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Mounjaro access in Pakistan: the DRAP Personal Use Import pathway

How Pakistani patients with type 2 diabetes obtain authentic Eli Lilly Mounjaro (tirzepatide) through the Drug Regulatory Authority of Pakistan named-patient pathway, on-label only.

Last reviewed 2026-05-12 by Reserve Meds clinical and regulatory team.

Quick orientation

Mounjaro is the Eli Lilly brand of tirzepatide, the first-in-class dual GIP and GLP-1 receptor agonist administered by once-weekly subcutaneous injection. The US FDA approved Mounjaro on 13 May 2022 as an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus. The same molecule is marketed in the United States under a separate brand (Zepbound) with a distinct FDA approval for chronic weight management and obstructive sleep apnea in obesity; Zepbound is out of scope for Reserve Meds. Pakistan carries one of the highest type 2 diabetes prevalence rates in the world, and Pakistani patients managing established T2D with progressive glycemic control challenges increasingly look to authentic Eli Lilly Mounjaro for documented chain-of-custody supply through the Drug Regulatory Authority of Pakistan Special Permission framework, also known as the Personal Use Import NOC.

Reserved for you.

Why Pakistani patients reach for Mounjaro through NPP

Three patterns of access gap operate in Pakistan's specialty market: registered but not stocked, registered for a different indication, and not registered locally at all. For Mounjaro the dominant pattern is the first. Eli Lilly holds international registrations across most major regulated markets, and a Pakistani regulatory and commercial footprint exists, but on-shelf availability at retail and even at large hospital pharmacies in Karachi, Lahore, and Islamabad has been uneven. The 2023 to 2025 global demand surge produced allocation discipline across all six dose strengths (2.5 mg, 5 mg, 7.5 mg, 10 mg, 12.5 mg, 15 mg), and Pakistani retail stocking was disproportionately affected for the lower titration strengths used for treatment initiation.

A second pattern matters more in Pakistan than in some peer markets. The same molecule under the Zepbound brand has driven viral interest in tirzepatide for weight loss in regional channels, and demand pressure spills into the Mounjaro brand even where the patient holds a legitimate type 2 diabetes diagnosis. Reserve Meds operates strictly within the FDA-approved Mounjaro label, which is type 2 diabetes only. We do not coordinate Mounjaro for weight management or any non-T2D indication; that is off-label use of this brand, and Zepbound (the FDA-approved tirzepatide brand for obesity) is not in Reserve Meds scope as of this module date. The third pattern of cost differential also matters: where local list price or out-of-pocket cost runs materially higher than a compliant cross-border quote, patients with private means seek NPP sourcing for ongoing chronic therapy under the on-label T2D indication.

The DRAP Personal Use Import pathway for Mounjaro

DRAP regulates the import of medicines through the Quality Assurance and Laboratory Testing (QA<) Division's Import and Export Section. For an FDA-approved medicine required for a specific named patient outside routine local stocking, the agency issues a Special Permission (Personal Use Import NOC). Applications are filed through DRAP's Online Import and Export System (OIES) by the institutional pharmacy at a tertiary hospital or by a DRAP-licensed specialty importer in Karachi or Lahore.

For Mounjaro the clinical-justification angle is strictly type 2 diabetes. A complete application typically includes:

- A clinical justification letter from the treating endocrinologist or internist confirming the patient's type 2 diabetes diagnosis with ICD-10 coding, current HbA1c, prior therapy history (typically metformin plus a second agent), the dose strength requested, and the rationale for tirzepatide over a comparator such as semaglutide
- The treating physician's PMDC license verification, with FCPS Pakistan specialist registration in endocrinology or internal medicine where applicable
- The patient identifier: CNIC for adult patients (Mounjaro is approved for adults; pediatric use is out of scope)
- Product details: Mounjaro, the specific KwikPen dose strength requested (2.5 mg, 5 mg, 7.5 mg, 10 mg, 12.5 mg, or 15 mg per 0.5 mL), manufacturer Eli Lilly and Company, country of origin, pack size (typically a four-pen monthly carton), and the requested quantity to cover a defined treatment course
- The destination dispensing facility's hospital pharmacy license, confirming the receiving pharmacy is licensed to handle imported pharmaceuticals and operates 2 to 8 degrees Celsius cold-chain storage
- A manufacturer or authorised distributor letter confirming the product is genuine Eli Lilly Mounjaro sourced through the legitimate US supply chain, with batch-level traceability under DSCSA
- A validated cold-chain plan from the US source through international air freight to Karachi, Lahore, or Islamabad with continuous temperature logging

Routine personal-use cases typically clear in four to eight weeks from a complete submission. The 21-day room-temperature stability window once a Mounjaro pen has been removed from refrigeration provides usable slack on transit and on the patient's home storage envelope, but the underlying handling class remains refrigerated biologic. Reserve Meds plans on the longer end of the routine DRAP range.

