

Ctexli

Kuwait · access guide

How to access Ctexli for cerebrotendinous xanthomatosis from Kuwait: 2026 pathway via Mubarak Al-Kabeer adult neurology and cross-border referral | Reserve Meds

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

Kuwait diagnoses CTX through adult neurology at Mubarak Al-Kabeer Hospital and Amiri Hospital, with paediatric metabolic cases captured at Sabah Hospital and routinely cross-referred to Sidra Medicine Qatar for confirmation. The 2026 question is how to source Ctexli, the first FDA-approved oral chenodeoxycholic acid replacement for CTX.

Why Ctexli, why now

Ctexli received FDA approval in February 2024 as the first labelled treatment for CTX, paediatric and adult. CTX is recessive bile-acid synthesis disorder driven by CYP27A1 mutations, with progressive neurologic deterioration if untreated. With FDA approval less than 24 months ago, the Kuwait pathway is named-patient import under MoH.

What Ctexli is, in plain language

Ctexli is oral chenodiol capsules. It replaces the missing bile acid and restores feedback suppression of cholestanol. It does not reverse damage. It slows or halts progression. Weight-based dosing, three times daily with food, lifelong.

Eligibility at a Kuwait neurology or metabolic clinic

Required: biallelic CYP27A1 pathogenic variants on genetics, plus elevated plasma cholestanol. Adult management at Mubarak Al-Kabeer or Amiri neurology; paediatric cases at Sabah, often with Sidra Medicine Qatar confirmation.

The Kuwait prescribing and supply picture

Ctexli is not Kuwait MoH-registered as of 2026. Access is via MoH personal-import authorisation filed through MoH Foreign Medical Treatment pathway or via private personal-import. Reserve Meds coordinates the import file, prescription chain, and temperature-controlled US or EU sourcing.

Cost band

USD 150K-220K annual per patient (KWD 46K-67K), weight-dependent, lifelong. Kuwait MoH Foreign Medical Treatment pathway may fund Kuwaiti nationals for confirmed rare-disease imports case-by-case; private insurance unusual.

What to expect, week-by-week

Weeks 0 to 4: confirm diagnosis (locally or via Sidra), prescription, MoH FMT or personal-import filing. Weeks 4 to 8: shipment arrives, initiation under neurology or metabolic supervision, baseline labs documented. Weeks 8 to 24: cholestanol trend, liver function, tolerability monitored. Month 6 and 12: full reassessment and MRI white-matter.

When Ctexli is the wrong drug

No biallelic CYP27A1 means not this drug. Normal cholestanol means diagnosis in doubt. Advanced neurologic damage means stabilisation goal; family counselling required. Pregnancy data limited; contraception required for women of childbearing age.

Closing

Reserve Meds runs the Ctexli import file from the Mubarak Al-Kabeer, Amiri, or Sabah referral through MoH or personal-import authorisation, US or EU sourcing, and delivered Kuwait supply. Clinical decisions remain with your treating metabolic specialist or neurologist.

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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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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