

Bimzelx

Abu Dhabi · access guide

How to access Bimzelx for moderate-to-severe plaque psoriasis, hidradenitis suppurativa, psoriatic arthritis, and axial spondyloarthritis from Abu Dhabi: 2026 pathway via Abu Dhabi dermatology, rheumatology, and pharmacy supply

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

Abu Dhabi has one of the deepest dermatology and rheumatology service footprints in the wider region. Cleveland Clinic Abu Dhabi dermatology and rheumatology, Sheikh Khalifa Medical City (SKMC), Sheikh Shakhbout Medical City (SSMC), Burjeel Medical City, NMC Royal Khalifa City, Mediclinic Airport Road, and Tawam Hospital in Al Ain treat moderate-to-severe plaque psoriasis, hidradenitis suppurativa, psoriatic arthritis, and axial spondyloarthritis through the full therapeutic ladder. Bimzelx (bimekizumab-bkzx, UCB Pharma) is the IL-17A and IL-17F dual cytokine blocker. For an Abu Dhabi-resident adult with moderate-to-severe plaque psoriasis, HS, PsA, AS, or nr-axSpA that has plateaued on prior systemic therapy or a different biologic class, the operational question is which biologic fits the case, how the prescription is dispensed through Abu Dhabi-emirate channels (DoH Abu Dhabi and the in-emirate retail pharmacy network), and how Thiqa for nationals and Daman or commercial cover for residents work for the multi-year treatment course.

UAE EDE registration status applies federally; Abu Dhabi-emirate dispensing coordinated through DoH Abu Dhabi. Adult only; Sidra is paediatric-only and not in scope (Qatar reference).

Reserve Meds does not promote one IL-17 blocker over another.

Why Bimzelx

Bimekizumab is the only IL-17A and IL-17F dual cytokine blocker. The mechanism distinguishes it from Cosentyx and Taltz (IL-17A only) and Siliq (IL-17 receptor). BE RADIANT head-to-head showed PASI-100 at week 48 of 67.0% for bimekizumab versus 46.2% for secukinumab.

FDA approved October 2023 (psoriasis), July 2024 (HS), September 2024 (PsA, AS, nr-axSpA). EMA approved August 2021 (psoriasis), with HS / PsA / axSpA added in 2023.

What Bimzelx is, in plain language

Subcutaneous injection. No infusion centre. Self-injection at home after initial training. Prefilled pen (UnoReady) or syringe at 160 mg per injection; 320 mg dose requires two injections at separate sites.

Plaque psoriasis adult: 320 mg at week 0, 4, 8, 12, 16, then every 8 weeks. HS: heavier loading then every 2 or 4 weeks. PsA: 160 mg every 4 weeks. AS / nr-axSpA: 160 mg every 4 weeks.

Eligibility at an Abu Dhabi dermatologist or rheumatologist clinic

1. Confirmed indication: plaque psoriasis (PASI 12+, BSA 10%+, DLQI elevation), HS (Hurley II or III), PsA (CASPAR), or AS / nr-axSpA (ASAS). 2. Biologic-naive or prior biologic inadequate response. 3. Adult (18+). 4. TB screening; hepatitis B / C screening. 5. IBD screening (class-wide IL-17 precaution). 6. Oropharyngeal candidiasis history review. 7. Vaccination status; avoid live vaccines. 8. Pregnancy planning for women of childbearing potential.

The Abu Dhabi prescribing and supply picture, plainly

Bimzelx UAE EDE registration status is verified at intake; Abu Dhabi-emirate dispensing is coordinated through DoH Abu Dhabi. UCB Pharma's MENA commercial supply runs through regional distributors. Where in-country registration is complete, in-emirate dispensing applies. Where the indication has not yet been registered locally, a named-patient European-import pathway covers the case.

