

# Zeyzelf<sup>®</sup> rivastigmine twice weekly transdermal patch

Offer your mild to moderately severe  
Alzheimer's Dementia patients established  
efficacy with the convenience of  
twice weekly application.<sup>1</sup>

**Zeyzelf<sup>®</sup> is indicated for the  
symptomatic treatment of  
mild to moderately severe  
Alzheimer's Dementia.<sup>1</sup>**

Prescribing information and adverse event reporting can  
be found by scanning the QR code on the back page.

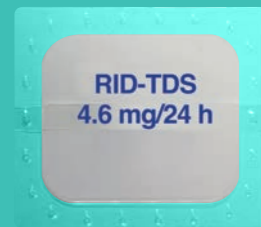
For further information please visit:  
[www.luye.co.uk](http://www.luye.co.uk)

UK-ZEY-95 | June 2025

# Zeyzelf® provides established efficacy with the convenience of twice weekly application

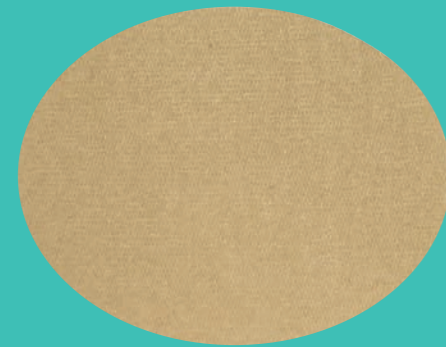
Zeyzelf® (rivastigmine) is the only twice weekly transdermal patch available in the UK for the treatment of mild to moderately severe Alzheimer's Dementia (AD).<sup>1</sup>

Zeyzelf® is a translucent polymer matrix patch designed to allow release of rivastigmine for up to 4 days, including an adhesive cover to optimise adhesion.<sup>1</sup>



Images not to scale, but proportionate.

Zeyzelf® patch



Adhesive cover

Developed by Luye Pharma, Zeyzelf® offers a convenient and effective alternative to oral AChE inhibitors, addressing key challenges in AD management.

**Zeyzelf® provides established efficacy with the convenience of twice weekly application.**



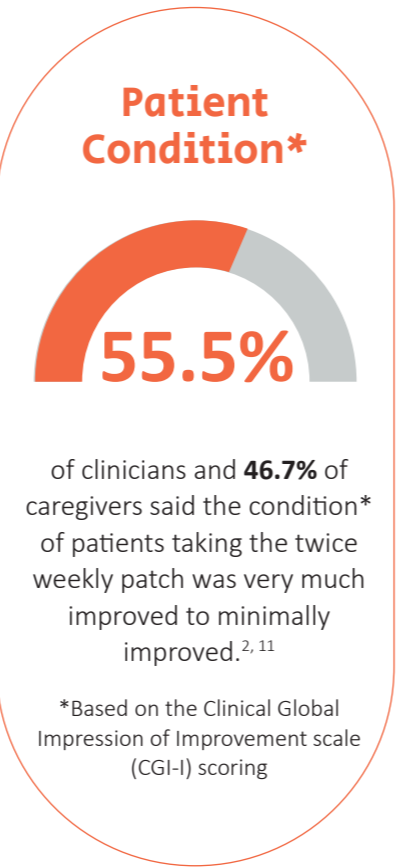
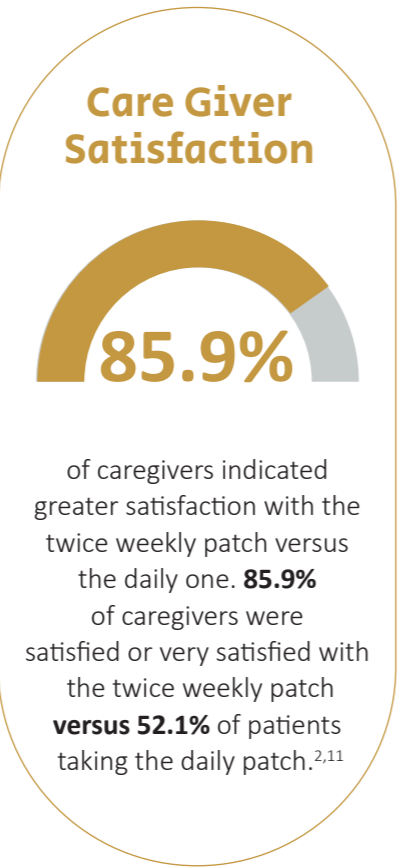
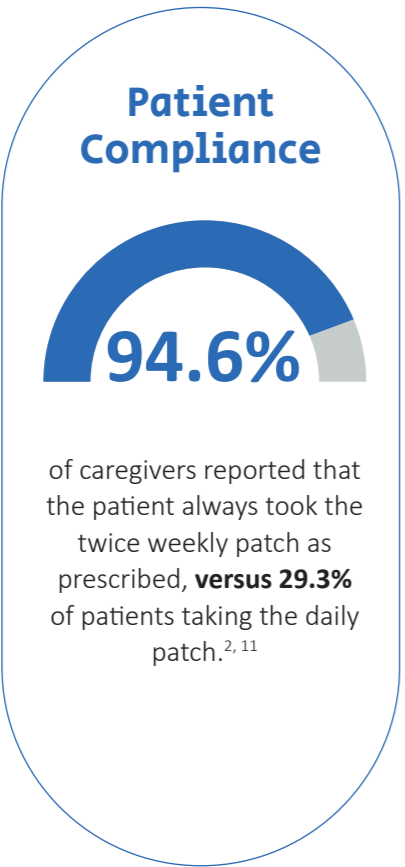
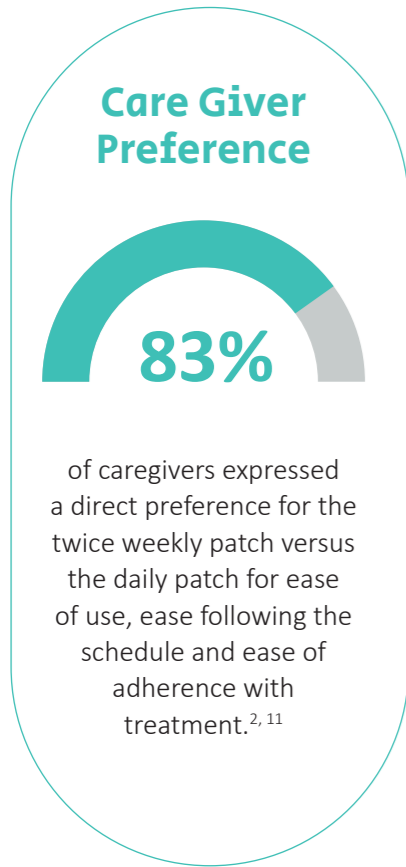
**The patch is available in 4.6 mg/24 h and 9.5 mg/24 h dose strengths<sup>1</sup>. The 9.5 mg/24 h twice weekly patch provides similar efficacy to the highest daily dose of oral rivastigmine (6 mg twice daily).**

