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Trends of successful exelon (*Rivastigmine*) patch in geriatric patients with Dementia

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Skin reactions are one reason for termination of rivastigmine patch. The study goal was to identify factors associated with skin reactions from rivastigmine patch in older adults. A retrospective chart review with prospective skin assessment observational study was performed on all outpatients with Alzheimer's dementia at a specialized ambulatory geriatric evaluation clinic.

Demographic, clinical, and outcome variables were compared between the two groups (i.e., those with versus without skin reactions) using χ^2 or Fisher's exact test for cross-tabulations of nominal variables and independent samples and Student t-test, for continuous variables. Statistical differences between groups were considered significant when p-values were ≤ 0.05 .

A total of 33 patients were included with 24.2% males, 75.8% females and a mean age of 83 years. Race included Caucasian (90.9%) and Hispanic (9.09%). Patients lived at home with a spouse (39.39%), home with caregiver (24.24%) or in an assisted-living facility (6.06%).

A statistically significant finding was MMSE score of 17 ($p < 0.01$) and a skin reaction. Comorbidities included, 15.2% had diabetes and 66.7% had hypertension. On average sodium plus potassium values were 139 mEq/L and 4 mEq/L respectively. Bathing was on average 3 baths weekly. Concomitant medications included: memantine (39.4%), antidepressant (51.5%), antipsychotic (12.1%) with 24.2% not taking any medications.

Two statistically significant skin reactions seen were erythema where the patch was applied and pruritis ($p < 0.01$). There were no significant skin reactions resulting in rivastigmine patch discontinuation.

This small cohort showed one statistically significant trend: the lower MMSE score the increase risk of a skin reaction.

Biography

Hoffman has completed her Pharm.D. from the University of Southern California, School of Pharmacy in Los Angeles, CA, USA and postdoctoral studies from University of Maryland at Baltimore Mental Health System. She is the director of PGY-1 pharmacy residency in Geriatrics at the Los Angeles Jewish Home for the Aged, and an Associate Professor at Western University of Health Sciences where she is the expert in neurology. She has published more than 25 papers in reputed journals and has been serving as an Associate Editor of the *California Pharmacist Journal*.

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