

Cyltezo

Abu Dhabi · access guide

How to access Cyltezo (Humira biosimilar) from Abu Dhabi: 2026 pathway via SSMC, CCAD, Tawam, SKMC, and Burjeel Medical City | Reserve Meds

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

Abu Dhabi treats large adalimumab populations across rheumatology, dermatology, gastroenterology, ophthalmology, and paediatric specialty at SSMC, CCAD, Tawam, SKMC, and Burjeel Medical City. The 2026 question for Humira patients is whether to switch to Cyltezo, the FDA interchangeable biosimilar.

Why Cyltezo, why now

Cyltezo (adalimumab-adbm) was FDA-designated interchangeable with Humira in October 2021. Same indications: RA, JIA (4+), AS, PsA, plaque psoriasis (adult and paediatric 6+), CD (adult and paediatric 6+), UC (adult and paediatric 5+), HS (adult and paediatric 12+), uveitis. SC every other week.

Reserve Meds does not promote one TNF biosimilar over another or over the reference biologic. Other Humira biosimilars include Amjevita, Hyrimoz, Hadlima, Yusimry, and others.

What Cyltezo is, in plain language

SC adalimumab biosimilar pen or pre-filled syringe, every other week after training. Onset gradual (4-12 weeks). Interchangeable with Humira per FDA designation.

Eligibility at an Abu Dhabi specialty clinic

Treating specialist confirms indication, screens for hepatitis B, latent TB, active infection. Pregnancy plan documented. Live vaccines updated before initiation.

The Abu Dhabi prescribing and supply picture

Cyltezo EDE registration status is variable. Where Cyltezo is not yet registered, access is via EDE-approved named-patient import filed through SSMC, CCAD, Tawam, SKMC, or Burjeel pharmacy with DoH Abu Dhabi acknowledgment. Reserve Meds coordinates the import file, prescription chain, and cold-chain shipping.

Cost band

USD 40K-60K annual per patient (AED 150K-220K), lower than reference Humira. Thiqa for Emirati nationals covers under chronic-disease formulary; Daman Enhanced and private payors increasingly favour biosimilars with pre-authorization.

What to expect, week-by-week

Weeks 0 to 2: confirm indication, screen TB and hepatitis B, prescription, EDE filing. Weeks 2 to 4: shipment, clinic-supervised injection 1-2 sessions, training. Weeks 4 to 12: every-other-week SC; partial response week 4, fuller week 12. Month 6 and 12: full reassessment per indication.

When Cyltezo is the wrong drug

Active untreated TB or hepatitis B reactivation risk: treat first. NYHA III-IV heart failure: contraindicated. Demyelinating disease: caution. Active malignancy: contraindicated. Non-response or anti-drug antibodies on prior adalimumab: consider alternative class. Reserve Meds does not promote one TNF biosimilar over another or over the reference biologic.

Closing

Reserve Meds runs the Cyltezo supply file from the SSMC, CCAD, Tawam, SKMC, or Burjeel specialty referral through EDE registration or named-patient pathway and delivered cold-chain supply. Clinical decisions remain with your treating specialist.

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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