

## Bimzelx

Oman · access guide

# How to access Bimzelx from Oman, the named-patient import pathway, 2026

By Reserve Meds · Clinical & regulatory team · Last reviewed 2026-04-23

A Oman patient with moderate-to-severe plaque psoriasis, active psoriatic arthritis, active non-radiographic axial spondyloarthritis, or active ankylosing spondylitis may receive a prescription for Bimzelx (bimekizumab-bkzx) from their treating dermatologist or rheumatologist. Bimzelx is FDA-approved in the United States and manufactured by UCB. It is a humanised IgG1 monoclonal antibody that selectively inhibits both interleukin-17A and interleukin-17F, a dual-target mechanism that differentiates it from earlier IL-17A-only inhibitors. Access in Oman varies by indication and by emirate, and specific presentations can be out of stock at particular hospital pharmacies. When that happens, a named-patient import route through the Ministry of Health and Prevention (DGPADC) remains legitimate for the patient whose physician has already prescribed the drug.

This guide explains the pathway, what documentation your physician needs, typical costs and timing, and where Reserve Meds fits in.

## The clinical situation

Bimzelx is an injectable dual IL-17A and IL-17F monoclonal antibody. For plaque psoriasis, the typical regimen is 320 mg subcutaneously at weeks 0, 4, 8, 12, and 16, with maintenance every 8 weeks thereafter (with an option to step to every 4 weeks for select patient weights per labeling). For psoriatic arthritis and axial spondyloarthritis, dosing is 160 mg every 4 weeks. The IL-17 class has a cleaner safety profile than the JAK class and does not carry an FDA boxed warning. Pre-treatment screening per FDA labeling includes tuberculosis evaluation, hepatitis B and C serology, and review of vaccination status; live vaccines are not recommended during therapy. Bimzelx carries a class-typical warning for oral or mucocutaneous *Candida* infections, which your physician will monitor for and treat if they occur. Inflammatory bowel disease history is also reviewed before starting IL-17 therapy.

## Is Bimzelx legally importable into Oman?

Yes, through the DGPADC named-patient / personal-use import framework, coordinated with the treating facility's pharmacy. The Oman has a mature pathway for specialty biologics approved by reference authorities but not stocked locally for the specific presentation or indication.

The DGPADC named-patient route allows a Oman-licensed physician to request import of a medicine when: (a) the medicine is approved by a recognised reference authority such as the US FDA or EMA, (b) no clinically equivalent locally available alternative is suitable for the patient, (c) the treating physician takes clinical responsibility for use, and (d) chain of custody is documented from the US source to the dispensing pharmacy. Dubai Health Authority and Department of Health Abu Dhabi issue complementary approvals where the dispensing facility sits inside their jurisdiction.

## How the pathway works, step by step

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1. **Consultation with your treating physician.** The prescribing decision is clinical. Your dermatologist or rheumatologist documents the indication, severity scoring, prior therapy history, IBD history, and rationale for Bimzelx.
2. **Baseline screening.** TB, viral hepatitis, vaccination review, and IBD history are documented per FDA labeling.
3. **DGPADC named-patient application.** Your physician or hospital pharmacy files the application with clinical rationale, patient reference, presentation (autoinjector or prefilled syringe), quantity, and chain-of-custody plan.
4. **US-side sourcing.** Reserve Meds coordinates with our US-licensed specialty wholesale partner to secure product from UCB's authorised distribution under DSCSA chain-of-custody.
5. **Cold-chain shipment.** Bimzelx is a biologic requiring refrigerated transport (2 to 8 degrees Celsius) with temperature-excursion monitoring end to end.
6. **Arrival and first administration.** The dispensing facility releases product against the physician's prescription and administration proceeds on the planned induction and maintenance schedule.

## What documentation your physician needs

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Your physician will typically need to provide:

- A clinical rationale letter confirming the indication, severity scoring (PASI, BSA, IGA for psoriasis; BASDAI or equivalent for axSpA; joint counts for PsA), prior therapy history, and Bimzelx as the indicated treatment
- Verification of their Oman medical licence (DGPADC / DHA / DoH)
- A patient identifier (anonymised reference preferred)
- Documented pre-treatment screening (TB, hepatitis) and vaccination review
- A note on IBD history and Candida-infection monitoring plan
- The planned induction and maintenance schedule and the presentation required (320 mg psoriasis dosing typically delivered as two 160 mg injections)

Reserve Meds provides a physician documentation kit that bundles the templates DGPADC reviewers expect for IL-17 biologic imports, including cold-chain handling and the class-specific IBD and Candida considerations.

## Typical costs and indicative timing

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Reserve Meds gives you a drug-only reference range plus a transparent delivered quote at intake. As an illustrative composite case, the US cash-pay reference range for a Bimzelx 320 mg psoriasis dose sits in an indicative 2026 band of roughly USD 9,500 to 11,500 per dose, with PsA and axSpA dosing at 160 mg priced proportionally lower per dose. International cold-chain logistics, DGPADC documentation handling, and concierge coordination add incremental cost. The delivered quote we issue at intake itemises each line so nothing is hidden.

Indicative timing, not a guarantee, for first dose after cohort intake opens is 7 to 14 days from the moment a complete application is submitted to DGPADC, assuming the documentation package is clean on first pass. Maintenance doses are scheduled against the physician's cadence.

; service availability is limited to our first cohort. All timelines are indicative, not guarantees. If your clinical situation is time-sensitive, flag that when you

## Where Reserve Meds fits in

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Reserve Meds is a US-based concierge coordinator for cross-border specialty medicine. For Bimzelx specifically, we provide:

- **Sourcing.** Through our US-licensed specialty wholesale partner, operating under DSCSA chain-of-custody from manufacturer to export.
- **Documentation.** Regulatory package tailored for your physician and for DGPADC / DHA / DoH review.
- **Cold-chain logistics.** Temperature-controlled, internationally tracked shipment with excursion monitoring.
- **Concierge case lead.** A named point of contact for your family and your physician across the full case arc.

We are a coordinator, not the prescriber, not the dispensing pharmacy. All clinical decisions remain with your treating physician, and dispensing sits with the licensed Oman pharmacy of record.

## FAQ

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### Is this legal in Oman?

Yes, when executed through the DGPADC named-patient / personal-use framework with appropriate documentation, clinical rationale, and a licensed dispensing facility.

### How does Bimzelx differ from IL-17A-only inhibitors?

Bimzelx inhibits both IL-17A and IL-17F, where earlier IL-17 agents targeted IL-17A alone. Clinical trial data for psoriasis have shown high rates of complete skin clearance; your physician will weigh this against the monitoring considerations that come with the mechanism, including Candida surveillance.

### What about IBD history and IL-17 therapy?

The IL-17 class can be associated with new onset or exacerbation of inflammatory bowel disease in a small proportion of patients. Your physician will review your IBD history and monitor gastrointestinal symptoms during therapy.

## **Can Bimzelx be self-administered at home?**

Bimzelx is available in autoinjector and prefilled-syringe presentations designed for administration after training. Your physician decides whether in-clinic or at-home administration is appropriate for your case.

## **Will private insurance cover this?**

Cash-pay is the default posture. Some Oman private insurers reimburse named-patient imports on a case-by-case basis; we supply documentation but do not process insurance claims directly.

### ***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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