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Nurtec ODT access in Pakistan: the DRAP Special Permission pathway

How adults in Pakistan with episodic migraine access Nurtec ODT, the first oral CGRP receptor antagonist approved for both acute treatment and prevention on a single label, when rimegepant is not registered with DRAP.

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

This page describes the DRAP Special Permission Personal Use Import pathway for Nurtec ODT for adults in Pakistan with episodic migraine, including those who require both acute treatment and prevention on a single molecule.

Section 1. Quick orientation

Nurtec ODT (rimegepant) is a small-molecule oral CGRP receptor antagonist in the gepant class, formulated as a 75 mg orally disintegrating tablet that dissolves on the tongue without water. Nurtec ODT is marketed in the United States by Pfizer, which acquired Biohaven Pharmaceutical in October 2022; outside the US, rimegepant is sold under the brand name Vydura. The US Food and Drug Administration approved Nurtec ODT for the acute treatment of migraine with or without aura in adults in February 2020, and on 27 May 2021 approved an expanded indication for the preventive treatment of episodic migraine in adults. With that second approval Nurtec ODT became the first and currently the only oral migraine medication carrying both an acute and a preventive indication on a single label. Rimegepant is not registered with the Drug Regulatory Authority of Pakistan (DRAP) under either the Nurtec or Vydura brand. For adults in Pakistan whose neurologist has identified rimegepant as the appropriate next step, the lawful pathway is the DRAP Special Permission for Personal Use Import (also referred to as the No Objection Certificate for Personal Use Import) filed through the DRAP Online Import and Export System (OIES). Reserve Meds coordinates the US-side Pfizer-channel sourcing, the regulatory documentation, the international logistics, and a single named coordinator who stays with your family throughout the case. **Reserved for you.**

Section 2. Why patients in Pakistan need Nurtec ODT through a named-patient pathway

Pakistan's specialty drug market is concentrated in Karachi, Lahore, and Islamabad, with the gap between FDA-approved availability and local pharmacy stock most pronounced in newer specialty mechanisms where the local patient population is modest relative to the cost of a DRAP registration filing. Rimegepant has not been registered in Pakistan under the Nurtec brand by Pfizer or under the Vydura brand. Pakistan's access gap pattern that applies here is therefore the third pattern in the country framework: not registered locally at all.

Three distinct patient populations in Pakistan reach for Nurtec ODT through the Personal Use Import pathway. The first is patients who need the dual indication on a single molecule. Most

preventive migraine drugs (topiramate, propranolol, anti-CGRP injectable monoclonals such as erenumab, fremanezumab, galcanezumab) require a separate acute therapy for breakthrough attacks, which creates a two-drug regimen, two prescriptions, two supply chains, and two cost lines. Nurtec ODT collapses that into one molecule taken every other day for prevention with the option to use the same tablet acutely for breakthrough attacks, up to 18 doses per month total across both indications combined per the FDA label. For a Pakistani family planning USD-denominated funding across multiple overseas remittance sources, removing one full logistics leg per cycle is materially valuable. The second population is patients who have failed multiple oral preventives and multiple anti-CGRP injectable monoclonal antibodies and for whom an oral CGRP receptor antagonist with room-temperature shelf storage is the next rational option; the injectable anti-CGRP biologics carry cold-chain handling friction at the patient level in Pakistani households without consistent refrigeration. The third is patients whose Pakistani neurologist has prescribed rimegepant after international travel, after exposure to US migraine specialists, or after literature review, and who need a structured cash-pay import pathway.

Section 3. The DRAP Special Permission pathway for Nurtec ODT

DRAP regulates the import of medicines through the Quality Assurance and Laboratory Testing Division's Import and Export Section, with Drug Registration Board oversight for new product registration matters. For unregistered medicines required by a specific patient, DRAP issues a Special Permission, also referred to as the No Objection Certificate (NOC) for Personal Use Import. Applications are filed through DRAP's Online Import and Export System (OIES), the electronic application portal for import and export permission matters. Patient-level personal-use applications are submitted by the patient or applicant directly on the portal; institutional applications are filed by the hospital pharmacy.