## Nice guidance NG97:<sup>12</sup>

Rivastigmine is a recommended AChE inhibitor for managing mild to moderate Alzheimer's disease.

When prescribing an AChE, treatment should usually be started with the drug with the lowest acquisition cost. However, an alternative AChE inhibitor may be prescribed if it is more suitable, considering factors like side effects, expectations about adherence, medical comorbidity, potential drug interactions and dosing schedules.

# Zeyzelf® demonstrates improved outcomes compared to single day rivastigmine patches<sup>11</sup>



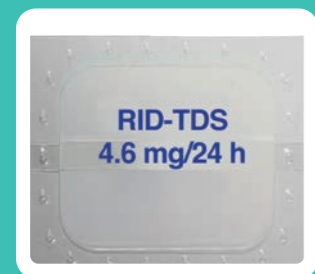
Extracted from García-Alberca J et al. Journal of Alzheimer's Disease, November 2024  
 A study of 92 patients who had been treated with daily rivastigmine patch for at least six months prior to switching to twice weekly patch were evaluated at entry, 12 and 24 weeks using the Alzheimer's Disease Caregiver Preference Questionnaire.



Step

**one**

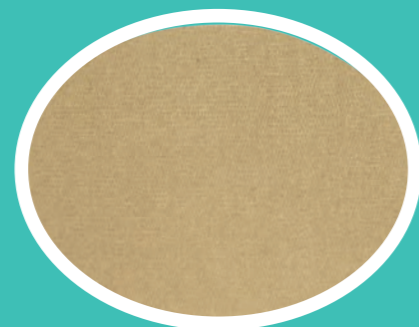
**Delivery with  
the transdermal  
patch**



Step

**two**

**Protect with  
the adhesive  
cover**



**twice  
a week**

**The only twice  
weekly transdermal  
rivastigmine patch**

Step

**one**

**Delivery with the  
transdermal patch**

**The benefit of transdermal delivery**



# Step One

## Addressing the Challenges in patient care

### Dysphagia<sup>13</sup>

**Dysphagia (difficulty swallowing) is common among older adults with AD and can make it challenging for patients to adhere to oral AChE inhibitor treatments like donepezil or galantamine tablets or rivastigmine capsules.**

**63.9% and 90% of patients with mild and moderate Alzheimer's respectively experienced dysphagia compared with 40% of cognitively intact patients.<sup>13</sup>**

**The prevalence of dysphagia in moderate to severe dementia is 93%, however, swallowing difficulties arise from the early stages of the Alzheimer's Disease.<sup>17</sup>**

Transdermal patches such as Zeyzelf® offer a non-oral option for patients who may have trouble swallowing pills, ensures consistent delivery of medication and may reduce the risk of missed doses due to swallowing issues.<sup>18</sup> Additionally, studies have shown that transdermal administration can improve treatment adherence and patient comfort compared to oral forms.<sup>17</sup>