Where Mounjaro gets dispensed in Pakistan

Mounjaro is a refrigerated biologic injection. Dispensing requires 2 to 8 degrees Celsius storage and a pharmacy with continuous-temperature cold-chain capability. The institutions that handle named-patient imports of refrigerated biologics as established workflow are concentrated in Karachi, Lahore, and Islamabad. The natural homes for Mounjaro dispensing are the endocrinology and internal medicine services at Aga Khan University Hospital (AKUH) in Karachi (24/7 temperature-controlled pharmacy network), Liaquat National Hospital in Karachi, the Indus

Hospital and Health Network in Karachi, the Combined Military Hospitals (CMH) network in Rawalpindi and Lahore, and Shifa International Hospital in Islamabad.

Pakistan Kidney and Liver Institute (PKLI) in Lahore is a natural dispensing partner for the T2D-with-CKD population that may also be considering tirzepatide under endocrinology supervision. Patients in Peshawar, Quetta, Multan, Faisalabad, or smaller cities typically route to a Karachi, Lahore, or Islamabad hospital pharmacy for receipt and then continue follow-on care under their local treating physician. Reserve Meds plans the cold-chain handoff to a major-city dispensing facility; cold-chain integrity from the dispensing pharmacy to the patient's home is the responsibility of the local treating clinic under Eli Lilly storage requirements.

Real cost picture for Mounjaro in Pakistan

US wholesale acquisition cost per Eli Lilly's published pricing is approximately USD 1,069.08 per four-pen monthly carton, applied uniformly across all six dose strengths. Annualised, this equates to roughly USD 12,800 to USD 13,000 per year at WAC before any rebates or insurer adjustments. The Pakistani rupee has been volatile across the last several years; as of May 2026 the USD to PKR rate sits in the 278 to 280 range, with April 2026 CPI inflation at 10.9 percent. At current exchange rates a USD 13,000 annual drug cost translates to roughly PKR 3.6 million, and the rupee figure can move materially over a single quote-to-shipment cycle.

Because PKR has been volatile historically and inflation is again rising, Reserve Meds quotes in USD and accepts wire transfers from any USD-accessible source. International cold-chain logistics for Mounjaro run higher than ambient lanes, typically USD 600 to USD 1,200 per shipment depending on quantity and route. DRAP fees and FBR Customs charges are nominal relative to the drug itself. The Reserve Meds coordination fee is itemised separately on every firm quote. On insurance, Adamjee, Jubilee, EFU, State Life, IGI, and Pak-Qatar each assess named-patient imports case by case. Most plans do not reimburse imported, unregistered or unstocked specialty drugs; some pay a partial percentage. The realistic default is cash-pay, with families often consolidating funds from overseas relatives.

Typical timeline for Mounjaro in Pakistan

For a patient with established type 2 diabetes, a documented prior therapy history, and a major-city endocrinologist or internist, the typical end-to-end cycle is 6 to 10 weeks. The DRAP Special Permission step generally runs 4 to 8 weeks for routine cases on the OIES portal. US-side sourcing through Eli Lilly's authorised distribution channel adds approximately 1 to 2 weeks. International cold-chain air freight and FBR Customs clearance at Karachi, Lahore, or Islamabad airport are typically 3 to 5 days under qualified passive shippers with temperature logging. The 2 to 8 degrees Celsius requirement is tight relative to ambient shipments; customs holds beyond 48 to 72 hours trigger excursion-handling protocols, though the 21-day room-temperature stability window provides operational slack. Timelines are presented as typical ranges, not promises; specific dates are confirmed at firm-quote issuance.

What your physician needs to provide

The clinical justification letter for Mounjaro is the centrepiece of the DRAP package. For this product the letter typically includes:

