

## Ebglyss

Oman · access guide

# How to access Ebglyss from Oman, the named-patient import pathway, 2026

By Reserve Meds · Clinical & regulatory team · Last reviewed 2026-04-23

A Oman adult or adolescent with moderate-to-severe atopic dermatitis whose disease is not adequately controlled with topical therapies, or who has not responded adequately to a previous systemic therapy or biologic, may receive a prescription for Ebglyss (lebrikizumab) from their treating dermatologist. Ebglyss is FDA-approved, developed by Eli Lilly, and is a high-affinity monoclonal antibody that binds soluble IL-13 and blocks its assembly of the IL-13Ra1 / IL-4Ra signalling heterodimer. In Oman, Ebglyss's local registration status is recent and varies; it may not be broadly available for every patient who clinically qualifies, which is why your dermatologist may be navigating a named-patient import pathway with you.

This guide explains the legal pathway, what your dermatologist needs to provide, typical timelines, and where Reserve Meds fits in.

## The clinical situation

Ebglyss is administered subcutaneously. The labelled regimen for moderate-to-severe atopic dermatitis includes an initial loading phase followed by every-two-weeks maintenance through week 16, and a step-down to every-four-weeks maintenance for patients who achieve clear or almost-clear skin at week 16. Eligibility is a clinical decision by your treating dermatologist based on disease severity, prior therapies, and response pattern. Ebglyss's mechanism, blocking soluble IL-13 specifically, is distinct from dupilumab's IL-4Ra blockade and from tralokinumab's different IL-13 binding profile.

## Is Ebglyss legally importable into Oman?

Yes, through the Directorate General of Pharmaceutical Affairs and Drug Control (DGPADC) named-patient import framework.

The named-patient mechanism allows a Oman-licensed physician to request import of a medicine not locally registered or not locally available for a specific patient when: (a) the medicine is approved by a recognised reference authority (FDA qualifies), (b) no locally available alternative is clinically equivalent for this patient, (c) the physician takes clinical responsibility, and (d) the importing party documents chain of custody. DGPADC reviews each application.

## How the pathway works, step by step

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1. **Consultation with your treating dermatologist.** Clinical rationale documented, including severity assessment, prior therapies, and Ebglyss as the indicated therapy.
2. **Import authorisation application.** Your dermatologist or the importing pharmacy files the DGPADC named-patient documentation including clinical rationale, patient identification (de-identified where possible), product details, and chain-of-custody plan.
3. **US-side sourcing.** Reserve Meds coordinates with our US-licensed specialty wholesale partner under DSCSA chain-of-custody.
4. **Cold-chain shipment.** Temperature-controlled transport with documented chain of custody.
5. **Arrival and administration.** Subcutaneous administration per your dermatologist's protocol; most patients or caregivers self-inject at home after training.
6. **Ongoing coordination.** Reserve Meds supports re-supply cadence aligned to the loading, every-two-weeks, or every-four-weeks maintenance dosing.

## What documentation your physician needs

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Your dermatologist will typically need to provide:

- Clinical rationale letter confirming diagnosis, severity, prior therapies, and Ebglyss as the indicated therapy
- Verification of their Oman medical licence (SCFHS / MOH)
- Patient identifier (anonymised reference where possible)
- Prescription with specified loading and maintenance dose
- Planned administration setting (home-injection or clinic)

Reserve Meds provides a physician documentation kit that bundles the templates DGPADC reviewers expect.

## Costs and timing

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Ebglyss's US cash-pay list price runs in an indicative 2026 drug-only range (delivered quote issued at intake) of roughly USD 3,500-4,000 per month at the loading and every-two-weeks maintenance phases, with the every-four-weeks schedule reducing monthly cost for eligible step-down responders. Shipment, cold-chain logistics, and concierge coordination add incremental cost; Reserve Meds issues a transparent quote at the start of intake.

Indicative timeline for the first shipment after cohort intake opens is 10-21 days from the moment a complete application is submitted to DGPADC. Re-supply is generally faster once the pathway is established.

*Fulfillment availability is limited to our first cohort, and all timelines published on this site are indicative. If your clinical situation is time-sensitive, tell us at intake. We triage accordingly.*

A culturally-aware note: atopic dermatitis in Oman adults and adolescents often has a significant quality-of-life burden during pilgrimage, fasting, and community events; your dermatologist and the Reserve Meds concierge case lead will work around clinic scheduling and travel to minimise disruption.

## Reserve Meds's role

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Reserve Meds is a US-based concierge coordinator for cross-border specialty medicine. For Ebglyss specifically, we provide:

- **Sourcing.** Through our US-licensed specialty wholesale partner, operating under DSCSA chain-of-custody.
- **Documentation.** Regulatory documentation package for your physician and for DGPADC review.
- **Logistics.** Cold-chain and temperature-monitored shipment coordination.
- **Concierge case lead.** A named point of contact throughout the coordination.

**What we do not do:** We are not the prescriber. We do not practice medicine. We are not the dispensing pharmacy. All clinical decisions remain with your treating dermatologist. We operate at limited first-cohort capacity; cases are scoped and prioritised case by case under our broker scope of practice.

## Frequently asked

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**Is this legal?** Yes, when executed through the DGPADC named-patient framework. See our trust and compliance page.

**How does Ebglyss compare with dupilumab and tralokinumab?** All three work in the type-2 inflammation axis; Ebglyss and tralokinumab are IL-13-specific (with different binding profiles), and dupilumab blocks the IL-4 receptor alpha affecting both IL-4 and IL-13 signalling. Your dermatologist decides which option fits your history.

**Can an adolescent receive Ebglyss?** Ebglyss is labelled down to the adolescent age bands in the FDA label. Your dermatologist determines suitability.

**Can I self-inject at home?** After training by your clinical team, most patients or caregivers self-inject at home using the pre-filled presentation.

**What about side effects?** Common effects include conjunctivitis, injection-site reactions, and herpes zoster in trial populations; your dermatologist manages monitoring and any adverse events.

**Will MoH or insurance cover any of this?** Cash-pay is the default for named-patient imports. Some Oman private insurers reimburse on case-by-case approval; we supply documentation for submission.

### *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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### 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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