Amondys 45

Oman · access guide

Amondys 45 (casimersen) for a Omani family: what the pathway looks like in 2026

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

Omani families looking into Amondys 45 for a son with Duchenne muscular dystrophy are in a practical position. The drug is administered by weekly IV infusion at a paediatric neurology centre, and Oman's paediatric infrastructure plus the regional referral pattern to Sidra Medicine in Doha (90-minute flight from Manama) and to KFSHRC Riyadh provide workable options.

This page is meant to be the first honest read you get on Amondys 45 in Oman, written by the team that would coordinate around your son's case if you decided you wanted support on the genetic workup, the cross-border logistics, the MoH treatment-abroad funding application, or the documentation.

The genetic gate: this drug is for a specific subset of DMD families

Amondys 45 is an exon-skipping therapy. It only helps families whose son's DMD mutation is **amenable to exon 45 skipping**. Approximately 8 percent of DMD patients fall into this group. That is the first conversation.

In Oman, genetic workup for DMD typically routes through Sultan Qaboos University Hospital (SQUH) or Royal Hospital Muscat paediatric service, with samples sent to regional reference labs for whole-gene sequencing or MLPA. Results return in 4 to 8 weeks for sequencing. Your paediatric neurologist will read out the deletion boundary and tell you whether exon 45 skipping is the right mechanism.

If exon 45 skipping is not the right mechanism, this page is the wrong page. Exondys 51 (eteplirsen) is for exon 51 skipping. Vyondys 53 (golodirsen) and Viltepso (viltolarsen) are for exon 53 skipping. Elevidys is a one-time gene-therapy option for ambulatory boys aged 4 and older. Sidra Medicine in Doha has documented Elevidys experience as the regional centre. Reach out and we will talk through your son's specific picture.

What Amondys 45 actually is, in plain terms

Amondys 45 is a weekly intravenous infusion. The active ingredient is casimersen, a phosphorodiamidate morpholino oligomer (PMO) antisense oligonucleotide. PMO is a synthetic chemistry. The molecule binds to a specific stretch of the pre-mRNA of the DMD gene and tells the splicing machinery to skip exon 45, restoring the reading frame and producing a partially functional truncated dystrophin protein.

Amondys 45 is not a cure. The clinical data describe a slowing of functional decline. FDA accelerated approval was granted in February 2021. The European Medicines Agency reviewed Amondys 45 in 2024 and issued a negative CHMP opinion, citing insufficient evidence of clinical benefit. Your neurologist can put the FDA-EMA divergence in clinical context for your son's specific situation.

The schedule is lifelong. No taper, no stop point.

The rest of the workup

Three more results need to land.

Baseline renal function. Casimersen has a post-marketing warning for renal toxicity. Serum creatinine and urinalysis; quarterly monitoring continues for the life of therapy.

Baseline cardiac function. Echocardiography is the standard baseline.

Baseline functional assessments. The 6-minute walk test, the North Star Ambulatory Assessment, and FVC. Because the infusion is weekly and lifelong, many paediatric patients have a port placed once the decision is committed.

A clinical rationale letter from your paediatric neurologist documents the genetic confirmation, the renal and cardiac baselines, the functional baselines, the rehabilitation plan, the steroid regimen, and the requested treatment.

The Oman regulatory and cross-border pathway in 2026

The Directorate General of Pharmaceutical Affairs and Drug Control (DGPADC) provides the regulatory framework. `[VERIFY: DGPADC Amondys 45 registration status in 2026]`. In the absence of standard registration, the named-patient mechanism is the route, filed through DGPADC by the dispensing hospital's pharmacy on the consultant's behalf.

Oman's paediatric neurology infrastructure can administer weekly IV infusion: Sultan Qaboos University Hospital (SQUH) paediatrics, Royal Hospital Muscat paediatrics, and Muscat Private Hospital paediatrics. For families who prefer regional referral, Sidra Medicine in Doha (90-minute flight) administers paediatric advanced therapies including Elevidys and has the deepest paediatric neuromuscular service in the GCC. KFSHRC Riyadh is the alternative regional referral pattern and has the Saudi DMD clinical and research base.

