



Casgevy in Saudi Arabia

The SFDA named-patient & cross-border referral pathway — indicative 2026

RARE DISEASE · SICKLE CELL / B-THALASSEMIA CELL THERAPY

The clinical situation

Casgevy (exagamglogene autotemcel, exa-cel) is an FDA-approved one-time infusion of CRISPR-Cas9-edited autologous hematopoietic stem cells that reactivates fetal hemoglobin, indicated for severe sickle cell disease with recurrent vaso-occlusive crises and for transfusion-dependent beta-thalassemia. Developed by Vertex Pharmaceuticals in collaboration with CRISPR Therapeutics. Administration requires a Casgevy-qualified cell-therapy treatment centre and involves mobilisation, apheresis, a manufacturing window, myeloablative conditioning, infusion, and an extended inpatient recovery.

The pathway, 5 steps

- 1 Consultation & eligibility assessment.** Your treating haematologist confirms diagnosis, crisis/transfusion history, organ-system baselines, and fitness for myeloablative conditioning.
- 2 Treatment-centre identification.** Reserve Meds coordinates referral to a Casgevy-qualified treatment centre through our international care-coordination network.
- 3 SFDA / MoH referral documentation.** Your physician files the named-patient / medical-referral dossier covering medical necessity, centre identification, and return-to-home care plan.
- 4 Mobilisation, apheresis, manufacturing.** Stem cells are collected at the qualified centre; manufacturing window typically several weeks with bridging transfusion support as needed.
- 5 Conditioning, infusion & engraftment.** Myeloablative conditioning and Casgevy infusion at the qualified centre with extended inpatient engraftment monitoring; handover to your Saudi haematologist for long-term follow-up.

Indicative economics

Reference US cash-pay range: USD 2.0–2.3 million for the gene-therapy product. Total cost of care — inpatient stay, conditioning, apheresis, engraftment monitoring, international travel, caregiver accommodation — runs substantially higher. Full transparent quote at intake.

Indicative timing

12–24 weeks from intake to infusion, driven by manufacturing window and treatment-centre calendar. Inpatient stay 4–6 weeks or longer. Indicative — not guaranteed.

Reserve Meds's role

Treatment-centre referral. Coordination with authorised Casgevy centres through our clinical network. **Documentation.** Cross-border referral and SFDA/MoH named-patient package. **Logistics.** Patient and caregiver travel, accommodation, post-infusion return-home planning; halal-dining and prayer-space orientation at partnering centres. **Concierge case lead.** Named

point of contact for the family through the extended journey. **We are a coordinator** — not the prescriber, not the manufacturer, not the treatment centre.

COMPOSITE EXAMPLE · PRE-LAUNCH WAITLIST

Join the Casgevy × Saudi Arabia first-cohort waitlist. *Our concierge reaches out as we open intake.*

reservemed.com/access-guides/casgevy-saudi-arabia.html



SCAN TO JOIN

Reserve Meds · US-based concierge for cross-border specialty medicine. We are a coordinator; we are not the prescriber and not the dispensing pharmacy. All clinical decisions remain with the treating physician. Not medical advice.

Reserve Meds is in pre-launch. Service availability is limited to our first cohort; all timelines published are indicative, not guarantees. Composite case examples only.

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