

## Alunbrig

Dubai · access guide

# How to access Alunbrig for ALK-positive metastatic non-small cell lung cancer from Dubai: 2026 emirate pathway via Dubai oncology centres and cross-emirate referral

By Reserve Meds clinical & regulatory team. Last reviewed 2026-05-20.

If your lung cancer is ALK positive, the treatment plan shifts to a class of oral targeted therapies known as ALK inhibitors. Alunbrig is one of them. This page is the Reserve Meds operational guide for accessing Alunbrig from the Emirate of Dubai.

Alunbrig is the brand name for brigatinib, a second-generation oral ALK tyrosine kinase inhibitor developed by Takeda Oncology. Once-daily oral therapy after a 7-day lead-in. It has the strongest published evidence of brain-metastasis response among the ALK inhibitor class (78 percent intracranial response rate in the ALTA-1L pivotal trial for patients with measurable CNS disease at baseline).

## Regulatory status in the UAE

Brigatinib is on the Emirates Drug Establishment (EDE) registered specialty medicines list. Both routes can carry brigatinib into Dubai: established institutional import via a hospital pharmacy and named-patient or specialty importer for cases where the dispensing hospital does not stock the product directly. Dubai Health Authority licensing for prescribing thoracic and medical oncologists is mature and brigatinib falls within standard specialty oncology practice.

What this means for you in practice: the regulatory gate is not the bottleneck. The bottleneck is matching you to the right Dubai thoracic oncology service, confirming the molecular workup is current and reproducible, and getting the supply chain lined up before treatment day. Reserve Meds operates in that bottleneck.

## Where adult ALK+ NSCLC is treated in Dubai

Brigatinib is an oral therapy. You need a thoracic oncology service with two specific capabilities: routine ALK testing (NGS preferred) and neuro-oncology coverage for CNS surveillance. Brain metastases are common in ALK+ disease and the imaging cadence matters.

The Dubai depth bench for adult ALK+ NSCLC includes:

- **Mediclinic City Hospital and Mediclinic Parkview.** The dominant private-sector oncology services in Dubai with comprehensive cancer centre services, NGS access, and brigatinib-experienced thoracic oncologists. - **American Hospital Dubai.** Oncology service includes thoracic oncology with imaging and pharmacy depth on site. - **King's College Hospital London Dubai.** UK-trained oncology service with international protocol alignment. - **Saudi German Hospital Dubai.** Oncology service with thoracic oncology continuity. - **NMC Specialty Hospital, Aster Hospitals, and Burjeel Hospital Dubai.** Private-sector secondary services with oncology continuity and referral pathways into the tertiary network. - **Dubai Hospital (DHA).** Public-sector tertiary; oncology service. - **Rashid Hospital.** Tertiary general hospital with oncology continuity.

For complex molecular tumour board review, the standard cross-emirate referral is to Cleveland Clinic Abu Dhabi or Sheikh Shakhbout Medical City. Many Dubai-based oncologists co-manage their ALK+ NSCLC patients with the Abu Dhabi services for the deepest molecular and neuro-oncology input.

Reserve Meds books the introductory consultation at the Dubai service that matches your profile (insurance, geography, prior treatments, brain-mets burden, and language preference). Cross-emirate referral to Abu Dhabi services is arranged where the case complexity warrants.

## Eligibility and the molecular workup

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Alunbrig is approved for adults with ALK-positive metastatic NSCLC. Three eligibility criteria:

1. Histologically confirmed non-small cell lung cancer, stage IV or unresectable locally advanced. 2. ALK rearrangement confirmed by an FDA-approved or equivalent test. The most reliable workup in 2026 Dubai practice is comprehensive NGS on the tumour block, with FISH and IHC as supporting modalities. If your pathology was done outside the UAE and is more than 12 to 18 months old, the receiving oncologist often requests re-testing on a current block. 3. First-line setting (no prior ALK inhibitor) or post-crizotinib progression.

Brigatinib is not approved for paediatric or adolescent patients. Adults 18 and over only.

If your molecular workup is incomplete, Reserve Meds will help coordinate a re-biopsy at the receiving institution. The most common re-biopsy site in Dubai is Mediclinic City Hospital or American Hospital Dubai.

## The supply picture

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Brigatinib supply in Dubai follows one of three paths:

1. **In-hospital pharmacy supply.** The largest tertiary centres carry brigatinib in stock or order on-demand from the local importer. If you are being treated at Mediclinic City Hospital, American Hospital Dubai, King's College Hospital London Dubai, or Saudi German Hospital Dubai, this is usually the path. 2.

**Specialty importer dispensing.** Registered specialty pharmacy importers for the UAE market can supply brigatinib against an active prescription. 3. **Named-patient cross-border procurement.** Where the standard import channel is in transition, Reserve Meds organises a named-patient route via a registered specialty distributor. This adds 2 to 4 weeks; we use it only when the other two paths cannot meet the treatment timeline.

For routine first-line ALK+ NSCLC, the in-hospital pharmacy path is the working assumption. We confirm at intake before booking the consultation.

## Cost picture

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Brigatinib at US wholesale list is approximately USD 20,826 per 30-tablet bottle of the 180 mg maintenance strength. At Dubai pharmacy list, the comparable monthly cost is in the range of AED 92,000 to AED 118,000 depending on the importer markup and dispensing institution.

Annualised cost of brigatinib therapy alone is approximately AED 1.10 million to AED 1.42 million per year at list price. Total cost of care including thoracic oncology consultations, CT and MRI surveillance every 8 to 12 weeks, and laboratory monitoring adds on the order of AED 80,000 to AED 150,000 per year depending on the venue.

