Entyvio

Dubai · access guide

How to access Entyvio from Dubai, the named-patient import pathway, 2026

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

A Dubai patient with moderate-to-severe ulcerative colitis or Crohn's disease may receive a prescription for Entyvio (vedolizumab) from their treating gastroenterologist after partial response or intolerance to conventional immunomodulators or an anti-TNF. Entyvio is FDA-approved, manufactured by Takeda, and is distinct among inflammatory bowel disease biologics because its mechanism is gut-selective rather than systemic. In the Kingdom of Dubai, Entyvio is available through some tertiary hospital pharmacies, but supply timing, presentation (intravenous induction vials versus subcutaneous maintenance pens), and institutional procurement windows can make the named-patient import pathway the cleaner route for families whose physicians want a predictable start date.

This guide explains the legal pathway, documentation your gastroenterologist needs, indicative timing and cost bands, and where Reserve Meds fits in.

The clinical situation

Entyvio is a humanised monoclonal antibody that binds the alpha4-beta7 integrin expressed on a subset of gut-homing T lymphocytes. By blocking that integrin from adhering to MAdCAM-1 on intestinal vasculature, it reduces gut-directed inflammatory trafficking while sparing systemic immune surveillance, a key differentiator versus anti-TNF or IL-12/23 agents. The standard regimen is intravenous induction at weeks 0, 2, and 6 at 300 mg per infusion, followed by maintenance every eight weeks intravenously or, more recently, a subcutaneous 108 mg pen self-administered every two weeks after IV induction. Your gastroenterologist will confirm diagnosis with endoscopy and histology, screen for latent tuberculosis and hepatitis per labeling, and map out an induction-to-maintenance sequence.

Is Entyvio legally importable into the Dubai?

Yes, through the UAE Ministry of Health and Prevention (MoHAP) named-patient / personal-use import framework. The pathway permits a the Dubai-licensed (under DHA) physician to request import of a medicine not locally stocked or not available in the required presentation when (a) the medicine is approved by a recognised reference authority such as the US FDA or EMA, (b) no clinically equivalent locally available option meets the patient's needs, (c) the physician accepts clinical responsibility, and (d) chain of custody is documented end to end.

Entyvio is locally registered in Dubai, so named-patient import is typically used when the subcutaneous pen presentation is not locally available, when hospital procurement timing is not clinically workable, or when a patient wishes to begin maintenance at home under their gastroenterologist's supervision rather than travelling for every infusion.

How the pathway works, step by step

1. **Consultation with your treating gastroenterologist.** Documentation of diagnosis, severity indices (Mayo score for UC or CDAI for Crohn's), prior therapies, and rationale for Entyvio specifically.
2. **Screening and baseline labs.** TB and hepatitis screening per labeling, baseline CBC, liver function, and infusion-reaction precautions discussed.
3. **MoHAP named-patient application.** Your physician or the hospital pharmacy files the application with clinical rationale, patient reference, product details (IV vials vs SC pens), and chain-of-custody plan.
4. **US-side sourcing.** Reserve Meds coordinates with our US-licensed specialty wholesale partner to secure product from the manufacturer's authorised distribution under DSCSA.
5. **Cold-chain shipment.** Entyvio ships under validated 2-8 °C conditions with temperature logging and chain-of-custody documentation.
6. **Arrival and administration.** The hospital infusion centre delivers IV induction; for SC maintenance, the dispensing pharmacy releases pens against your physician's prescription with injection training.

What documentation your physician needs

- Clinical rationale letter confirming diagnosis, severity, and Entyvio as the indicated therapy
- Verification of the DHA medical licence (Dubai emirate) (SCFHS)
- Endoscopy/histology report supporting IBD diagnosis
- TB and hepatitis screening results
- Planned induction and maintenance schedule (IV, SC, or hybrid)
- Patient identifier (anonymised reference preferred)

Reserve Meds provides a physician documentation kit that bundles the templates MoHAP reviewers expect to see for IBD biologic named-patient imports, including the IV-to-SC transition protocol if relevant.

Typical costs and indicative timing

Entyvio's US cash-pay drug-only reference range in 2026 sits at roughly USD 7,500-9,500 per 300 mg IV vial and roughly USD 3,500-4,500 per pair of 108 mg SC pens (one-month maintenance). International cold-chain logistics, MoHAP documentation handling, and concierge coordination are quoted separately. Reserve Meds issues a full transparent delivered quote at intake so your family sees one landed number before committing. Indicative range.

Indicative timing for first dose after cohort intake opens is 7-14 days from the moment a complete MoHAP application is submitted. Maintenance refills ship on a rolling calendar matched to your next dose.

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.

Where Reserve Meds fits in

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

- **Sourcing.** Through our US-licensed specialty wholesale partner, operating under DSCSA chain-of-custody from the manufacturer's authorised channel.
- **Documentation.** Regulatory package for your physician and for MoHAP review, including IBD-specific templates.
- **Logistics.** Validated 2-8 °C cold-chain shipment with temperature logging end to end.
- **Concierge case lead.** A named point of contact who coordinates induction calendar, maintenance refills, and any cycle adjustments.

What we do not do: we are not the prescriber, we do not practise medicine, and we are not the dispensing pharmacy. All clinical decisions remain with your treating gastroenterologist and the administering infusion facility.

Frequently asked

Is this legal in Dubai? Yes, when executed through the MoHAP named-patient / personal-use framework with appropriate documentation. See our trust and compliance page for our methodology.

Why choose Entyvio rather than an anti-TNF? Entyvio's gut-selective mechanism is attractive when systemic immunosuppression is a concern, when anti-TNF has failed or is contraindicated, or when a patient prioritises a favourable infection-risk profile. Your gastroenterologist weighs the full picture.

Can I do the IV induction locally and use the SC pen for maintenance? Yes, many patients follow that pattern. Your gastroenterologist confirms the transition at week 6 and our concierge team ships SC pens on the maintenance calendar.

What about private-insurance reimbursement? Cash-pay is the default. Some Dubai private insurers reimburse named-patient imports case by case; we supply documentation for your submission but do not process claims directly.

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 is in pre-launch. Published timelines and cost ranges are indicative, not guarantees.
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