

Dalvance

Abu Dhabi · access guide

How to access Dalvance for acute bacterial skin and skin-structure infection (ABSSSI) from Abu Dhabi: 2026 in-emirate pathway via CCAD, SSMC, and Tawam infectious diseases

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

Abu Dhabi has the deepest adult infectious diseases bench in the UAE. Cleveland Clinic Abu Dhabi infectious diseases (with the most developed outpatient parenteral antimicrobial therapy programme in the country), Sheikh Shakhbout Medical City ID, Tawam Hospital ID in Al Ain, Burjeel Medical City ID, NMC Royal Khalifa City, SKMC ID consultation, and the broader Abu Dhabi Health Services Company (SEHA) network handle adult skin and soft-tissue infection management end-to-end. For adult cellulitis, wound infection, or drainable abscess where the prescribing ID specialist has chosen a single-dose IV lipoglycopeptide pathway rather than a multi-day inpatient course of vancomycin, the question is how Dalvance is sourced and dispensed, which infusion-capable site delivers it, what Thiqa or commercial coverage looks like, and how the post-infusion follow-up fits the family's routine.

Dalvance (dalbavancin, AbbVie; Xydalba in EU and UK markets) is the second-generation lipoglycopeptide IV antibiotic with a 14-day half-life that lets a single 30-minute infusion cover the full 2-week therapeutic window for an adult ABSSSI. This page explains how the 2026 in-emirate pathway works for an Abu Dhabi resident adult.

Why Dalvance, and why now

Dalvance is dalbavancin, a second-generation semi-synthetic lipoglycopeptide. Mechanism: inhibition of bacterial cell wall biosynthesis by binding the D-alanyl-D-alanine terminus of the peptidoglycan precursor. Operational distinguisher: 14-day half-life, one IV infusion, course done.

FDA approval for ABSSSI in adults: May 2014. Single-dose 1500 mg IV regimen: January 2018. Paediatric label: July 2021 (this page is adult-focused). EMA approval for Xydalba: February 2015. UAE EDE registration status is verified at intake; dalbavancin has limited commercial registration in the GCC and the named-patient European-import pathway is the operational supply route for most Abu Dhabi cases.

Reserve Meds does not promote one antibiotic over another.

What Dalvance is, in plain language

Dalvance is an intravenous drug. The single-dose regimen is 1500 mg given as a 30-minute IV infusion. The alternative two-dose regimen is 1000 mg IV over 30 minutes, then 500 mg IV over 30 minutes one week later. The single-dose option is the operationally dominant choice. The patient walks in, receives the 30-minute infusion, is observed on-site for at least 30 minutes afterwards, and goes home. Standard wound care continues independently.

Eligibility at an Abu Dhabi infectious diseases clinic

For Abu Dhabi resident adult patients, the ID services apply the FDA and EMA criteria with local operational adaptation:

1. Confirmed clinical diagnosis of ABSSSI: cellulitis or erysipelas with a defined area of inflammation, wound infection (post-surgical, post-trauma, or chronic), or drainable cutaneous abscess.
2. Adult (18 or older). Paediatric ABSSSI cases route to a paediatric infectious disease specialist.
3. Causative pathogen review. Gram stain and wound culture where possible before the first dose. Empiric Gram-positive coverage is appropriate when culture has not yet resulted.
4. Renal function check. No dose adjustment for CrCl 30 mL/min or greater; dose reduction for CrCl below 30 mL/min off dialysis.
5. Hepatic function check. Standard liver panel. Use with caution in moderate or severe hepatic impairment.
6. Pregnancy and breastfeeding review. Limited human data; use only if benefit clearly outweighs risk.
7. Allergy review for prior glycopeptide hypersensitivity (vancomycin, teicoplanin, telavancin, oritavancin).
8. Infusion-reaction precaution. Infusion over 30 minutes minimises the risk of red-man-syndrome-like reactions.
9. Hospital admission triage. Sepsis, severe systemic toxicity, immune compromise, suspected necrotising fasciitis, or suspected bone or joint involvement need hospital-level care.
10. Outpatient logistics confirmation. Infusion-capable site at Cleveland Clinic Abu Dhabi infusion suite, SSMC infusion services, Tawam Hospital infusion centre, Burjeel Medical City infusion services, NMC Royal Khalifa City, or a SEHA outpatient infusion suite. Post-infusion observation for at least 30 minutes. Documented follow-up wound assessment at 48 to 72 hours and at day 14.

The Abu Dhabi prescribing and supply picture, plainly

Dalvance UAE EDE registration status is verified at intake. The pathway is:

1. Prescribing physician: a board-certified Abu Dhabi infectious diseases specialist at Cleveland Clinic Abu Dhabi ID, SSMC ID, Tawam Hospital ID in Al Ain, Burjeel Medical City ID, NMC Royal Khalifa City, or SKMC ID consultation. Cleveland Clinic Abu Dhabi runs the deepest OPAT programme in the country with established single-dose lipoglycopeptide pathway experience.
2. Pharmacy dispensing and supply: hospital pharmacy at the prescribing centre. Named-patient European import (Xydalba ex-EU) via licensed regional distributors covers cases where in-country registration is not in place. Lead time is typically 5 to 10 business days.
3. Insurance pre-authorisation: Thiqqa coverage for Emirati nationals is the dominant pre-authorisation path; Daman and the major commercial insurers cover residents. The total-cost-of-care framing (single-dose dalbavancin plus infusion plus follow-up versus 5-to-7-day inpatient admission for IV vancomycin) is what lands with payers. [VERIFY: current UAE EDE registration status at intake.]
4. Ongoing monitoring: clinical wound assessment at 48 to 72 hours and at day 14.

