Revlimid

Egypt · access guide

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

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

An Egyptian patient with multiple myeloma (in combination with dexamethasone, and as maintenance after autologous stem cell transplant), transfusion-dependent anemia in low- or intermediate-risk myelodysplastic syndromes (MDS) associated with deletion 5q, mantle cell lymphoma after prior therapy, or relapsed or refractory follicular or marginal zone lymphoma in combination with rituximab, may receive a prescription for Revlimid (lenalidomide) from their treating hematologist. Revlimid is FDA-approved in the United States and manufactured by Bristol Myers Squibb. It is an oral immunomodulatory drug (IMiD) administered by capsule. Local availability of Revlimid in Egypt 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 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

Revlimid is an oral immunomodulatory drug. Mechanism: a thalidomide analogue that binds cereblon, a substrate receptor of the CRL4 E3 ubiquitin ligase, leading to degradation of the Ikaros and Aiolos transcription factors and downstream antineoplastic and immunomodulatory effects. Dosing: indication-specific, typically 25 mg orally once daily on days 1 through 21 of repeated 28-day cycles for myeloma combinations, and 10 mg orally once daily for del(5q) MDS, per FDA labeling. Baseline workup per FDA labeling includes pregnancy testing in females of reproductive potential under the Revlimid REMS program, CBC with differential, comprehensive metabolic panel, and venous thromboembolism risk review. Other important warnings include embryo-fetal toxicity (boxed warning), hematologic toxicity including neutropenia and thrombocytopenia (boxed warning), and venous and arterial thromboembolism (boxed warning). Your hematologist will discuss the risk-benefit profile and schedule monitoring before initiating therapy.

Is Revlimid legally importable into Egypt?

Yes, through the Egyptian Drug Authority (EDA) named-patient and personal-use import framework, coordinated through an Egyptian-licensed treating facility's pharmacy. Egypt 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 EDA named-patient route allows an Egyptian-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 Revlimid.
2. **Baseline screening.** Pregnancy testing under REMS-equivalent process for females of reproductive potential, CBC with differential, comprehensive metabolic panel, and VTE risk review are confirmed and documented.
3. **EDA 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 Bristol Myers Squibb'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 (multiple myeloma, del(5q) MDS, MCL, or r/r FL/MZL), prior therapies where relevant, and Revlimid as the indicated next step
- Verification of their Egyptian medical licence
- A patient identifier, anonymised reference where privacy is preferred
- Documented pre-treatment screening consistent with FDA labeling (see above), including pregnancy testing where applicable
- The planned dosing regimen (indication-specific, per FDA labeling)
- A monitoring plan covering CBC at regular intervals, pregnancy surveillance for females of reproductive potential, and VTE prophylaxis plan

Reserve Meds provides a physician documentation kit tailored for IMiD therapies, including the templates EDA 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 28-day cycle of Revlimid at 25 mg dosing sits in an indicative 2026 band of approximately USD 22,000 to 26,000. Lower-dose regimens (e.g., 10 mg for MDS) sit in a proportionally lower band. International logistics, EDA 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 cycle 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 Revlimid 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 IMiD 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 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 oncology, rare disease, and immunology at Egyptian tertiary centers.

Will my private health insurance cover this? Cash-pay is the default posture. Some Egyptian private insurance plans review specialty oncology imports case-by-case on a pre-authorisation basis when the documentation package is strong. We supply documentation for your submission but do not process insurance claims.

What about generic lenalidomide? Generic lenalidomide is available in some markets after key patent expiries. If a generic version that meets your clinician's bioequivalence and quality bar is locally available, that is typically the simpler pathway. The named-patient import route for branded Revlimid is most useful when local supply is unreliable or when your hematologist specifically requires the branded product.

What if my physician has not filed a named-patient request before? Named-patient import is an institutional process most major Egyptian tertiary centers (Children's Cancer Hospital Egypt 57357, National Cancer Institute Cairo, and Mansoura Oncology Centre) 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.

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