



12 June 2026

Medicine Supply Alert Notice

Rivastigmine 4.6mg/24hours and 9.5mg/24hours transdermal patches - Update

Priority: Level 2*

Valid until: late September 2026

Issue

1. Rivastigmine 4.6mg/24hours and 9.5mg/24hours transdermal patches are in limited supply until **late September 2026**.
2. Rivastigmine 13.3mg/ 24hours transdermal patch remains available but cannot support an uplift in demand.
3. Rivastigmine (Zeyzef) twice weekly 4.6 mg/24hours transdermal patch **remains available but cannot support an uplift in demand**.
4. Rivastigmine (Zeyzef) twice weekly 9.5 mg/24hours transdermal patch **remains available but cannot support uplift in demand**.
5. Unlicensed supplies of rivastigmine 4.6mg/24hours and 9.5mg/24hours transdermal patches are available.
6. Wholesalers will be monitoring sales carefully and may impose maximum sales volumes to support uninterrupted access for patients in primary care.
7. Alternative formulations of acetylcholinesterase (AChE) inhibitors remain available, except for galantamine modified release capsules which are also in [limited supply](#) (see Additional information section).
8. **This MSAN supersedes [MSAN\(2025\)51](#) issued on 9 December 2025.**

Advice and Actions

9. **NHS National Procurement at Public Services Delivery Scotland (PSDS) has advised that arrangements are in place for hospital pharmacy teams to order licensed rivastigmine 4.6mg/24hours and 9.5mg/24hours transdermal patches from AAH.**
10. **In primary care**, clinicians should not initiate new patients on daily rivastigmine transdermal patches until the supply issue has resolved, and should:
 - review patients on rivastigmine 4.6mg/24hours and 9.5mg/24hours transdermal patches to establish how much stock they have available;
 - prioritise remaining stock for patients unable to swallow oral formulations or who could not tolerate the gastrointestinal side effects;
 - consider prescribing the following for patients able to swallow solid oral dosage forms:
 - an oral rivastigmine formulation taking into account treatment history (see Additional information section); or
 - once daily donepezil tablets if a twice daily dosing regimen of oral rivastigmine is inconvenient for patients/carers;

- where these options are not suitable, consider prescribing unlicensed rivastigmine 4.6mg/24hours or 9.5mg/24hours transdermal patches, taking into account lead times for ordering (see Additional information section).
- Advice should be sought from specialists if the above options are not considered suitable and for further advice on treatment options.

Additional Information

Clinical information

11. Of the AChE inhibitors, only rivastigmine is available as a transdermal formulation.
12. Rivastigmine patches are licensed for the symptomatic treatment of mild to moderately severe Alzheimer's dementia. Abrupt cessation of treatment should be avoided as it can be associated with a sudden decline in cognition and function. If treatment has not been interrupted for more than three days, the patch can be resumed at the same dose, otherwise, treatment should be re-initiated with 4.6 mg/24 hours.

Dose conversion between available acetylcholinesterase inhibitors

13. The dose of rivastigmine released from the transdermal patch over 24 hours cannot be directly equated to the amount of rivastigmine contained in a capsule with respect to plasma concentration produced over 24 hours. Data are lacking on dose conversion from transdermal to oral rivastigmine. Pharmacokinetic models suggest drug exposure was not significantly different between the 4.6 mg/24hour patch and 3 mg twice daily (6 mg/day) capsule doses, or between the 9.5 mg/24-hour patch and 6 mg BD (12 mg/day) capsule doses.

Table 1: Dose conversion based on pharmacokinetic data*

Rivastigmine patch strength	Rivastigmine capsules or 2mg/ml oral solution sugar free
4.6mg/24hours	3mg twice daily
9.5mg/24hours	6mg twice daily

**If the equivalent oral dose causes GI side effects after switching, the dose should be lowered as needed and patients switched back to patches when the supply issue has resolved.*

Ordering unlicensed supplies

14. Pack sizes available are different from UK licensed stock and appropriate levels of stock will need to be ordered to meet patients need. The products available are as follows:
 - Rivastigmine Luye 4.6mg/24 packs of 30 patches
 - Rivastigmine Luye 4.6mg/24 packs of 42 patches
 - Rivastigmine Luye 9.5mg/24 packs of 42 patches
 - Rivastigmine Luye 9.5mg/24 packs of 60 patches
 - Rivastigmine Luye 9.5mg/24 packs of 84 patches

15. Health Boards can access stock directly via QMED Pharmaceutical by emailing unlicensed@qmedpharma.co.uk and quoting the reference “Luye Rivastigmine.”

Guidance on ordering and prescribing unlicensed imports

16. Any decision to prescribe an unlicensed medicine must consider the relevant guidance and Health Board governance procedures. Unlicensed imports do not undergo any central quality assessment or suitability evaluation. Therefore, any import must be locally assessed in line with local unlicensed medicines processes. Please see the links below for further information:

- [The supply of unlicensed medicinal products](#), Medicines and Healthcare products Regulatory Agency (MHRA)
- [Professional Guidance for the Procurement and Supply of Specials](#), Royal Pharmaceutical Society
- [Prescribing unlicensed medicines](#), General Medical Council (GMC).

Links to further information

- [SmPC – Rivastigmine](#)
- [SmPC – Donepezil](#)
- [SmPC – Galantamine](#)
- [BNF: Dementia](#)
- [NICE guidance \(TA217\)](#)

Specialist Pharmacy Service (SPS) website

17. The UK Department of Health and Social Care (DHSC) in conjunction with the Specialist Pharmacy Service (SPS) have launched an online Medicines Supply Tool, which provides up to date information about medicine supply issues. To access the online Medicines Supply Tool, you need to register with the [SPS website](#). Registration for access to the website is available to UK healthcare professionals and organisations providing NHS healthcare. The tool is located under the Tools tab and then click on the Medicines Supply option.

18. Prescribers, pharmacy professionals, and pharmacy procurement leads in Scotland are encouraged to register with the SPS website and use its Medicine Supply Tool to stay up to date concerning medicines supply disruptions. Please be aware that while medicines supply issues will appear on the SPS website, some of the recommended actions may not always be appropriate / relevant within the Scottish context.

Enquiries

19. Enquiries from Health Boards or healthcare professionals should be directed in the first instance to PharmacyTeam@gov.scot (primary care) or NSS.NHSSMedicineShortages@nhs.scot (secondary care).