For Omani nationals, the MoH treatment-abroad programme has at times funded eligible cross-border specialty therapies. Application runs through your treating consultant and the MoH treatment-abroad office. Reserve Meds can support documentation at no charge.

DGPADC approval timing on a complete, well-documented named-patient file is typically four to eight weeks. Renewal cycles for continuous weekly supply require advance planning. We maintain the renewal calendar.

The cost conversation, in the form a Omani family needs

The Amondys 45 annual drug price in 2026 sits in an indicative range of roughly USD 700,000 to 1,200,000 per year, depending on body weight, or approximately OMR 264,000 to 452,000 per year. For a typical paediatric patient, cumulative drug cost over a lifetime can reach USD 30 to 50 million plus. Full cost of care adds workup, port placement if chosen, weekly infusion-centre fees, monitoring, and our coordination fee.

For Omani nationals, the MoH treatment-abroad route may apply if cross-border referral is the pathway. We separate every line. We do not put a markup on the manufacturer's drug price. Private insurance coverage in Oman (AXA Gulf, Oman National Insurance, GIG Oman, others) for DMD exon-skipping therapy is case-by-case prior authorisation.

A direct point: families weighing Amondys 45 against Elevidys for an exon-45-skip-amenable son are weighing a roughly OMR 1.13 to 1.32 million one-time cost (Elevidys) against an indefinite OMR 264K to 452K annual cost (Amondys 45). That arithmetic has implications beyond the first year.

Life on weekly infusion

The peri-infusion protocol is light compared with gene therapy. Hypersensitivity reactions can occur and the first several infusions are observed at the qualified centre. Once stable, patients move to weekly infusions of 35 to 60 minutes each.

The practical implication is that the infusion fits into the weekly rhythm of the household. Many Omani families schedule the infusion for a Saturday morning before the school week. A port reduces the friction of weekly peripheral cannulation for a child on this therapy for decades.

Quarterly visits cover renal function, motor function, pulmonary function, and at scheduled intervals echocardiography.

Religious and ethical considerations

Casimersen is a synthetic antisense oligonucleotide with no animal-source material. Halal status is not in question. The Islamic bioethics consensus across both Shia and Sunni schools on disease-modifying therapies that preserve life and function is broadly permissive, and families typically consult with their religious advisors before committing to a lifelong therapy.

When Amondys 45 is not the right option

If your son's mutation is not amenable to exon 45 skipping, Amondys 45 is the wrong drug. Depending on the deletion boundary, the right drug may be Exondys 51, Vyondys 53, Viltepso, or for ambulatory boys aged 4 and older, Elevidys gene therapy at Sidra Medicine. If your son has clinically significant renal impairment, the therapy is on hold. If your son has been diagnosed with a non-DMD muscular dystrophy, Amondys 45 does not apply.

In all of these situations, reach out anyway.

What Reserve Meds does for a Omani family

For Omani nationals applying for MoH treatment-abroad funding for cross-border weekly infusion: documentation support, second-opinion clinical reviews from international paediatric neuromuscular specialists, coordination of cross-border referral logistics, and case management around the Doha or Riyadh stay (or local Manama administration if the family prefers in-country care).

For expatriate residents in Oman paying cash: regulatory documentation, DGPADC named-patient filing, sourcing from manufacturer's authorised US distribution under DSCSA chain of custody, cold-chain logistics for weekly supply, qualified-centre liaison, renewal-cycle calendar, and named case-lead coordination.

Reserve Meds is not your son's prescriber. We do not practise medicine. We do not manufacture Amondys 45. Clinical decisions stay with your paediatric neurologist and the treating centre.

We work cash-pay (where applicable). Our coordination fee is disclosed in writing.

What to do if you want to start

The first concrete step is a call with our case-lead so we can confirm whether Amondys 45 is the right consideration for your son and discuss which pathway fits your family: in-country administration in Oman, Sidra Medicine in Doha, or KFSHRC Riyadh.

Most families reach us first on WhatsApp, which is the medium we hold open during Oman business hours (Sunday-Thursday) and on weekends for active cases.

Start your son's case on the portal, or open a WhatsApp conversation with the case-lead and we will take it from there.

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.

reservemeds.com · hello@reservemeds.com