### Drug to drug interactions

**When managing complex treatment regimens for AD patients, considering the drug-drug interaction potential of AChE inhibitors can help optimise therapy and reduce the risk of adverse effects.**

Zeyzelf® twice weekly patches offer significant advantages for AD patients, particularly in terms of drug-drug interactions. Unlike other AChE inhibitors, rivastigmine demonstrates a low potential for drug-drug interactions, making it an option for patients on polypharmacy medications.<sup>1</sup>

Bypassing the first-pass metabolism in the liver, the patch further reduces the risk of interactions with other drugs. This is especially beneficial for elderly patients who may have compromised liver function or who may be on multiple medications that are metabolised by the liver.<sup>7</sup>

For healthcare providers managing complex treatment regimens, the low interaction potential of rivastigmine patches may help simplify medication management and reduce the need for dose adjustments or frequent monitoring.<sup>17</sup>



### Side effects<sup>3,15,19</sup>

**The rivastigmine transdermal patch tends to have a favourable side effect profile, particularly regarding gastrointestinal effects and overall tolerability.**

Zeyzelf's transdermal delivery system generally has a lower propensity to cause side effects most commonly associated with oral AChE inhibitors from 1 in 10 to 1 in 100 (see page 23).

### Gastrointestinal (GI) issues<sup>9</sup>

**GI side effects are among the most common Adverse Events (AEs) associated with oral AChE inhibitors in AD, sometimes warranting drug alternatives.**

Consequently, the transdermal route minimises common side effects associated with oral AChEs, like nausea, vomiting and diarrhoea:

This improved tolerability is particularly beneficial for older patients who may be more susceptible to GI issues<sup>20</sup>

### Transdermal delivery in AD

Rivastigmine is the only acetylcholinesterase (AChE) inhibitor that is available in a transdermal formulation in the UK.

Transdermal patches offer superior tolerability vs orally administered rivastigmine.<sup>3\*</sup>

**Fewer patients reported nausea (7.2% vs 23.1%) and vomiting (6.2% vs 17%) on transdermal patches compared with oral rivastigmine.<sup>3</sup>**

Transdermal administration delivers reduction in certain side effects vs oral rivastigmine due to:<sup>3,15</sup>

- Avoiding the first pass effects<sup>15</sup> Lowered maximum plasma concentration (C<sub>max</sub>) and prolonged time to reach C<sub>max</sub> (T<sub>max</sub>) for the same exposure<sup>3</sup>
- Reduced fluctuations of plasma drug levels and continuous delivery<sup>3,15</sup>

If adverse events occur, drug delivery can be promptly ceased by simple patch removal.<sup>15</sup> In addition to lower risk of side effects, transdermal route of administration can provide greater adherence to the treatment regimen and has less risk of dose dumping compared with the oral route. This is especially important in older patients who may need concomitant treatment for multiple conditions.<sup>28</sup>

\*Data from a study comparing 9.5 mg/24 h daily patch (n=229) vs 12 mg/day oral rivastigmine (n=266).<sup>2</sup>

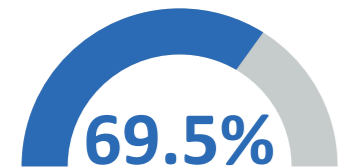
# Step one

## Addressing the Challenges in patient care

### Lower risk of overdose<sup>16</sup>

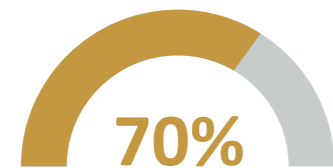
AD patients are at an elevated risk of medication errors and unintentional overdoses. Patients may forget their dose or whether they've already taken it, leading to accidental overdoses.

