

Rivastigmine (Permente) and Adhesion problems

Introduction

A report regarding adhesion problems with rivastigmine patches has been sent to the MEB previously as a separate report and has been updated with the latest information available for the sake of completeness.

The drug Permente[®] (rivastigmine) transdermal patches was granted marketing authorization in the Netherlands in March 2013. Rivastigmine is indicated for the symptomatic treatment of mild to moderately severe Alzheimer's dementia.

Between September 24th and October 25th 2013 the Netherlands Pharmacovigilance Centre Lareb received 23 reports concerning adhesion problems associated with the use of Permente® (rivastigmine) transdermal patches. See table 1.

Reports

Table 1. Reports of adhesion problems associated with the use of Permente® (rivastigmine) transdermal patches

	-			
Patient, Number, Sex, Age, Source	Drug, daily dose Indication for use	Concomitant Medication	Suspected adverse drug reaction	Time to onset, Action with drug outcome
A 158401 F, 70 years and older Specialist doctor	permente patch transdermal Alzheimer's disease	not reported	patches would not stick and curled on the sides	on same day discontinued recovered
B 158402 F, 70 years and older Specialist doctor	permente patch transdermal Alzheimer's disease	not reported	patches would not stick and curled on the sides	on same day discontinued recovered
C 158403 F, 70 years and older Specialist doctor	permente patch transdermal Alzheimer's disease	not reported	patches would not stick and curled on the sides	on same day discontinued recovered
D 158404 F, 70 years and older Specialist doctor	permente patch transdermal Alzheimer's disease	not reported	patches would not stick and curled on the sides	on same day discontinued recovered
E 158405 F, 70 years and older Specialist doctor	permente patch transdermal Alzheimer's disease	not reported	patches would not stick and curled on the sides	on same day discontinued recovered
F 159370 F, 70 years and older Specialist doctor	permente patch transdermal Alzheimer's disease	not reported	patches would not stick	on same day discontinued recovered
G 159371	permente patch	not reported	patches would not	on same day



Nederlands Bijwerkingen Centrum Netherlands Pharmacovigilance Centre

F, 70 years and older Specialist doctor	transdermal Alzheimer's disease		stick, adhesive plasters needed to keep them in place	discontinued recovered
H 159372 M, 70 years and older Specialist doctor	permente patch transdermal Alzheimer's disease	not reported	patches would not stick, were curling on the sides, would come off by themselves, when taking a patch off the skin was sticky	on same day discontinued recovered
I 159462 M, 70 years and older Other health professional	permente patch transdermal Alzheimer's disease	diazepam, metoprolol, acetylsalicylic acid, colchicine, allopurinol,	patches were curling on the sides, did not stick well, and would come off	6 week no change recovered
J 159465 F, 70 years and older Pharmacist	permente patch transdermal 9.5mg/24 hour dementia	mirtazapine, omeprazol	patches did not stick well	2 month unknown unknown
K 159738 F, 70 years and older Specialist doctor	permente patch transdermal Alzheimer's disease	not reported	patches would curl up and did not stick well	not reported unknown unknown
L 159739 M, 70 years and older Specialist doctor	permente patch transdermal Alzheimer's disease	not reported	patches did not stick well	not reported discontinued unknown
M 159921 M, 70 years and older Specialist doctor	permente patch transdermal 9.5mg/24 hour dementia	omeprazol, acetylsalicylic acid, ezetimibe/simvast atine, metoprolol	patches would come loose, traces of sticky material left on skin hallucination visual	on same day dose increased unknown
N 160105 F, 70 years and older Pharmacist	permente patch transdermal 4.6mg/24 hour dementia	not reported	patches would not stick and come off	25 days discontinued recovered
O 160188 F, 70 years and older Specialist doctor	permente patch transdermal 4.6mg/24 hour dementia	not reported	patches did not stick well and would come off pruritis, erythema	days discontinued unknown
P 160242 M, 70 years and older Pharmacist	permente patch transdermal	not reported	patches did not stick well and would come off	unknown unknown unknown
Q 160364 M, 70 years and older Pharmacist	permente patch transdermal 9.5mg/24 hour	allopurinol	patches would not stick	8 days discontinued recovered
R 160439 F, 70 years and older Other health professional	permente patch transdermal	not reported	patches would not stick and come off	2 months unknown unknown



S 160526 F, 70 years and older Specialist doctor	permente patch transdermal 9.5mg/24 hour	not reported	patches were curling on the sides, patches did not stick well	unknown unknown unknown
T 160728 F, 70 years and older Specialist doctor	permente patch transdermal	not reported	patches would not stick	unknown discontinued unknown
U 160729 F, 70 years and older Specialist doctor	permente patch transdermal 9.5mg/24 hour	not reported	patches would come off by themselves	unknown unknown unknown
V 161021 M, 70 years and older Specialist doctor	permente patch transdermal	not reported	patches would not stick	on same day discontinued recovered
W 161391 M, 70 years and older Specialist doctor	permente patch transdermal	not reported	patches would not stick and come off	unknown discontinued unknown

Discussion

Cases A-H, K-M, and S-W are from the same reporter. However, part of these pharmaceutical product complaints were ascertained by other health professionals and conveyed to this reporter, who in turn made all the reports to Lareb. Cases J and P are from the same pharmacist. Cases N and Q are from different pharmacists and case Q is from another specialist doctor. Cases G and J are possibly duplicates.

Patients A-I, L-N, Q and S-V were first treated with Rivastigmine (Exelon®) transdermal patches and had no adverse drug reactions. When Rivastigmine (Exelon®) was substituted for Permente® (rivastigmine) transdermal patches, adhesive problems were reported. In the other remaining cases the same adhesive problems were established. The following adhesive problems were described: patches would not stick, curling on the sides, coming loose by themselves and getting lost, adhesive plasters needed to keep the patches in place, and traces of sticky material left on skin when taking a patch off. Patient M had visual hallucinations a number of weeks after start of Permente® patches. Patient M was switched back to Rivastigmine (Exelon®) transdermal patches and the dose was increased. Patient O had erythema and pruritus after an unknown number of days after start of Permente® patches which worsened after the dose was increased. Subsequently, Permente® transdermal patches was withdrawn and substituted with galantamine.

In 10 cases, the latency period was on the same day after substituting from Exelon® to Permente® transdermal patches. Patients A-I and V were switched back to Exelon® transdermal patches and no longer had adhesive problems.

Between July 18th and October 15th 2013, Lareb also received 10 additional reports (from 3 different reporters) concerning other possible adverse drug



reactions mostly after substitution of Rivastigmine (Exelon®) to Permente® transdermal patches. These cases had the following adverse drug reactions: hallucinations (2x), skin rash/pruritus/allergic reaction, of which 2 with blisters (5x), burning sensation and pain on the application site (1x), sleep disturbed (1x), cognitive deterioration and dysphasia (1x) and abdominal discomfort (1x).

This signal has been raised on 31 October 2013. It is possible that in the meantime other information became available. For the latest information please refer to the website of the MEB www.cbgmeb.nl/cbg/en/default.htm or the responsible marketing authorization holder(s).