Cotellic

United Arab Emirates · access guide

How to access Cotellic (with Zelboraf and optionally Tecentriq) for BRAF V600E/V600K metastatic melanoma from the UAE: 2026 pathway via UAE medical oncology and combination supply | Reserve Meds

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

The UAE has built one of the deepest medical oncology and molecular diagnostics networks in the wider region. Cleveland Clinic Abu Dhabi (with the MD Anderson collaboration in cancer care), Sheikh Shakhbout Medical City (SSMC), Tawam Hospital as the country's oncology centre of excellence, Burjeel Medical City, American Hospital Dubai, Mediclinic City Hospital, and King's College Hospital London Dubai all run medical oncology services capable of diagnosing, biomarker-testing, and treating BRAF V600E or V600K-mutant unresectable or metastatic melanoma. Cotellic (cobimetinib) is the Genentech / Roche oral MEK1/2 inhibitor approved by the FDA only in combination with vemurafenib (Zelboraf), with or without atezolizumab (Tecentriq), for this indication. The UAE Emirates Drug Establishment (EDE) registration status of both Cotellic and Zelboraf is verified at intake; the pathway runs through the prescribing centre's regulatory office. Reserve Meds does not promote one BRAF/MEK combination over another; this page describes the Cotellic combination because that is what the patient or family is asking about.

This page explains how the pathway works in 2026 for a UAE-resident adult: who qualifies, where the molecular diagnostics, baseline ophthalmologic exam, baseline echocardiogram, and baseline liver and creatine kinase workup happen, where the prescriptions for Cotellic AND Zelboraf are written and filled together, what the realistic out-of-pocket exposure band is in AED for the combined regimen, what to monitor on therapy (retinal serous changes, photosensitivity, LVEF, LFTs, CK), and how a multi-month combination course settles into a UAE family's life.

Why Cotellic, and why now

Cotellic is cobimetinib, an oral, highly selective, reversible inhibitor of mitogen-activated protein kinase kinase 1 and 2 (MEK1 and MEK2). It was discovered at Exelixis and developed and brought to FDA approval in November 2015 by Genentech (Roche Group). The pharmacological logic is the MAPK cascade: BRAF V600E or V600K mutation produces a constitutively active mutant BRAF kinase that drives MEK and then ERK, sustaining tumour growth and survival independently of normal upstream RAS regulation. Adding a MEK inhibitor downstream of BRAF blocks the paradoxical pathway activation in BRAF wild-type cells that drives the keratoacanthoma and cutaneous squamous cell carcinoma signal of BRAF monotherapy, and improves overall survival relative to BRAF monotherapy.

The two pivotal FDA approvals for Cotellic in melanoma are the November 2015 doublet approval based on the coBRIM trial (NEJM 2014, updated Lancet Oncology 2016) and the July 2020 triplet approval based on the IMspire150 trial (Lancet 2020):

- **coBRIM doublet (Cotellic 60 mg QD oral, 21 days on / 7 days off, plus Zelboraf 960 mg BID continuous)**: median progression-free survival 12.3 months on the doublet versus 7.2 months on Zelboraf monotherapy; median overall survival 22.3 months versus 17.4 months. - **IMspire150 triplet (Cotellic plus Zelboraf plus atezolizumab)**: median PFS 15.1 months on the triplet versus 10.6 months on the doublet placebo arm. The triplet is the first-line option that adds a PD-L1 checkpoint inhibitor (atezolizumab, Tecentriq) to the BRAF/MEK backbone.

In October 2022 Cotellic received an expanded approval for histiocytic neoplasms (Erdheim-Chester disease, Langerhans cell histiocytosis, Rosai-Dorfman disease) at the 60 mg QD continuous schedule. The UAE melanoma practice in 2026 is the main use case and is the focus of this page.

For a UAE patient with confirmed BRAF V600E or V600K-mutant unresectable or metastatic melanoma, the Cotellic plus Zelboraf doublet sits as one of three FDA-approved BRAF/MEK doublets (alongside dabrafenib plus trametinib, Tafinlar plus Mekinist; and encorafenib plus binimetinib, Braftovi plus Mektovi). The triplet adds Tecentriq for selected first-line patients. Reserve Meds does not promote one BRAF/MEK combination over another.

What Cotellic is, in plain language

Cotellic is an oral 20 mg tablet. The standard dose is three tablets (60 mg) once daily for 21 consecutive days, followed by 7 days off, repeated every 28 days. Taken with or without food. The companion drug Zelboraf is an oral 240 mg tablet taken as four tablets (960 mg) twice daily, continuously without scheduled breaks. Both drugs are dispensed from the prescribing centre's oncology pharmacy or partnered specialty pharmacy on a 28-day refill cycle synchronised to the Cotellic cycle. If atezolizumab (Tecentriq) is added (IMspire150 triplet first-line), the patient also visits the infusion suite for IV Tecentriq on the protocol schedule.

There is no infusion of Cotellic itself and no infusion of Zelboraf. The treatment is oral and outpatient.