#### Research has shown



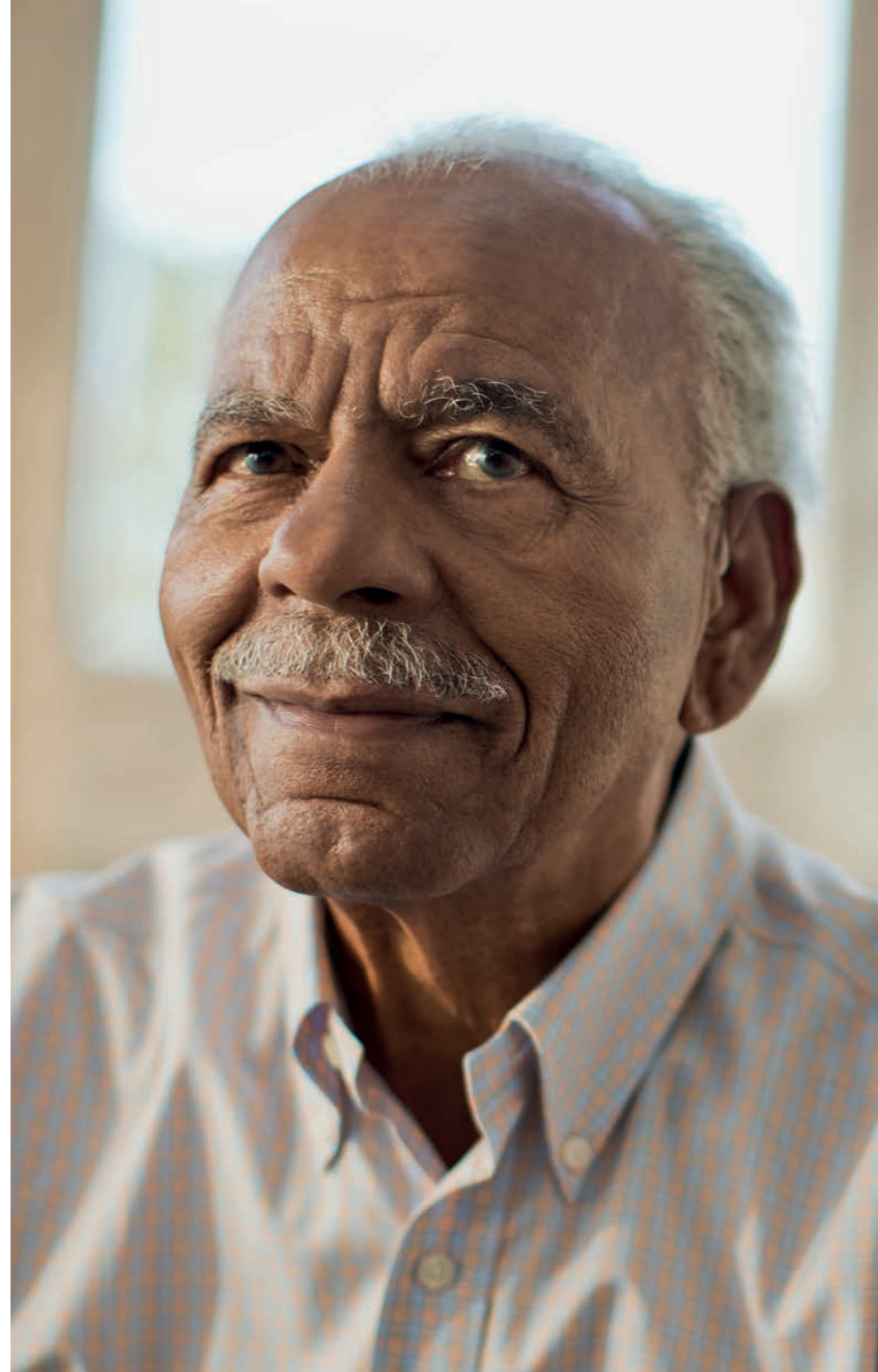
of people with dementia are twice as likely to be hospitalised with unintentional drug poisoning compared to those without dementia (**69.5 vs 31.6 per 100,000**).<sup>29</sup>

#### Carer preference



of **1,059 caregivers** preferred transdermal patches to capsules overall\*. Carers preferred the patch over capsules for the ease of use and following the schedule. Carers also reported greater satisfaction and less interference with daily life with patches compared with the capsules.<sup>29</sup>

\*The Ideal study compared rivastigmine once daily patch with the capsule<sup>26</sup>



# Step two



## Protect with the adhesive cover

### Security and piece of mind

# Step two

Protect with the adhesive cover

## Importance of adherence

Skin adhesion is one of the most important functional properties for a transdermal patch and is critical to the tolerability, efficacy and quality of the patch.<sup>5</sup>

Zeyzelf® twice weekly patches come with an oval shaped adhesive cover to optimise adherence to the skin. In a study comparing the twice weekly Zeyzelf® patch and the Exelon daily patch, Zeyzelf® demonstrated superior adhesion properties compared to the Exelon daily patch, despite the longer dosing interval.<sup>4</sup>

Satisfactory adhesion\* in almost 95% of patients vs 67% for Exelon daily patches<sup>4</sup>

The Zeyzelf® twice weekly patch with its adhesive cover provides security with peace of mind for the patients and their caregivers.

\* Figures based on data from Schurad B, et al.

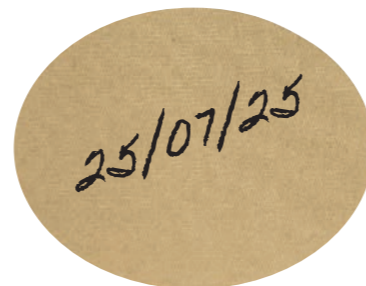
## Visual indicator of compliance<sup>1</sup>

Zeyzelf® twice weekly patches offer a unique and simple solution to improve medication adherence in Alzheimer's patients:

