Rezdiffra

Oman · access guide

How to access Rezdiffra from Oman, the named-patient import pathway, 2026

By Reserve Meds · Clinical & regulatory team · Last reviewed 2026-04-24

A Oman adult with non-cirrhotic metabolic dysfunction-associated steatohepatitis (MASH, previously called NASH) with moderate to advanced fibrosis (F2, F3) may receive a prescription for Rezdiffra (resmetirom) from their treating hepatologist. Rezdiffra is FDA-approved in the United States as the first therapy specifically indicated for non-cirrhotic MASH with significant fibrosis, used in combination with diet and exercise. Because Rezdiffra is not yet routinely stocked in Oman hospital pharmacies, your hepatologist may be coordinating a named-patient import pathway on your behalf.

This guide explains the legal pathway, what documentation your physician needs, typical timing and cost bands, and where Reserve Meds fits in.

The clinical situation

Rezdiffra is an oral once-daily selective thyroid hormone receptor beta (THR-β) agonist. The manufacturer is Madrigal Pharmaceuticals. Eligibility rests on biopsy-confirmed MASH or non-invasive-test evidence of MASH with significant fibrosis (F2, F3), absence of cirrhosis, and baseline staging by FibroScan, MRE, or biopsy. Dosing is weight-based, 80 mg or 100 mg orally once daily. The label excludes decompensated cirrhosis. Your hepatologist confirms diagnosis, fibrosis stage, baseline lipids, baseline liver function, and the monitoring plan, which includes periodic LFTs and lipid assessment, per FDA labeling.

Is Rezdiffra legally importable into Oman?

Yes, through Oman Ministry of Health and Prevention (MOHAP) named-patient import framework, with parallel coordination through the Department of Health Abu Dhabi or Dubai Health Authority where the treating physician is respectively licensed.

The framework rests on four anchors: (a) the medicine is approved by a recognised reference authority (FDA qualifies), (b) no clinically equivalent locally registered alternative is suitable for the patient, (c) the treating physician takes clinical responsibility, and (d) the importing party documents chain of custody. For MASH, a disease that until Rezdiffra had no approved disease-directed therapy, the clinical rationale for a named-patient request is straightforward.

How the pathway works, step by step

1. **Consultation with your treating hepatologist.** MASH confirmation (biopsy or non-invasive testing), fibrosis staging (FibroScan, MRE, or biopsy), exclusion of cirrhosis, and a written clinical rationale.
2. **Treatment-centre identification.** A Oman hepatology service that can perform baseline and follow-up fibrosis assessment and monitor LFTs and lipids accepts the case.
3. **MOHAP named-patient application.** Your physician or the hospital's importing pharmacy files the application including prescription, diagnostic and fibrosis-staging documentation, and chain-of-custody plan.
4. **US-side sourcing.** Reserve Meds coordinates with our US-licensed specialty wholesale partner to secure product from the manufacturer's authorised distribution chain under DSCSA.
5. **Stable shipment.** Rezdiffra is an oral tablet with standard storage requirements and ships with chain-of-custody documentation end to end.
6. **Arrival and initiation.** Your hepatologist starts therapy at the weight-appropriate dose and schedules follow-up LFT and lipid assessment. Reserve Meds coordinates re-supply ahead of bottle depletion.

What documentation your physician needs

Your physician will typically need to provide:

- A clinical rationale letter confirming MASH diagnosis, fibrosis stage (F2, F3), exclusion of cirrhosis, and Rezdiffra as the indicated therapy
- Verification of their Oman medical licence (MOHAP, DOH Abu Dhabi, or DHA)
- A current prescription naming the product, weight-based dose (80 mg or 100 mg), and once-daily schedule
- Patient identifier (anonymised reference preferred)
- Baseline FibroScan/MRE/biopsy report and planned monitoring cadence (LFTs, lipids)

Reserve Meds provides a physician documentation kit bundling the templates MOHAP reviewers expect to see for first-in-class hepatology therapies under named-patient import.

Costs and timing

Rezdiffra's US cash-pay reference price for a 30-day supply sits in an indicative 2026 range of roughly USD 4,000-5,500. Logistics, MOHAP documentation handling, and concierge coordination add incremental cost; Reserve Meds issues a full transparent quote at the start of intake, with a drug-only reference figure separated from service charges.

Indicative timing for first shipment arrival after cohort intake opens is 7-14 days from the moment a complete MOHAP application is submitted. Subsequent re-supply cycles are generally faster once the pathway is established.

Fulfillment availability is limited to our first cohort, and all timelines published on this site are indicative. If your clinical situation is time-sensitive, tell us at intake. We triage accordingly.

A culturally-aware note: MASH prevalence in the Gulf region is high, reflecting regional metabolic profiles. The Oman hepatology services are well-equipped to manage staging and follow-up. Our concierge team coordinates re-supply timing with your clinic calendar.

Reserve Meds's role

Reserve Meds is a US-based concierge coordinator for cross-border specialty medicine. For Rezdiffra specifically, we provide:

- **Sourcing.** Through our US-licensed specialty wholesale partner, operating under DSCSA chain-of-custody.
- **Documentation.** Regulatory documentation package for your physician and for MOHAP review, including MASH-staging attestation templates.
- **Logistics.** Shipment coordination and chain-of-custody.
- **Concierge case lead.** A named point of contact for your family and your physician throughout the process.

What we do not do: we are not the prescriber, we do not practise medicine, and we are not the dispensing pharmacy. All clinical decisions remain with your treating hepatologist.

Frequently asked

Is this legal in Oman? Yes, when executed through the MOHAP named-patient framework with appropriate documentation. See our trust and compliance page.

Does Rezdiffra replace diet and exercise? No. Rezdiffra is approved as an adjunct to diet and exercise, not a replacement. The underlying metabolic management remains central, and your hepatologist coordinates with nutrition and cardiometabolic care.

What about cirrhosis? Rezdiffra is not indicated for decompensated cirrhosis. Your hepatologist confirms the fibrosis stage before starting and during follow-up.

How is fibrosis reassessed on therapy? Follow-up assessment is typically through FibroScan, MRE, or, in selected cases, repeat biopsy, on a cadence your hepatologist defines. Blood-based non-invasive tests may also be used.

Will private insurance cover this? Cash-pay is the default. Some Oman private insurers reimburse named-patient imports for emerging hepatology therapies on a case-by-case basis; we supply documentation for your submission but do not process insurance claims directly.

Reserve Meds's role

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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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