentist about this medicine, since it changes how some anesthetics behave.
- Ibuprofen, naproxen, and similar pain pills add to the risk of a stomach ulcer. Ask a pharmacist first.

STOPPING IT SAFELY

- Do not stop on a hunch. Stopping can bring a drop in memory and daily function that may not come back.
- If side effects are the problem, ask about the patch, or about a smaller strength, before giving up on treatment.
- In advanced illness there is a point where stopping is the kind choice. Raise it openly at a visit.
- After a break of more than a few days, restarting begins at the lowest strength and climbs again slowly.

QUESTIONS TO ASK

- Would the skin patch suit us better than the capsules?
- How slowly can we go up in strength if the nausea is bad?
- What should we do if a patch falls off during the day?
- What change would tell us this is worth continuing?

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>

MedlinePlus. (2023). *Rivastigmine*. National Library of Medicine. <https://medlineplus.gov/druginfo/meds/a602009.html>

MedlinePlus. (n.d.). *Dementia*. National Library of Medicine. <https://medlineplus.gov/dementia.html>

National Institute on Aging. (n.d.). *Alzheimer's disease and related dementias*. <https://www.nia.nih.gov/health/alzheimers-and-dementia>

National Library of Medicine. (n.d.). *DailyMed*. <https://dailymed.nlm.nih.gov/dailymed/>

Parkinson's Foundation. (n.d.). *Prescription medications*. <https://www.parkinson.org/living-with-parkinsons/treatment/prescription-medications>

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.