Elaprase

United Arab Emirates · access guide

How to access Elaprase from the UAE, the named-patient import pathway, 2026

By Reserve Meds, Clinical and regulatory team. Last reviewed 2026-05-13.

An UAE patient with mucopolysaccharidosis II (MPS II, Hunter syndrome) may receive a prescription for Elaprase (idursulfase) from their treating metabolic geneticist. Elaprase is FDA-approved in the United States and manufactured by Takeda. It is a recombinant iduronate-2-sulfatase enzyme replacement therapy administered by intravenous infusion. Local availability of Elaprase in the UAE can be inconsistent: the drug may not be on every specialty pharmacy's standing formulary, the specific indication may not match what is locally registered, or the strength required may be back-ordered. When that happens, a named-patient import pathway through MoHAP remains a legitimate route for the patient whose physician has already prescribed the drug.

This guide explains the pathway, the documentation your physician needs, typical costs and indicative timing, and where Reserve Meds fits in.

The clinical situation

Elaprase is a recombinant iduronate-2-sulfatase enzyme replacement therapy. Mechanism: a recombinant form of human iduronate-2-sulfatase that catalyses the cleavage of the O-linked sulfate ester from heparan and dermatan sulfate. Dosing: 0.5 mg/kg by intravenous infusion once weekly, with pre-infusion premedication considered, per FDA labeling. Baseline workup per FDA labeling includes urinary GAG baseline, cardiac echocardiogram, pulmonary function where age-appropriate, airway assessment, and infusion-reaction risk screening. The FDA boxed warning covers life-threatening anaphylactoid reactions. Other important warnings include life-threatening anaphylactoid reactions, infusion-associated reactions, and patients with compromised respiratory function or acute febrile or respiratory illness may be at higher risk. Your specialist will discuss the risk-benefit profile and schedule monitoring before initiating therapy.

Is Elaprase legally importable into the UAE?

Yes, through the UAE Ministry of Health and Prevention (MoHAP) named-patient and personal-use import framework, coordinated through a UAE-licensed treating facility's pharmacy. The UAE has an established pathway for specialty medicines approved by reference authorities (US FDA, EMA, MHRA) but not stocked or registered for the specific indication locally.

The MoHAP named-patient route allows an UAE-licensed physician to request import of a medicine when: (a) the medicine is approved by a recognised reference authority, (b) no clinically equivalent locally registered alternative is suitable for the patient's indication and history, (c) the treating physician takes clinical responsibility for use, and (d) chain of custody is documented from the US source to the administering facility. Applications are typically filed through the dispensing institution's import pharmacy on the physician's behalf, with approval issued on a per-patient, per-cycle quantity basis.

How the pathway works, step by step

1. **Consultation with your treating specialist.** The prescribing decision is clinical. Your specialist documents the indication, prior therapies where relevant, and rationale for Elaprase.
2. **Baseline screening.** Urinary GAG baseline, cardiac echocardiogram, pulmonary function where age-appropriate, airway assessment, and infusion-reaction risk screening are confirmed and documented.
3. **MoHAP named-patient application.** Your specialist or the facility's import pharmacy files the application with clinical rationale, patient reference, product strength, quantity requested, and chain-of-custody plan.
4. **US-side sourcing.** Reserve Meds coordinates with our US-licensed specialty wholesale partner to secure product from Takeda's authorised distribution under DSCSA chain-of-custody.
5. **Cold-chain shipment.** Elaprase requires refrigerated transport at 2 to 8 degrees Celsius. Shipments include temperature-monitored packaging with continuous loggers and tamper-evident seals.
6. **Arrival and first dose.** The dispensing pharmacy releases product against the physician's prescription, and your specialist initiates therapy.

What documentation your physician needs

Your physician will typically need to provide:

- A clinical rationale letter confirming diagnosis, prior therapies where relevant, and Elaprase as the indicated next step
- Verification of their UAE medical licence
- A patient identifier, anonymised reference where privacy is preferred
- Documented pre-treatment screening consistent with FDA labeling (see above)
- The planned dosing regimen (0.5 mg/kg by intravenous infusion once weekly, with pre-infusion premedication considered, per FDA labeling)
- A monitoring plan covering GAG baselines, airway management plan, and pre-medication protocol

Reserve Meds provides a physician documentation kit tailored for MPS enzyme replacement therapy therapies, including the templates MoHAP reviewers commonly request.

Typical costs and indicative timing

Reserve Meds gives you a drug-only reference range plus a transparent delivered quote at intake. As an illustrative composite case, the US cash-pay reference range for a typical month of weekly infusions (weight-dependent) of Elaprase sits in an indicative 2026 band of approximately USD 35,000 to 50,000. International logistics, MoHAP documentation handling, cold-chain shipping, and concierge coordination add incremental cost. The delivered quote we issue at intake shows each line separately.

Indicative timing for first dose after cohort intake opens is approximately 3 to 6 weeks from the moment a complete application is submitted, assuming the documentation package is clean on first pass. Refills ship on a rolling cadence aligned to the dosing schedule.

Reserve Meds is a US-based concierge coordinator for cross-border specialty medicine. We are not a pharmacy, not the prescriber, and not the manufacturer. All clinical decisions remain with your treating physician.

Where Reserve Meds fits in

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

- **Sourcing.** Through our US-licensed specialty wholesale partner, operating under DSCSA chain-of-custody from manufacturer to export.
- **Documentation.** Regulatory package tailored for your physician and for MoHAP review, including MPS enzyme replacement therapy class templates.
- **Cold-chain logistics.** Temperature-monitored, internationally tracked shipment to your named dispensing facility with continuous temperature loggers.
- **Concierge case lead.** A named point of contact for your family and your physician across the full case arc.

We are a coordinator. We are not the prescriber, not a pharmacy, and not a dispensing facility. All clinical decisions remain with your treating specialist, and dispensing sits with the licensed UAE pharmacy of record. Reserve Meds operates on cash-pay only and does not bill insurance.

Frequently asked

Is this legal in UAE? Yes, when executed through the MoHAP named-patient and personal-use framework with appropriate documentation, clinical rationale, and a licensed dispensing facility. The pathway is routinely used across oncology, rare disease, and immunology at UAE tertiary centers.

What about the boxed warning? The FDA boxed warning on Elaprase covers life-threatening anaphylactoid reactions. Your specialist performs the risk-benefit assessment, schedules monitoring, and counsels the patient per labeling. Reserve Meds does not make that clinical judgement, your physician does.

Will my private health insurance cover this? Cash-pay is the default posture. Some UAE private insurers (Daman, AXA, Mednet-administered plans) reimburse named-patient imports on a case-by-case basis when the documentation package is strong. We supply documentation for your submission but do not process insurance claims.

How does cold-chain affect timing? Elaprase ships refrigerated. We use validated packaging with continuous temperature monitoring, and arrival temperature data is logged on every shipment.

What if my physician has not filed a named-patient request before? Named-patient import is an institutional process most major UAE tertiary centers (Cleveland Clinic Abu Dhabi, Sheikh Shakhbout Medical City, American Hospital Dubai, and Mediclinic City Hospital) have encountered. Our documentation kit is written for first-time applicants and tracks what MoHAP reviewers commonly ask for.

Start your intake

Reserve Meds is opening to a limited first cohort in 2026. Submit your case and our concierge case lead will reach out when we are ready to enter intake for Elaprase coordination in UAE.

Submit my Elaprase intake

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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