The application package for a Personal Use Import of Nurtec ODT typically includes a clinical justification letter from the treating neurologist (migraine diagnosis, monthly migraine day count, prior preventive therapies attempted, the clinical rationale for selecting rimegepant for both indications), the neurologist's PMDC license verification, the patient identifier (CNIC for adults), the product details (Nurtec ODT 75 mg orally disintegrating tablets, Pfizer NDC, requested carton count), the dispensing facility license, a Pfizer or authorised distributor letter confirming the product is genuine and was sourced through the legitimate US supply chain, and the chain-of-custody plan.

The cell-specific clinical-justification angle for Nurtec ODT is the dual-indication framing and the monthly-dose-ceiling pattern. DRAP reviewers are familiar with single-indication acute migraine drugs; the rimegepant case is materially strengthened by an explicit statement that the patient requires the preventive indication as well as the acute indication, with the planned dose schedule on the application (75 mg every other day for prevention; up to one additional 75 mg acute dose on non-dosing days for breakthrough attacks; not to exceed 18 doses per month total). The neurologist's letter should reference the patient's prior preventive trials (topiramate, propranolol, amitriptyline at adequate doses and durations; any anti-CGRP injectable monoclonals attempted including erenumab, fremanezumab, galcanezumab, or eptinezumab) and the response or intolerance pattern. For Pakistani families paying in USD and pooling funds across overseas remittances, the application's clear monthly-dose ceiling makes pack-volume planning predictable: a typical 8-tablet Nurtec ODT carton supports approximately two weeks of preventive dosing, and quarterly refill cycles are typical once the documentation pattern is established. Routine personal-use cases typically clear in four to eight weeks from a complete submission. Reserve Meds plans on the longer end of the routine range and treats any faster turnaround as upside.

Section 4. Where Nurtec ODT gets dispensed in Pakistan

Nurtec ODT is a small-molecule orally disintegrating tablet. It is shelf-stable at room temperature, with the FDA label specifying storage at 20 to 25 degrees Celsius with permitted excursions to 15 to 30 degrees Celsius. No refrigeration is required. No reconstitution or diluent. The orally disintegrating tablet is supplied in a blister pack of 8 tablets per carton with each tablet sealed in its own foil-backed cavity for moisture protection, which satisfies tamper-evidence and child-resistance requirements without secondary packaging modification. The dispensing-facility footprint in Pakistan is therefore broad: any licensed hospital outpatient pharmacy or DRAP-licensed import pharmacy with institutional credentials to receive an unregistered medicine can serve as the dispensing point.

The major tertiary centres run these cases as an established workflow. Aga Khan University Hospital (AKUH) in Karachi operates a 24/7 pharmacy network with experienced import documentation handling and a Department of Neurology comfortable with refractory and chronic migraine management. Shifa International Hospital in Islamabad serves the federal capital region with the same import-pharmacy capability. Liaquat National Hospital in Karachi handles outpatient neurology cases with parallel infrastructure. The Combined Military Hospitals (CMH) network with tertiary capacity at CMH Rawalpindi, CMH Lahore, and other major cantonment cities supports military families and civilian patients on a referral basis. Indus Hospital and Health Network, Shaukat Khanum Memorial Cancer Hospital and Research Centre (where the treating neurologist is on staff for outpatient dispensing), and the Pakistan Kidney and Liver Institute (PKLI) in Lahore add additional capacity. For neurologists in private practice or at smaller hospitals in Peshawar, Quetta, Multan, Faisalabad, and elsewhere, the typical route is to partner with a DRAP-licensed specialty importer based in Karachi or Lahore who handles the OIES filing, the FBR Customs clearance, and the dispensing handoff at a licensed facility.

Section 5. Real cost picture for Nurtec ODT in Pakistan

Reserve Meds quotes in US dollars and accepts USD wire transfers from any USD-accessible source. The Pakistani Rupee has been volatile across the last several years; as of May 2026 the USD to PKR rate is in the 278 to 280 range, with annual CPI inflation reading 10.9 percent in April 2026. Quoting in USD insulates the patient from intra-case currency drift, which matters when family-pooled funding is moving across multiple overseas relatives.