1. **Prescribing physician:** any board-certified dermatologist (for plaque psoriasis or HS) or rheumatologist (for PsA, AS, nr-axSpA). Major Abu Dhabi services: Cleveland Clinic Abu Dhabi dermatology and rheumatology, SKMC, SSMC, Burjeel Medical City, NMC Royal Khalifa City, Mediclinic Airport Road, Tawam Hospital in Al Ain. Public-sector dermatology and rheumatology at SKMC, SSMC, and Tawam handles the same role for Emirati nationals. 2. **Pharmacy dispensing:** hospital pharmacy for inpatient or specialty outpatient; community pharmacy with cold-chain refrigeration capability for ongoing maintenance dispensing under DoH Abu Dhabi oversight. Storage 2 to 8 degrees Celsius; do not freeze. 3. **Insurance pre-authorisation:** Thiqa for Emirati nationals has historically extended to biologic dermatology and rheumatology therapy on a case-by-case basis with documented severity and prior-therapy failure. Daman and commercial cover for residents (Oman Insurance, AXA Gulf, MetLife, Cigna, others) require similar documentation. Some require prior biologic trial-and-failure. [VERIFY: current UAE EDE registration status per indication at intake.] 4. **Self-injection training:** single supervised session at the prescribing physician's clinic or UCB nurse educator visit. 5. **Ongoing monitoring:** dermatology or rheumatology follow-up at weeks 4, 12, 16, then quarterly. Oropharyngeal exam and IBD symptom check at every visit.

The 2026 pathway, step by step

Week 0 to 1: Documentation pack with the treating dermatologist or rheumatologist office.

Week 1 to 4: Insurance or Thiqa pre-authorisation review.

Week 4 to 6: First dispensing at the prescribing physician's clinic or partner pharmacy under DoH Abu Dhabi oversight. Loading dose per indication with self-injection training.

Ongoing: Self-injection per indication-specific schedule. Dermatology or rheumatology follow-up at weeks 4, 12, 16.

Week 16 onwards: Response assessment and transition to maintenance.

Ongoing: Maintenance for as long as Bimzelx controls the disease.

Cost expectation in AED

US list price approximately USD 7,000 to 9,000 per month at WAC. Annual at list price USD 84,000 to 108,000 for plaque psoriasis maintenance. At 2026 indicative cross rates, the AED-equivalent annual cost band is approximately AED 308,000 to 396,000 at list price.

For Emirati nationals with Thiqa coverage, the financial pre-authorisation conversation needs to start before the first dispensing. Daman and other commercial covers for residents vary. Cash-pay exposure depends on the dispensing pharmacy's regional pricing.

What to monitor

Oropharyngeal candidiasis (oral thrush) is the distinctive Bimzelx adverse event. IL-17F blockade affects mucosal antifungal defence. Inspect oral cavity weekly; contact the treating physician at first sign of white patches, oral soreness, or taste change. Nystatin or fluconazole resolves it.

IBD flare: class-wide IL-17 precaution. Report new or worsening abdominal pain, diarrhoea, blood in stool, weight loss promptly.

Other adverse events: upper respiratory tract infections, injection-site reactions, headache, tinea infections, conjunctivitis.

Live vaccines avoided. EMA post-marketing data since August 2021 reassuring.

Religious, ethical, and family-logistics framing

Recombinant humanized IgG1; CHO-cell-derived; no donor element. Halal acceptable. Classical analogy to vaccines holds in UAE Islamic medical ethics.

Self-injection element: clinic-administered dispensing available for families uncomfortable with home injection. Oral thrush counselling: common, straightforward to identify and treat. Chronic-treatment routine; cold-chain pharmacy access (most Abu Dhabi community pharmacies handle this) and follow-up cadence built in.

When Bimzelx is not the right call

Active or severe IBD, active untreated TB, recurrent oropharyngeal candidiasis history, pregnancy without effective contraception, recurrent serious infections:

- IL-23 antibodies (Skyrizi, Tremfya): better fit for IBD concerns or oral thrush history. - TNF inhibitors (Humira, Cimzia). - Cosentyx or Taltz: IL-17A only, less oral thrush risk. - Continued conventional systemic therapy.

Reserve Meds does not promote one IL-17 blocker over another.

What Reserve Meds does on this case

We are a US-based concierge coordinator. We are not the prescriber and not the dispensing pharmacy. On an Abu Dhabi Bimzelx case we build the documentation pack with the treating dermatologist or rheumatologist office, confirm UAE EDE registration status per indication and DoH Abu Dhabi dispensing pathway, run the insurance or Thiqa pre-authorisation conversation alongside the clinical pre-authorisation conversation, coordinate the cold-chain supply logistics, organise self-injection training, and stay with the case through the first year of dosing. Clinical decisions remain with your treating dermatologist or rheumatologist.

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.

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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