### Visual marker

Helping minimise the risk of multiple dosing errors

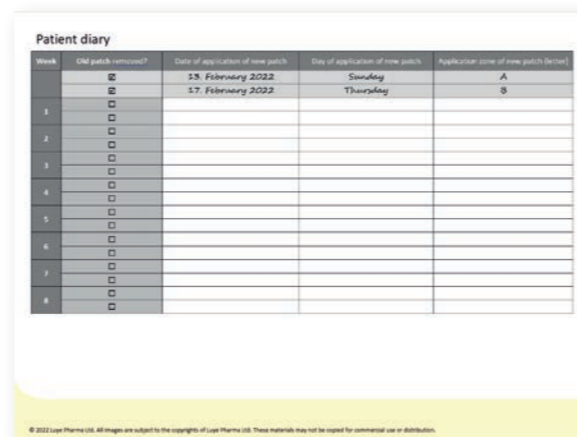
**Direct Notation:** The Zeyzelf® patch cover allows for direct writing of the date and time of application, providing a clear visual indicator of when the patch was last changed



### Patient Diary:

Please scan the QR code for information for use and a patient diary or visit:

<https://www.medicines.org.uk/emc/product/14957/rmms>



**Additional security:** with peace of mind for patients and caregivers

## Cost<sup>1,10,30</sup>

Zeyzelf® is competitively priced and is more than

50% less expensive than the originator single day patch, Exelon.

For patients currently on AChE tablets or capsules who experience swallowing difficulties or tolerability issues, Zeyzelf® twice weekly patches offer a compelling alternative rather than changing to orodispersible or liquid formulations:

List price costs of other available single day rivastigmine patches are shown below for comparison.

### NHS List Prices/Pack

Brand Name	Manufacturer	4.6mg/24h	9.5mg/24h	13.3mg/24h
Exelon 30 patches	Novartis	£77.97	£77.97	£77.97
Alzest 30 patches	Dr Reddys	£35.10	£19.97	£54.58
Almuriva 30 patches	Sandoz	£77.97	£77.97	£77.97
Zeyzelf® 8 patches	Luye	£35.09	£35.09	n/a
<b>Drug Tariff (INN)</b>		£77.97	£19.97	£77.97

This table has been compiled from data on: <https://dmd-browser.nhsbsa.nhs.uk/>

The price comparison is based on Zeyzelf 28 days versus Exelon, Alzest and Almurvia at 30 days.



# twice a week

**The only twice weekly  
transdermal rivastigmine  
patch**

# twice a week

The benefits of transdermal delivery

That help address the challenges in patient care

## Zeyzelf® is the only transdermal rivastigmine patch with twice weekly application<sup>1</sup>

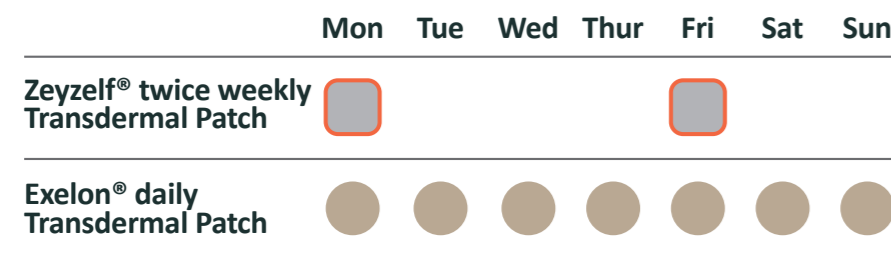
Less frequent application vs a daily patch gives the option of dosing (application) free days for the carer and patients, e.g., weekends could be dosing (application) free if the patches are applied on a Thursday and Monday or Friday and Tuesday.

Establishing fixed days of application will help the patient and caregiver to maintain a routine and adherence to the medication.<sup>4</sup>

## Application of Zeyzelf® patch and adhesive cover<sup>1</sup>

With the ease of fixed day twice weekly dosing, carers can more easily plan the dosing schedule to the patient's and their own convenience.<sup>1</sup>

### Example schematic representation comparing patch application of Zeyzelf to a daily patch



Example of a dosing schedule. Twice weekly patches should be applied on fixed days, at an interval of 4 and 3 days, respectively.<sup>1</sup>

## Instructions for use

For information on Instructions for use including medication record sheets for patients that have been prescribed Zeyzelf Patch (rivastigminetransdermal system) to ensure the correct use of the patch please scan the QR code Or visit:

<https://www.medicines.org.uk/emc/product/14957/rmms>



## The benefits of twice weekly administration<sup>1</sup>

Helping to simplify the lives of patients as well as their caregivers with:

- Reduced pill burden for patients with multimorbidity
- Suitable for patients who have trouble with, or are unable or unwilling to swallow pills or difficulty in swallowing, in general - a trait closely related to frailty in patients with mild to moderate AD<sup>17</sup>
- Reduced caregiver burden due to application twice a week instead of daily