- **Drug cost reference.** US Wholesale Acquisition Cost per Pfizer's 2023 price disclosure is USD 951.45 per carton of 8 tablets (75 mg), or approximately USD 119 per tablet at WAC. Retail and uninsured US pricing in 2026 has ranged from approximately USD 1,050 to USD 1,290 per 8-tablet pack across major pharmacy chains. At preventive use of 75 mg every other day, monthly consumption is approximately 15 tablets, or roughly two cartons. For Pakistani families, this corresponds to approximately PKR 530,000 per WAC carton at the prevailing rate, before logistics, regulatory documentation, and concierge fees. Pfizer's US-only access programmes (the Nurtec ODT savings card and the Pfizer Patient Assistance Foundation) do not extend to international orders and are not referenced in any Pakistan quote.
- **International logistics.** Standard ambient pharmaceutical air freight via DHL Medical Express or FedEx Priority Overnight International with pharma-grade packaging. The blister-pack format ships well in consolidated movements; Nurtec ODT can be batched with other room-temperature small molecules. The typical logistics envelope for a small-

molecule consignment to Karachi or Lahore is USD 400 to USD 1,500 depending on pack volume and the carrier route.

- **Regulatory documentation handling.** DRAP OIES filing support, chain-of-custody documentation, FBR Customs coordination, and the dispensing-facility handoff documentation. Where the family is partnering with a DRAP-licensed importer in Karachi or Lahore, the importer's documentation fee is itemised separately.
- **Reserve Meds concierge fee.** Itemised separately on every firm quote, covering the single named coordinator, US-side sourcing through Pfizer's open distribution channel, and the case management through delivery and refill.

Pakistan's private health insurers (State Life, Adamjee, EFU, Jubilee, IGI, Pak-Qatar Family Takaful) typically do not reimburse named-patient imports of unregistered specialty drugs. The Sehat Sahulat Program's Rs. 1,000,000 per family per year ceiling does not stretch to cover a sustained Nurtec ODT preventive cadence at WAC pricing. Cash-pay funded through patient and family resources, often supplemented by overseas remittances from relatives in Saudi Arabia, the UAE, the UK, the US, and Canada, is the practical funding posture; the dual-indication structure simplifies the budgeting because there is no separate acute therapy cost line.

Section 6. Typical timeline for Nurtec ODT in Pakistan

From the point at which Reserve Meds receives a complete documentation package, the DRAP Special Permission for a small-molecule oral product with a clear dual-indication clinical justification typically clears in four to eight weeks. The ambient-shipping profile means logistics adds minimal additional time once the NOC is in hand; standard pharmaceutical air freight to Karachi or Lahore is a 5 to 10 business day window door-to-pharmacy. There is no cold-chain handoff to schedule, no temperature-excursion review, and no specialty-pharmacy enrolment to navigate. A realistic end-to-end planning horizon from first contact to in-hand dispensing for a first order is six to twelve weeks. Quarterly refill cycles for a patient who has stabilised on the preventive cadence follow a shorter timeline because the documentation is on file and the dispensing-facility relationship is established. These ranges are typical, not promises.

Section 7. What your physician needs to provide

The treating neurologist's clinical justification letter is the cornerstone of the Personal Use Import package. For Nurtec ODT the letter ideally includes the migraine diagnosis (episodic migraine with or without aura, with monthly migraine day count), the prior preventive therapy history (topiramate, propranolol, amitriptyline at what doses and durations; any anti-CGRP injectable monoclonal antibodies attempted including erenumab, fremanezumab, galcanezumab, or eptinezumab, with response or intolerance pattern), the prior acute therapy history (triptan trials if any), the clinical rationale for the dual indication on a single molecule, the planned dose schedule (75 mg every other day for prevention; up to one additional 75 mg acute dose on non-dosing days for breakthrough attacks; not to exceed 18 doses per month total across both indications combined per the FDA label), the concomitant medication review for CYP3A4 interactions (avoid co-administration with strong CYP3A4 inhibitors such as clarithromycin, ketoconazole, itraconazole; avoid strong and moderate CYP3A4 inducers such as rifampin, phenytoin, carbamazepine, St. John's wort), and the hepatic-function assessment (severe hepatic impairment, Child-Pugh C, is a contraindication).

The neurologist's PMDC license number is on every document. The dispensing-facility licence (AKUH, Shifa International, Liaquat National, CMH, or a DRAP-licensed importer-coordinated facility) sits alongside the neurologist's letter in the OIES filing. Post-import pharmacovigilance reporting through the DRAP Pharmacovigilance Centre stays with the treating neurologist for any adverse events. Reserve Meds does not write the clinical letter and does not file with DRAP; we supply the documentation kit, the Pfizer authenticity attestation tying the consignment back to the legitimate US supply chain, and the chain-of-custody plan.

