

Mektovi

Egypt · access guide

How to access Mektovi from Egypt, the named-patient import pathway, 2026

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

An Egyptian patient with unresectable or metastatic melanoma carrying a BRAF V600E or V600K mutation, BRAF V600E metastatic colorectal cancer (in combination with cetuximab), or BRAF V600E metastatic non-small cell lung cancer, may receive a prescription for Mektovi (binimetinib) from their treating oncologist. Mektovi is FDA-approved in the United States and manufactured by Pfizer (originally developed by Array BioPharma). It is given orally and almost always in combination with Braftovi (encorafenib). Local availability of Mektovi in Egypt can be inconsistent: the drug may not be on every cancer center'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 the Egyptian Drug Authority (EDA) 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

Mektovi is a small-molecule MEK1/MEK2 kinase inhibitor that suppresses downstream MAP kinase pathway signalling. Standard adult dosing is 45 mg orally twice daily, paired with encorafenib (Braftovi) at the indication-specific dose (450 mg once daily for melanoma; 300 mg once daily for colorectal cancer and NSCLC). Confirmation of a BRAF V600E or V600K mutation by an FDA-approved companion diagnostic, or an equivalent locally accredited test, is required before initiation. Baseline workup per FDA labeling includes complete blood count, hepatic function, creatine kinase, echocardiogram for LVEF assessment, ophthalmologic exam (retinal vein occlusion and serous retinopathy are known adverse events), and pregnancy testing where applicable. Important warnings include cardiomyopathy, venous thromboembolism, ocular toxicity, interstitial lung disease, hepatotoxicity, rhabdomyolysis, hemorrhage, and embryo-fetal toxicity. Your oncologist will discuss the risk-benefit profile and schedule monitoring before initiating therapy.

Is Mektovi legally importable into Egypt?

Yes, through the Egyptian Drug Authority (EDA) named-patient and personal-use import framework, coordinated with the treating facility's pharmacy. Egypt has an established pathway for specialty oncology medicines approved by reference authorities (US FDA, EMA, MHRA) but not stocked or registered for the specific indication locally.

The EDA named-patient route allows an Egypt-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.

How the pathway works, step by step

1. **Consultation with your treating oncologist.** The prescribing decision is clinical. Your oncologist documents the indication, BRAF V600 mutation status, prior therapies, and rationale for Mektovi (typically with Braftovi).
2. **Baseline screening.** CBC, LFTs, creatine kinase, echocardiogram, ophthalmologic exam, and pregnancy testing where applicable are confirmed and documented.
3. **EDA named-patient application.** Your oncologist or the hospital's import pharmacy files the application with clinical rationale, mutation status documentation, patient reference, product strength (15 mg tablets), 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 Pfizer's authorised distribution under DSCSA chain-of-custody.
5. **Shipment.** Mektovi is an oral tablet with controlled-room-temperature storage requirements. Shipments include temperature-monitored packaging and tamper-evident seals.
6. **Arrival and first dose.** The dispensing pharmacy releases product against the physician's prescription, and your oncologist initiates therapy with scheduled follow-up for monitoring.

What documentation your physician needs

Your physician will typically need to provide:

- A clinical rationale letter confirming diagnosis, BRAF V600E or V600K mutation status (with companion diagnostic report), prior therapy history, and Mektovi as the indicated next step
- Verification of their Egyptian medical licence
- A patient identifier, anonymised reference where privacy is preferred
- Documented pre-treatment screening (CBC, LFTs, CK, echocardiogram, ophthalmologic exam) consistent with FDA labeling
- The planned dosing strength and schedule (45 mg twice daily, with Braftovi at the indication-specific dose)
- A discussion note on the cardiomyopathy and ocular toxicity monitoring plan

Reserve Meds provides a physician documentation kit that bundles the templates EDA reviewers expect to see for MEK/BRAF inhibitor combination therapy.

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 30-day supply of Mektovi sits in an indicative 2026 band of roughly USD 8,500 to 11,000, with Braftovi adding a substantial increment if combined. International logistics, EDA documentation handling, 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 2 to 5 weeks from the moment a complete application is submitted to EDA, assuming the documentation package and BRAF mutation report are clean on first pass. Refills ship on a rolling cadence aligned to your monthly supply.

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 Mektovi 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 EDA review, including BRAF/MEK combination monitoring templates.
- **Logistics.** Temperature-monitored, internationally tracked shipment to your named dispensing facility.
- **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 oncologist, and dispensing sits with the licensed Egyptian pharmacy of record. Reserve Meds operates on cash-pay only and does not bill insurance.

Frequently asked

Is this legal in Egypt? Yes, when executed through the EDA named-patient and personal-use framework with appropriate documentation, clinical rationale, and a licensed dispensing facility. The pathway is routinely used across Egyptian oncology.

Do I need Braftovi as well? In all FDA-approved indications, Mektovi is given in combination with Braftovi (encorafenib). Your oncologist makes that determination. Reserve Meds can coordinate sourcing of both products on the same case.

What about the cardiac side effects? Cardiomyopathy is a known class effect of MEK inhibition. Your oncologist will perform baseline echocardiogram and periodic LVEF assessment. 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 Egyptian private insurers reimburse named-patient oncology 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.

What if my oncologist has not filed a named-patient request before? Named-patient import is an institutional process most major Egyptian cancer centers (Nasser Institute, NCI Cairo, Maadi Military Medical Compound, As-Salam International, Dar Al Fouad) have encountered. Our documentation kit is written for first-time applicants and tracks what EDA 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.

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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