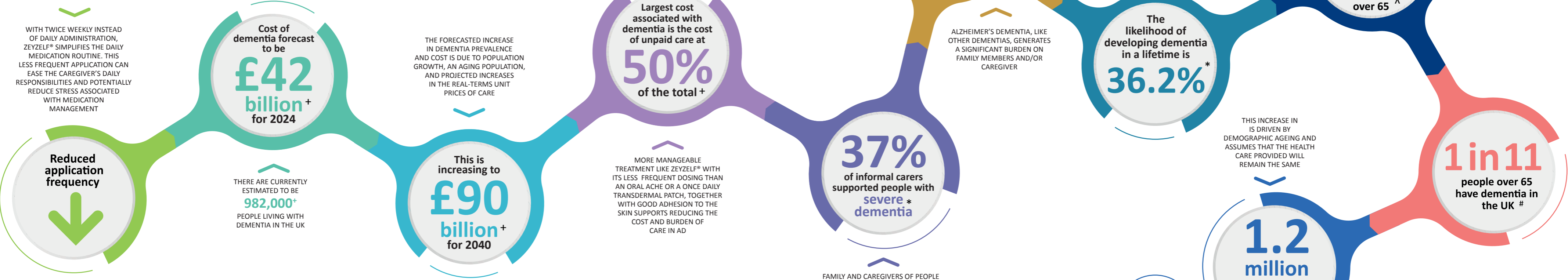


# twice a week

## The benefits of twice weekly administration

### Cost and burden of care - Twice weekly can reduce carer burden

Zeyzelf's twice weekly application offers several advantages over both oral AChE inhibitors and daily patches, addressing key challenges faced by caregivers:



References  
 + [https://www.alzheimers.org.uk/about-us/policy-and-influencing/dementia-scale-impact-numbers?\\_gl=1\\*uhw69o\\*\\_up\\*MQ..\\*\\_gs\\*MQ..&gclid=Cj0KCQjwmK\\_CBhCEARIsAMKwC46x46dChBOP2i6Sxa2JFFQZHNN77qtjdQ1CrMA4cHZF-40tdUkVPgaAmMkEALw\\_wcB&gclid=aw.ds&gclid=0AAAAAC\\_Cuv0a3tfcBCaQ2sWHmos5Otp3](https://www.alzheimers.org.uk/about-us/policy-and-influencing/dementia-scale-impact-numbers?_gl=1*uhw69o*_up*MQ..*_gs*MQ..&gclid=Cj0KCQjwmK_CBhCEARIsAMKwC46x46dChBOP2i6Sxa2JFFQZHNN77qtjdQ1CrMA4cHZF-40tdUkVPgaAmMkEALw_wcB&gclid=aw.ds&gclid=0AAAAAC_Cuv0a3tfcBCaQ2sWHmos5Otp3) [Last accessed: June 2025s]  
 \* <https://www.ohe.org/publications/dementia-uk-estimating-impact-research-investment>  
 ^ Lakey, L (2009) Counting the cost: Caring for people with dementia on hospital wards published by the Alzheimer's Society. Available online at: [https://www.alzheimers.org.uk/sites/default/files/2018-05/Counting\\_the\\_cost\\_report.pdf](https://www.alzheimers.org.uk/sites/default/files/2018-05/Counting_the_cost_report.pdf) [Last accessed: June 2025]  
 # NHS. What is dementia. Available online at: <https://www.nhs.uk/conditions/dementia/about-dementia/what-is-dementia/> [Last accessed: June 2025s]

# twice a week

## Changing medication

### Initiating and changing to Zeyzelf® twice weekly transdermal patch

#### Recommended dosing:



for at least 4 weeks at the start of treatment

#### Patients can be simply changed to Zeyzelf® twice weekly from donepezil treatment.

**No washout period is required** while changing your patients from donepezil to Zeyzelf® patches.

**Immediate change from donepezil to Zeyzelf® can be made** to avoid the potential wash out induced cognitive decline in patients.<sup>27</sup>

- Changing patients from donepezil to Zeyzelf® without a wash-out period is well tolerated and does not cause serious adverse events<sup>27</sup>

Zeyzelf® offers a comprehensive solution for the management of AD, improving patient care and quality of life for both patients and caregivers.

#### Key advantages of Zeyzelf®

##### Good patient adherence:<sup>4</sup>

The twice weekly dosing regimen reduces the daily medication burden, potentially leading to improved treatment compliance.

##### Consistent drug delivery:<sup>4,5</sup>

Transdermal delivery of the patch ensures steady and controlled release of rivastigmine, minimising fluctuations in plasma drug levels and potentially reducing side effects.

##### Reduced gastrointestinal side effects:<sup>3</sup>

By bypassing the gastrointestinal tract, Zeyzelf® minimises common side effects like nausea, vomiting, and diarrhoea often associated with oral AChE inhibitors.

##### Dual enzyme inhibition:<sup>6</sup>

Rivastigmine uniquely inhibits both acetylcholinesterase (AChE) and butylcholinesterase (BuChE), potentially providing additional benefits in long term management of AD symptoms.

##### Low drug-drug interaction potential:<sup>4,7</sup>

Rivastigmine demonstrates a low potential for drug-drug interactions, making it a viable option for patients on polypharmacy medications.

##### Reduced caregiver burden:<sup>8</sup>

The twice weekly application simplifies medication management for caregivers, easing their daily responsibilities and potentially reducing stress.

##### Visual indicator of compliance:<sup>9</sup>

The Zeyzelf® patch cover allows for direct notation of application date and time, aiding in tracking medication adherence.