Coverage routes:

- **DHA coverage** applies for UAE nationals at public-sector facilities. - **Daman, AXA Gulf, Bupa Arabia, Cigna, Aetna International, NEXtCARE, MSH, Allianz Care, and other commercial covers** reimburse brigatinib under specialty oncology benefit with pre-authorization. The documentation requirement is documented ALK rearrangement, MDT recommendation, and a clinical rationale letter from the prescribing oncologist. - **Self-pay**: documented pathway for non-covered residents.

For uncovered or under-covered patients, Reserve Meds documents the cash-pay alternative path and the Takeda patient access programmes that exist in some markets. The US copay-assistance programme does not extend to UAE residents.

## Step-by-step pathway

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1. Confirm the molecular diagnosis. Send Reserve Meds the pathology report, the imaging study (chest CT and brain MRI), and the prior treatment history. 2. Reserve Meds books the oncology consultation. We arrange the appointment, the hospital paperwork, and the molecular tumour board review (cross-emirate to Abu Dhabi where indicated). We do not bill you for the consultation; you pay the hospital directly per their standard rate. 3. Pre-authorization. The thoracic oncologist writes the letter of medical necessity. Reserve Meds works with your insurer (or with you on the cash-pay arrangement) to pre-authorise the prescription before treatment day. 4. Pharmacy confirmation. The hospital pharmacy confirms in-stock or scheduled delivery from the importer. 5. Treatment initiation. 90 mg orally daily for 7 days. Daily symptom diary. Phone call follow-up at day 7. The 7-day lead-in is designed to flag early pulmonary adverse events; do not skip it. 6. Dose escalation. 180 mg orally daily from day 8 if tolerated. Oncology follow-up at week 2 and week 4. 7. Maintenance. Oncology follow-up every 4 to 8 weeks initially. CT surveillance every 8 to 12 weeks. Brain MRI surveillance based on baseline CNS burden. 8. Longitudinal continuity. Reserve Meds remains available for refill coordination, traveling-patient pharmacy coverage, and any cross-emirate or cross-country logistics during treatment.

## Monitoring and what to watch for

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The 7-day lead-in is the critical window. Severe pulmonary adverse events including pneumonitis have been reported with brigatinib, with most onset within the first 7 days of treatment and a median onset of 2 days. The standard protocol mitigates this risk: 90 mg daily for the first week, then escalate to 180 mg. Older patients and patients with a short interval (less than 7 days) between the last dose of crizotinib and the start of brigatinib are at higher risk.

Beyond the pulmonary window, ongoing monitoring includes:

- Blood pressure at each visit (brigatinib causes hypertension in a substantial minority) - Heart rate (bradycardia is a recognised adverse event) - Liver function tests at baseline and at follow-up - Creatine phosphokinase, amylase, lipase, glucose at follow-up - Vision change reporting - CT or MRI imaging on the 8 to 12 week cadence the oncologist sets

For Dubai patients with documented diabetes, the hyperglycaemia profile is worth flagging to the diabetologist or family physician who manages your other care.

## **Religious-ethical framing**

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Adult oncology drugs do not raise the religious-ethical questions that gene therapies or ex-vivo cell therapies raise. Brigatinib is a once-daily oral tablet; no genetic editing, no autologous cell processing, no fetal-tissue derivation. Established Islamic medical-ethics guidance from the GCC councils treats oral oncology medication as a standard medical intervention with no special ruling required.

Two practical points:

1. Diagnostic privacy: the information is private to the patient and the family unit. Reserve Meds operates under strict confidentiality. 2. Prognosis: that conversation belongs with the thoracic oncologist, not Reserve Meds.

For Dubai-based families (often multi-national, with the patient at the centre of an expat or mixed family unit), the decision conversation typically includes the patient, the spouse, and one or two senior family members. Reserve Meds intake conversations respect that family unit and accommodate remote family participation by video where the senior decision partner is overseas.

## **When Alunbrig is not the right call**

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Five common scenarios where the thoracic oncologist will recommend a different ALK inhibitor or a different therapy:

1. Prior brigatinib failure: lorlatinib or chemo-immunotherapy next. 2. Severe baseline pulmonary disease: alectinib often preferred for the safer first-week profile. 3. First-line case with oncologist preference for an alternative: alectinib or lorlatinib. 4. Non-ALK driver mutation: different targeted therapy class. 5. Patient declines targeted therapy: chemo-immunotherapy or trial enrollment.

Reserve Meds does not steer you toward Alunbrig. If the oncologist says alectinib or lorlatinib is the better fit for your case, Reserve Meds opens the access pathway to that drug instead.

## **What Reserve Meds is and is not**

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Reserve Meds is a Dubai-registered concierge service that coordinates UAE-resident and cross-border patient access to specialty oncology medicines. We are not a hospital, a pharmacy, or a medical practice. We do not prescribe, dispense, or administer medication. We do not provide medical advice on drug selection.

What we do: confirm the molecular workup, book the oncology consultation, coordinate the pharmacy supply chain, document pre-authorisation, and remain the operational backstop for the year-plus of follow-up care.

If you or a family member has been told that the lung cancer is ALK positive and you want to understand what the brigatinib pathway looks like from Dubai, contact Reserve Meds. Send the pathology report and prior treatment history. We respond within 24 hours with the recommended Dubai oncology service, the supply picture, and the authorisation pathway.

Clinical decisions remain with your treating thoracic oncologist and the multidisciplinary tumour board.

### ***Reserve Meds's role***

US-based concierge coordinator for cross-border specialty medicine. We are not the prescriber, not the dispensing pharmacy, and not the manufacturer. All clinical decisions remain with your treating physician.

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#### **Reserve Meds**

*reserved for you.*

Composite case examples. This document is for general information only and does not constitute medical advice. Please consult your treating physician.

Reserve Meds is in pre-launch. Published timelines and cost ranges are indicative, not guarantees.

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