Cost band and insurance positioning

US list price for a single 1500 mg dose is approximately USD 4,200 to 5,800 at WAC. At 2026 indicative cross rates, the AED-equivalent course cost band for cash-pay is approximately AED 18,400 to 31,200 per complete single-dose course inclusive of the named-patient supply and infusion centre fees. The cost case versus a 4 to 7 day inpatient admission for IV vancomycin at an Abu Dhabi private tertiary hospital often favours single-dose Dalvance on a total-cost-of-care basis. Thiqa coverage for Emirati nationals is the dominant pre-authorisation path.

What to expect on Dalvance, from infusion day forward

Infusion day: arrival at the infusion-capable outpatient site, IV access established, 30-minute IV infusion of 1500 mg dalbavancin, 30 minutes of on-site observation for any infusion-related reaction, then discharge home. Standard wound care continues independently: abscess drainage if there is one, dressing changes, elevation, pain control. Most patients tolerate the infusion without symptoms; the most common infusion-related symptoms are mild flushing or itching, which resolve when the infusion rate is slowed.

48 to 72 hours after infusion: clinical assessment by the prescribing ID office. The expected finding is a reduction in erythema spread, a reduction in pain, and resolution of fever if present at baseline.

Day 14: final clinical assessment for clinical success. The ID specialist documents clinical success and the course is complete. Liver enzymes are rechecked at day 14 if there was baseline hepatic concern.

When Dalvance is the wrong drug

For an Abu Dhabi patient with sepsis, suspected necrotising fasciitis, suspected osteomyelitis or septic arthritis, neutropenic infection, confirmed Gram-negative pathogen, vancomycin-resistant *Enterococcus faecium*, prior severe glycopeptide hypersensitivity, or pregnancy where benefit does not clearly outweigh risk, the pathway shifts:

- Inpatient IV vancomycin with therapeutic drug monitoring. - Daptomycin IV daily. - Linezolid PO or IV. - Ceftaroline IV. - Combination empiric therapy. - Surgical drainage as primary intervention. - Hospital admission for source control.

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Cultural and operational framing in Abu Dhabi

The single-dose IV pathway is the headline for Abu Dhabi families because the alternative is typically a 4 to 7 day inpatient admission at Cleveland Clinic Abu Dhabi, SSMC, Tawam, Burjeel Medical City, or a SEHA facility for IV vancomycin with twice-daily dosing, daily trough monitoring, and ID consultation. The 30-minute dalbavancin infusion compresses that into a single outpatient visit and a 30-minute observation window. For a working adult, a parent of school-age children, or a household primary caregiver, the operational difference matters substantially.

Dalbavancin is a synthetic semi-synthetic glycopeptide with no human or animal source material, halal-compatible and kosher-compatible by general consensus on semi-synthetic antibiotics. Ramadan scheduling: a 30-minute infusion can be booked before suhoor or after iftar without disrupting the fast.

OPAT infrastructure in Abu Dhabi is the deepest in the country, with Cleveland Clinic Abu Dhabi running the most developed outpatient parenteral antimicrobial therapy programme and established single-dose lipoglycopeptide pathway experience. SSMC (MD Anderson affiliation), Tawam Hospital in Al Ain, Burjeel Medical City, and the SEHA network provide additional infusion-capable sites.

Recurrent cellulitis context: some Abu Dhabi patients with chronic venous insufficiency, lymphoedema, recurrent skin breakdown in diabetes, or post-mastectomy or post-saphenectomy lymphatic disruption have recurrent lower-limb cellulitis episodes. The ID specialist may discuss repeat single-dose dalbavancin courses across episodes; this is a clinical judgement call and is not a default schedule.

Thiqa coverage discipline for rare or specialty antimicrobial pathways: Thiqa pre-authorisation for single-dose dalbavancin via the named-patient route is typically approved on the basis of the ID specialist's documented rationale comparing total cost of care versus inpatient IV vancomycin admission. The prescribing office initiates the documentation; the Thiqa case manager processes it within the standard pre-authorisation window.

What Reserve Meds does on this case

We are a US-based concierge coordinator. On an Abu Dhabi Dalvance case we build the documentation pack with the treating infectious diseases office, confirm UAE EDE registration status and the appropriate supply pathway, coordinate the named-patient supply order, run the Thiqa or commercial insurance pre-authorisation conversation with the total-cost-of-care framing, coordinate the infusion-capable outpatient site booking (Cleveland Clinic Abu Dhabi OPAT for the deepest single-dose lipoglycopeptide pathway experience), and stay with the case through the follow-up assessments with handoff to the local prescriber. Clinical decisions remain with your treating infectious diseases 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.

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Composite case examples. This document is for general information only and does not constitute medical advice. Please consult your treating physician.

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reservemeds.com · hello@reservemeds.com