- The patient's confirmed type 2 diabetes diagnosis with ICD-10 coding (E11 or appropriate subcode), current HbA1c, baseline weight, BMI, and prior therapy history (typically metformin, often a second oral agent or basal insulin)
- Clinical rationale for tirzepatide specifically: the SURPASS-2 trial evidence base for the molecule and the patient-specific reasons (efficacy expectation, tolerability profile, dosing convenience) the prescriber selects Mounjaro over a comparator such as semaglutide
- The dosing plan with titration schedule: 2.5 mg once weekly for 4 weeks as a starting dose (not for glycemic control), then 5 mg once weekly, with 2.5 mg increments after at least 4 weeks on the current dose up to a maximum of 15 mg once weekly; the requested dose strengths sequenced to cover the titration
- The monitoring plan covering pancreatitis (persistent severe abdominal pain), acute gallbladder disease (cholelithiasis, biliary colic), hypoglycemia when combined with insulin or insulin secretagogues, acute kidney injury risk especially with significant GI adverse events and volume depletion, hypersensitivity reactions, severe GI disease, and diabetic retinopathy complications in pre-existing retinopathy
- The contraindication check: confirmation that the patient does not have a personal or family history of medullary thyroid carcinoma or Multiple Endocrine Neoplasia syndrome type 2 (given the boxed warning for thyroid C-cell tumors)
- The pharmacovigilance commitment to report adverse events through the DRAP Pharmacovigilance Centre as part of the post-import obligation

PMDC-licensed endocrinologists and internists at AKUH, Liaquat National, Indus, PKLI, CMH, and Shifa International hold full signing authority on Special Permission applications.

Common questions about Mounjaro in Pakistan

Can I get Mounjaro for weight loss? No. Reserve Meds operates strictly within the FDA-approved Mounjaro label, which is type 2 diabetes only. Any inquiry that includes weight-management language is redirected. Zepbound, the FDA-approved tirzepatide brand for chronic weight management and obstructive sleep apnea in obesity, is out of Reserve Meds scope as of this module date.

How does Mounjaro compare to Ozempic for type 2 diabetes? The SURPASS-2 trial reported tirzepatide non-inferior and superior to once-weekly semaglutide 1 mg on HbA1c reduction in adults with type 2 diabetes. The choice between agents is a clinical decision for your endocrinologist or internist, not Reserve Meds. Both molecules are available through the DRAP Special Permission pathway for their on-label diabetes indications.

How do I know the Mounjaro I get through Reserve Meds is authentic? Reserve Meds sources only through Eli Lilly's authorised US distribution channel, documents every node from US release through international air freight and Pakistani customs to dispensing pharmacy receipt under DSCSA-traceable lots, and provides batch-level chain-of-custody attestation on

every shipment. The documented DSCSA route is the authentic alternative to regional gray-market channels.

Will Adamjee, Jubilee, EFU, or State Life cover Mounjaro? Coverage for named-patient imports of unregistered or unstocked specialty drugs is uncommon across Pakistani health plans. Some pay a partial percentage on a case-by-case basis. The realistic default is cash-pay.

What is the safety profile? The label carries a boxed warning for thyroid C-cell tumors based on rodent studies. Mounjaro is contraindicated in patients with personal or family history of medullary thyroid carcinoma or MEN 2. Most common adverse reactions are gastrointestinal: nausea, diarrhea, decreased appetite, vomiting, constipation, dyspepsia, abdominal pain. Serious warnings cover pancreatitis, acute gallbladder disease, hypoglycemia in combination with insulin or insulin secretagogues, acute kidney injury, hypersensitivity reactions, and diabetic retinopathy complications in pre-existing retinopathy.

Can the medicine be delivered to our home? The dispensing facility must be a Pakistan-licensed pharmacy with cold-chain capability. Cold-chain integrity from the dispensing pharmacy to the patient's home is the patient's clinic's responsibility under Eli Lilly's storage requirements.

Where Reserve Meds fits in Mounjaro cases

Reserve Meds is a US-based concierge coordinator. We do not replace your endocrinologist or internist, do not replace DRAP, and do not replace the dispensing hospital pharmacy or in-country importer. For Mounjaro specifically we orchestrate US-side sourcing through Eli Lilly's authorised distribution channel, the regulatory documentation kit your physician needs (T2D-specific letter template, titration schedule reference, monitoring plan summary, DSCSA chain-of-custody attestation, DRAP pharmacovigilance reference), validated cold-chain logistics with continuous temperature monitoring, and a single named coordinator. T2D diagnosis confirmation, prescriber attestation tied to the on-label indication, and dose-strength specification are mandatory intake artefacts. We will decline intake for any inquiry that indicates obesity, weight management, or any non-T2D indication.

Next step

If your treating physician has confirmed Mounjaro is the right therapy for type 2 diabetes and DRAP Special Permission is the route, join the waitlist below and we will confirm eligibility within 24 to 48 hours and route the documentation kit to your physician and to the dispensing hospital pharmacy.

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Review & oversight. Content on this page is reviewed by Reserve Meds's clinical and regulatory team. A US-licensed pharmacist reviews every prescription before dispensing. Regulatory posture is informational, not legal advice; case-specific questions route to retained outside counsel. Review methodology >

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