Section 8. Common questions about Nurtec ODT in Pakistan

Will Adamjee, Jubilee, EFU, or State Life cover this? Coverage for named-patient imports of unregistered drugs is uncommon across Pakistani health plans. Some assess case by case. A chronic dual-indication migraine therapy at WAC-anchored cash-pay pricing is typically outside formulary. We supply the documentation an insurer needs to assess a claim; the claim is yours or your hospital's to file. The realistic default is cash-pay.

How does Sehat Sahulat interact with named-patient imports? The Rs. 1,000,000 per family per year ceiling is structured around in-network empaneled hospital treatment, not imported drug procurement, and typically does not cover a sustained Nurtec ODT preventive cadence. Patients can still use Sehat Sahulat for unrelated hospitalisation and supportive care while the Nurtec ODT supply is procured separately on cash-pay.

Will my PMDC-licensed neurologist's letter be sufficient if DRAP queries the case? Yes. PMDC-licensed neurologists at the major tertiary centres have signing authority on Personal Use Import applications. DRAP may request additional clarification on the prior preventive trials or on the dual-indication monthly-dose ceiling; the treating neurologist answers those queries directly.

What is the safety profile? The most common adverse reactions in clinical trials were nausea (2 percent acute, 3 percent preventive) and hypersensitivity reactions including dyspnea and rash. The drug carries no boxed warning. Hepatotoxicity signals seen with earlier-generation gepants (telcagepant, discontinued) have not been observed with rimegepant in pivotal trials or post-marketing data through 2026.

What is the monitoring requirement? Standard clinical follow-up for migraine response. No mandatory lab monitoring. No ECG. Patients on strong CYP3A4 inhibitors should avoid concomitant use; CYP3A4 inducers reduce rimegepant exposure and should be avoided. Patients with severe hepatic impairment (Child-Pugh C) should not use rimegepant.

Why Nurtec ODT versus Ubrelvy or an injectable anti-CGRP biologic? The dual indication on a single molecule is the structural differentiator. No other approved migraine drug carries both an acute and a preventive label on a single label. Injectable anti-CGRP monoclonals require cold-chain handling and a subcutaneous injection cadence; rimegepant is room-temperature and oral. Ubrelvy is acute only. The choice is the treating neurologist's; Reserve Meds does not steer that decision and supports access to either Nurtec ODT or Ubrelvy through the Personal Use Import pathway.

Section 9. Where Reserve Meds fits in Nurtec ODT cases

Reserve Meds is a US-based concierge coordinator. We do not replace your neurologist, do not replace DRAP, and do not replace your dispensing hospital pharmacy or the in-country importer. For Nurtec ODT specifically, the orchestration we provide is US-side sourcing through Pfizer's

open distribution channel via McKesson, Cardinal Health, or Cencora/AmerisourceBergen (no specialty-pharmacy enrolment is required), the regulatory documentation kit your neurologist and the dispensing hospital pharmacy need for the DRAP Personal Use Import filing through OIES, the Pfizer authenticity attestation tying the consignment back to the legitimate US supply chain, the international ambient air-freight logistics that benefit from consolidation with other room-temperature small molecules, and a single named coordinator who stays with your family across the first order and the quarterly refill cycles that the preventive cadence generates. The dual-indication value proposition is the cleanest patient-education story in the migraine vertical, and Nurtec ODT sits in Reserve Meds' Tier 1 priority basket for the MENA and South Asia corridor. No prior Reserve Meds case experience exists for Nurtec ODT at the date of this page; standard NPP coordination applies with the room-temperature handling profile making this one of the most logistics-friendly molecules in the Reserve Meds matrix.

Section 10. Next step

If your neurologist has identified Nurtec ODT as the appropriate next step for your migraine and you are based in Pakistan, the next step is the waitlist. We confirm eligibility within 24 to 48 hours, route the conversation to a structured documentation work-up, and align with your dispensing hospital pharmacy or the DRAP-licensed importer on the OIES filing. **Reserved for you.**

This guide is informational, not medical or legal advice. The DRAP Personal Use Import framework requires licensed clinical judgment; Reserve Meds is the coordinator, not the prescriber or the dispensing facility.

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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