##### Good adhesion:<sup>4</sup>

The Zeyzelf® patch cover improves adhesion when compared to the daily Exelon patch, ensuring reliable drug delivery.

##### Cost-effectiveness:

Zeyzelf® is less expensive than the original daily transdermal patch (Exelon)<sup>9</sup> and orodispersible or liquid donepezil formulations.<sup>10</sup>

# twice a week

## Summary

### Clinical Benefit

- Rivastigmine demonstrates a low potential for drug-to-drug interactions<sup>14</sup>
- Lower risk of side effects like vomiting, nausea, reduced risk of diarrhoea and improved tolerability for sensitive stomachs<sup>3,15,19</sup>
- An alternative treatment option for patients who have trouble swallowing



### Application

- Zeyzelf® demonstrated better adhesion than single day patch\*<sup>4</sup> despite the longer dosing interval<sup>4</sup>
- The adhesive cover provides security with peace of mind for the patients and their caregivers<sup>1</sup>
- The patch cover allows for direct writing of the date and time of application<sup>1</sup>



### Change to cost benefit and carer burden

- Zeyzelf® is over **50%** less expensive than the originator single day patch, Exelon<sup>4</sup> as per list price
- With only twice a week administration, Zeyzelf® reduces the daily medication burden<sup>1,8</sup>
- This less frequent application can ease the caregiver's daily responsibilities and medication management<sup>8</sup>



### Patient Compliance

- **94.6%** of caregivers reported that the patient always took the twice weekly patch as prescribed, versus **29.3%** of patients taking the daily patch<sup>11</sup>



## Comparing adverse event challenges<sup>19</sup>

Adverse events	Donepezil (oral)	Rivastigmine (oral)	Rivastigmine (patch)	Galantamine (oral)	Memantine (oral)
<b>Very common (≥ 1/10)</b>	Diarrhoea, nausea, headache	Anorexia, dizziness, nausea, vomiting, diarrhoea		Nausea vomiting	
<b>Common (≥1/100)</b>	Common cold, anorexia, hallucinations, agitation, aggressive behaviour, abnormal dreams and nightmares, syncope, dizziness, insomnia, vomiting, abdominal disturbance, rash, pruritis, muscle cramps, urinary incontinence, fatigue, pain	Decreased appetite, nightmares, agitation, confusion, anxiety, headache, somnolence, tremor abdominal pain and dyspepsia, sweating fatigue and asthenia, malaise, weight loss	Application site skin reactions, urinary incontinence, rash, nausea, vomiting, diarrhoea, dyspepsia, abdominal pain, headache, syncope, dizziness, anxiety, depression, delirium, agitation, anorexia, decreased appetite, urinary tract infection	Decreased appetite, hallucination, depression, syncope, dizziness; tremor, headache, somnolence, lethargy, bradycardia, hypertension, abdominal pain and discomfort, diarrhoea, dyspepsia, muscle spasms, fatigue, asthenia, malaise, weight loss, fall	Drug hypersensitivity, somnolence, dizziness, balance disorders, hypertension, dyspnoea, constipation, elevated liver function test, headache

Table adapted from Taylor DM, et al, The Maudsley Prescribing Guidelines in Psychiatry 2021, 14th edition