Eligibility at a UAE medical oncologist's clinic

For UAE-resident patients, the medical oncology service applies the FDA, EMA, EDE, and major-guideline criteria:

1. Histologically confirmed unresectable or metastatic cutaneous melanoma. 2. Confirmed BRAF V600E or V600K mutation by NGS, PCR (cobas BRAF V600 Mutation Test or equivalent), or IHC with VE1 antibody confirmed by molecular method. 3. Adult patient (18 or older). 4. Staging workup with contrast CT, PET-CT where indicated, and brain MRI for CNS staging. 5. Baseline ophthalmologic examination including slit-lamp, dilated funduscopic exam, and optical coherence tomography (OCT). Serous retinopathy and retinal vein occlusion are recognised Cotellic class effects. 6. Baseline echocardiogram with documented left ventricular ejection fraction (LVEF). Cotellic can cause cardiomyopathy with reduced LVEF. 7. Baseline laboratory workup including LFTs, creatine kinase (CK), CBC, comprehensive metabolic panel, fasting glucose, lipid panel, and pregnancy test where relevant. 8. Drug interaction screen for CYP3A4 inhibitors and inducers. 9. Photosensitivity counsel. The UAE UV-intense climate amplifies the burden. Mandatory broad-spectrum SPF 50+, protective clothing, and avoidance of midday outdoor exposure. 10. Pregnancy and contraception planning.

The UAE prescribing and supply picture, plainly

In 2026 the UAE centres with active BRAF/MEK combination prescribing include Cleveland Clinic Abu Dhabi, SSMC (MD Anderson affiliation), Tawam (oncology centre of excellence), Burjeel Medical City, American Hospital Dubai, Mediclinic City Hospital, and King's College Hospital London Dubai. Cotellic is EDE-verified at intake. The pathway:

1. Diagnosis and BRAF V600 molecular confirmation at the diagnosing centre's pathology lab or regional reference lab (Caris Life Sciences, Foundation Medicine). 2. Multidisciplinary melanoma tumour board review documenting BRAF V600 status, the doublet versus triplet choice, and the treatment plan. 3. Insurance pre-authorisation for BOTH Cotellic AND Zelboraf in a single combined-rationale submission. Daman and Thiqa for Emirati nationals follow institutional pathways; commercial insurers (AXA Gulf, NEXtCARE, MSH, Bupa Global, Allianz Care) handle the combination on a case-by-case basis. Pre-authorisation typically takes 7 to 14 days. 4. Named-patient supply if EDE label scope or local stock requires it. Reserve Meds supports the documentation pack and Roche regional liaison. 5. Synchronised pharmacy dispense of Cotellic and Zelboraf on a 28-day refill cycle. Triplet patients add Tecentriq infusions at the prescribing centre's infusion suite. 6. Ongoing monitoring labs, ophthalmologic surveillance, and echocardiogram per the schedule below.

Cost band

The Cotellic plus Zelboraf doublet US list price is approximately USD 20,000 to USD 23,000 per month, with an annual combined cost of approximately USD 220,000 to USD 280,000. At indicative 2026 cross rates, the annual combined cost translates to approximately AED 808,000 to AED 1.03 million. The IMspire150 triplet adds the Tecentriq cost (approximately USD 14,000 to USD 16,000 per 21-day cycle).

Total cost of care additions (oncology consults, monitoring labs every 2 weeks for the first 6 months then monthly, ophthalmology at month 1 and quarterly, echocardiogram at week 4 and quarterly, dermatology every 8 weeks, imaging every 8 to 12 weeks) add 8 to 18 percent to the combined drug cost base in UAE private-sector settings.

What to expect on Cotellic, week-by-week

Three distinctive adverse events define the early counselling visit:

- **Photosensitivity**: severe and onset early, often within the first 1 to 2 weeks. The UAE climate amplifies the operational burden. - **Retinopathy**: serous retinopathy can appear as early as the first cycle. Any new visual symptom (blurred vision, scotoma, photopsia, distorted central vision) prompts urgent ophthalmology review with OCT. - **Cardiomyopathy**: asymptomatic LVEF decline detected at the week-4 echocardiogram in a meaningful minority. Routine echo at baseline, week 4, then quarterly.

Other recognised toxicities include diarrhoea, nausea, fever, peripheral oedema, rash, hepatotoxicity, rhabdomyolysis with CK elevation, and hemorrhage. The patient stays on the combination for as long as there is clinical benefit and tolerability, typically 12 months or longer for responders.

When Cotellic is the wrong drug

Cotellic plus Zelboraf is not the right answer for BRAF wild-type melanoma (the biomarker gate is non-negotiable), prior clinically significant retinopathy, baseline LVEF below institutional threshold or cardiomyopathy, severe photosensitivity intolerance, concurrent strong CYP3A4 inhibitors or inducers without dose adjustment, severe hepatic impairment, pregnancy, or a patient for whom the treating medical oncologist prefers Tafinlar plus Mekinist or Braftovi plus Mektovi on tolerability or familiarity grounds. Reserve Meds does not promote one BRAF/MEK combination over another.

What Reserve Meds does on this case

We are a US-based concierge coordinator. We build the document pack, submit first-review requests to the chosen UAE prescribing centre, coordinate the insurance pre-authorisation for Cotellic AND Zelboraf in parallel, support the named-patient regulatory liaison if EDE label scope requires it, set up the first synchronised dispense of both drugs, and stay with the case through the refill cycle. Clinical decisions remain with your treating medical oncologist and the multidisciplinary melanoma tumour board.

Start your case at reservemeds.com. We respond within one business day in English or Arabic.

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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