

## Transdermal patches available in New Zealand Updated September 2019

(Note: not all are funded)

Medicine	Trade name	Frequency	Specific warnings
Buprenorphine	NORSPAN® transdermal	Once weekly	Remove prior to defibrillation, cardioversion, diathermy, MRI
Clonidine	Catapres <sup>®</sup> -TTS <sup>®</sup>	Once weekly	Remove prior to defibrillation, cardioversion, diathermy, MRI  Must be withdrawn gradually to avoid severe rebound hypertension
Clonidine	Clonidine Transdermal System (Mylan)	Once weekly	Remove prior to defibrillation, cardioversion  Must be withdrawn gradually to avoid severe rebound hypertension
Estradiol	Estradot® transdermal	Every 3–4 days (Twice weekly)	
Estradiol	Climara <sup>®</sup> patch	Once weekly	
Fentanyl	Fentanyl Sandoz®	72-hourly	Use with caution in opioid-naïve patients
Glyceryl trinitrate	Nitroderm TTS® transdermal Minitran™	Usually 12–18 hours on, 6–12 hours off, change daily	Nitroderm TTS® only: remove prior to defibrillation, cardioversion, diathermy, MRI
Hyoscine hydrobromide	Scopoderm TTS <sup>®</sup> Transderm Scōp <sup>®</sup>	72-hourly	Remove prior to defibrillation, cardioversion, diathermy, MRI Withdrawal effects can occur including nausea, vomiting, balance disorders, dizziness and blurred vision
Lidocaine (lignocaine) and prilocaine	EMLA® patch	Usually apply for not less than one hour, and not more than 5 hours	Remove prior to defibrillation, cardioversion, diathermy, MRI
Nicotine	Habitrol <sup>®</sup> patch Nicotinell <sup>®</sup> TTS patch	24-hourly	Remove prior to defibrillation, cardioversion, diathermy, MRI
Nicotine	Nicorette® Invisipatch®	16-hourly	Remove prior to defibrillation, cardioversion, diathermy, MRI
Oxybutynin	Kentera® transdermal Oxytrol® transdermal	Every 3–4 days (Twice weekly)	
Rivastigmine	Exelon <sup>®</sup> transdermal Rivastigmine Patch (Generic Partners)	24-hourly	
Testosterone	Androderm <sup>®</sup> transdermal	24-hourly	Remove prior to defibrillation, cardioversion, diathermy, MRI

MRI = magnetic resonance imaging