## References

1. Zeyzelf® rivastigmine transdermal patch, Summary of Product Characteristics, Luye Pharma Ltd. <https://www.medicines.org.uk/emc/product/14957/smpc#gref>. (Last accessed June 2025).
2. Piñol Ripoll G, Salas Carrillo M. Patient Prefer and Adherence. <https://doi.org/10.2147/PPA.S510634>. (Last accessed June 2025).
3. Winblad B, et al. *Int J Geriatr Psychiatry*. 2007;69(4 Suppl 1):S14–22. <https://pubmed.ncbi.nlm.nih.gov/17646619/>. (Last accessed June 2025).
4. Schurad B, et al. *Current Alzheimer Research*. 2022;19,541–553. <https://pubmed.ncbi.nlm.nih.gov/36017827/>. (Last accessed June 2025).
5. Wokovich A M et al. *Eur J Pharm Biopharm*. 2006;64(1):1–8. <https://www.sciencedirect.com/science/article/abs/pii/S0939641106000804>. (Last accessed June 2025).
6. Poirier J. *Int J Clin Pract Suppl*. 2002;(127):6–19. <https://pubmed.ncbi.nlm.nih.gov/12139368/>. (Last accessed June 2025).
7. Birks JS, et al. *Cochrane Database Syst Rev*. 2015 Sep 22;9(9):CD001191. <https://pmc.ncbi.nlm.nih.gov/articles/PMC7050299/>. (Last accessed June 2025).
8. Care and Nursing. Available at: <https://careandnursing-magazine.co.uk/treatment-of-alzheimers-disease/>. (Last accessed June 2025).
9. Electronic Medicines Compendium (EMC). Zeyzelf® SmPC. Available online at: <https://www.medicines.org.uk/emc/product/14957/smpc>. (Last accessed June 2025).
10. Comparative costs against non-tablet formulations table. Data on file.
11. García-Alberca JM, De La Guía P, Gris E, et al. *Journal of Alzheimer's Disease*. 2024;102(3). <https://journals.sagepub.com/doi/abs/10.1177/13872877241292018> (Last accessed June 2025).
12. NICE guideline [NG97] June 2018. Available at: <https://www.nice.org.uk/guidance/ng97>. (Last accessed June 2025).
13. Farlow MR. *Int J Clin Pract Suppl*. 2002;127(3):37;–44. <https://pubmed.ncbi.nlm.nih.gov/12139366/>. (Last accessed June 2025).
14. Grossberg GT, et al. *Int J Geriatr Psychiatry*. 2000;15(3):242–247. [https://onlinelibrary.wiley.com/doi/10.1002/\(SICI\)1099-1166\(200003\)15:3%3C242::AID-GPS110%3E3.O.CO;2-7](https://onlinelibrary.wiley.com/doi/10.1002/(SICI)1099-1166(200003)15:3%3C242::AID-GPS110%3E3.O.CO;2-7). (Last accessed June 2025).
15. Sozio P, et al. *Neuropsychiatr Dis Treat*. 2012;8:361–368. <https://pmc.ncbi.nlm.nih.gov/articles/PMC3428243/>. (Last accessed June 2025).
16. Poison: <https://www.poison.org/articles/donepezil-can-be-toxic-if-too-much-is-taken-or-child-swallows-174>. (Last accessed June 2025).
17. Guener M, et al. *BMC Geriatrics*. 2023;23:304. <https://pubmed.ncbi.nlm.nih.gov/37198547/>. (Last accessed June 2025).
18. Parsons C. Withdrawal of Antidementia Drugs in Older People: Who, When and How? *Drugs Aging* 2016; 33:545-556. <https://pubmed.ncbi.nlm.nih.gov/27393698/>. (Last accessed June 2025).
19. David M Taylor et al, *The Maudsley Prescribing Guidelines in Psychiatry 2021, 14th edition* <https://onlinelibrary.wiley.com/doi/book/10.1002/9781119870203?msocid=3cd043fed58468bf2ef0563dd43f692b>. (Last accessed June 2025).
20. Dunic I, et al. *Can J Gastroenterol Hepatol*. 2019 Jan 17;2019:6757524. scale-impact-numbers. <https://www.cambridge.org/core/books/abs/reichels-care-of-the-elderly/gastrointestinal-disorders/7D4ACC36F168039C49B403FCD8FC6B75>. (Last accessed June 2025).
21. Alzheimer's Society. What are the costs of dementia care in the UK. Available online at: <https://www.alzheimers.org.uk/about-us/policy-and-influencing/dementia-scale-impact-numbers>. (Last accessed June 2025).
22. Chen Y, et al. *Lancet Public Health*. 2023;8(11):e859–e867. <https://pubmed.ncbi.nlm.nih.gov/37898518/>. (Last accessed June 2025).
23. NHS Oxford Health Library Services. Dementia care. Available online at: <https://www.oxfordhealth.nhs.uk/library/cpd-zone/cpd-by-topic/dementia-care/>. (Last accessed June 2025).
24. Lakey L, (2009) Counting the cost: Caring for people with dementia on hospital wards published by the Alzheimer's Society. Available online at: [https://www.alzheimers.org.uk/sites/default/files/2018-05/Counting\\_the\\_cost\\_report.pdf](https://www.alzheimers.org.uk/sites/default/files/2018-05/Counting_the_cost_report.pdf) (Last accessed June 2025).
25. Patient Information Leaflet. <https://www.medicines.org.uk/emc/product/14957/pil>. (Last accessed June 2025).
26. Mitchell RJ, et al. *Int Psychogeriatr*. 2015 Nov;27(11):1757-68. [https://www.intpsychogeriatrics.org/article/S1041-6102\(24\)00675-6/fulltext](https://www.intpsychogeriatrics.org/article/S1041-6102(24)00675-6/fulltext). (Last accessed June 2025).
27. Sadowsky CH, et al. *Prim Care Companion J Clin Psychiatry*. 2005;7(2):43–48. [https://www.researchgate.net/publication/244949798\\_Switching\\_From\\_Donepezil\\_to\\_Rivastigmine\\_Is\\_Well\\_Tolerated](https://www.researchgate.net/publication/244949798_Switching_From_Donepezil_to_Rivastigmine_Is_Well_Tolerated). (Last accessed June 2025).
28. Vadivelu N, Hines R L. *Clin Interv Aging*. 2008;3(3):421–430. <https://pmc.ncbi.nlm.nih.gov/articles/PMC2682375/>. (Last accessed June 2025).
29. Blesa R, et al. *Neurology*. 2007;69(4 suppl 1):S23–S28. <https://pubmed.ncbi.nlm.nih.gov/17646620/>. (Last accessed June 2025).
30. Dm+d. <https://dmd-browser.nhsbsa.nhs.uk/>. (Last accessed June 2025).

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