Imbruvica

Pakistan · access guide

How to access Imbruvica from Pakistan, the named-patient import pathway, 2026

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

A Pakistani patient with chronic lymphocytic leukemia and small lymphocytic lymphoma, Waldenstrom's macroglobulinemia, mantle cell lymphoma after at least one prior therapy, marginal zone lymphoma, and chronic graft-versus-host disease may receive a prescription for Imbruvica (ibrutinib) from their treating hematologist. Imbruvica is FDA-approved in the United States and manufactured by Pharmacyclics and Janssen. It is a Bruton's tyrosine kinase inhibitor administered by oral capsule or tablet. Local availability of Imbruvica in Pakistan 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 DRAP 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

Imbruvica is a Bruton's tyrosine kinase inhibitor. Mechanism: a small-molecule covalent inhibitor of Bruton's tyrosine kinase that blocks B-cell receptor signaling. Dosing: 420 mg or 560 mg orally once daily depending on indication, per FDA labeling. Baseline workup per FDA labeling includes complete blood count, comprehensive metabolic panel, hepatitis B serologies, bleeding and atrial fibrillation history, and blood pressure baseline. Other important warnings include bleeding events, infections including PJP and hepatitis reactivation, cytopenias, cardiac arrhythmias including atrial fibrillation and ventricular arrhythmias, hypertension, second primary malignancies, tumor lysis syndrome, and embryo-fetal toxicity. Your hematologist will discuss the risk-benefit profile and schedule monitoring before initiating therapy.

Is Imbruvica legally importable into Pakistan?

Yes, through the Drug Regulatory Authority of Pakistan (DRAP) named-patient and personal-use import framework, coordinated with the treating facility's pharmacy. Pakistan 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 DRAP named-patient route allows a Pakistani-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 hematologist.** The prescribing decision is clinical. Your hematologist documents the indication, prior therapies where relevant, and rationale for Imbruvica.
2. **Baseline screening.** Complete blood count, comprehensive metabolic panel, hepatitis B serologies, bleeding and atrial fibrillation history, and blood pressure baseline are confirmed and documented.
3. **DRAP named-patient application.** Your hematologist 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 Pharmacyclics and Janssen's authorised distribution under DSCSA chain-of-custody.
5. **Arrival and first dose.** The dispensing pharmacy releases product against the physician's prescription, and your hematologist 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 Imbruvica as the indicated next step
- Verification of their Pakistani 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 (420 mg or 560 mg orally once daily depending on indication, per FDA labeling)
- A monitoring plan covering bleeding and AF history, HBV screen, and antithrombotic interaction note

Reserve Meds provides a physician documentation kit tailored for BTK inhibitor therapies, including the templates DRAP 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 daily dosing of Imbruvica sits in an indicative 2026 band of approximately USD 13,000 to 18,000. International logistics, DRAP documentation handling, 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 2 to 5 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.

Service availability is limited to our first cohort. All timelines are indicative, not guarantees.

Where Reserve Meds fits in

Reserve Meds is a US-based concierge coordinator for cross-border specialty medicine. For Imbruvica 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 DRAP review, including BTK inhibitor class templates.
- **Logistics.** Internationally tracked shipment to your named dispensing facility with tamper-evident packaging.
- **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 hematologist, and dispensing sits with the licensed Pakistani pharmacy of record. Reserve Meds operates on cash-pay only and does not bill insurance.

Frequently asked

Is this legal in Pakistan? Yes, when executed through the DRAP 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 Pakistani tertiary centers.

Will my private health insurance cover this? Cash-pay is the default posture. Cash-pay is the default posture in Pakistan; some employer plans cover specialty imports case-by-case. We supply documentation for your submission but do not process insurance claims.

What if my physician has not filed a named-patient request before? Named-patient import is an institutional process most major Pakistani tertiary centers (Shaukat Khanum Memorial Cancer Hospital, Aga Khan University Hospital, and the Indus Hospital) have encountered. Our documentation kit is written for first-time applicants and tracks what DRAP reviewers commonly ask for.

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.

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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