



Soliris in Saudi Arabia

The SFDA named-patient coordination pathway — indicative 2026

HEMATOLOGY / COMPLEMENT · PNH, AHUS, GMG, NMOSD

The clinical situation

Soliris (eculizumab) is a humanised monoclonal antibody terminal complement C5 inhibitor, FDA-approved for paroxysmal nocturnal hemoglobinuria (PNH), atypical hemolytic uremic syndrome (aHUS), generalised myasthenia gravis (gMG), and NMOSD. Manufactured by Alexion (AstraZeneca Rare Disease), it is delivered IV every two weeks after an induction period. It carries a US boxed warning regarding meningococcal infections, which is why meningococcal vaccination (or antibiotic prophylaxis) is a gating step. Internationally, equivalent manufacturer risk-minimisation measures apply.

The pathway, 5 steps

- 1 Consultation & clinical rationale.** Your physician confirms indication (flow cytometry for PNH; clinical/ADAMTS13 for aHUS; AChR-antibody for gMG; AQP4-IgG for NMOSD) and writes the rationale letter.
- 2 Meningococcal vaccination & risk minimisation.** Vaccination at least 2 weeks before first dose, or antibiotic prophylaxis per FDA labeling.
- 3 SFDA named-patient application.** Physician or hospital pharmacy files dossier: rationale, patient reference, vaccination documentation, induction & biweekly dosing plan.
- 4 US-side sourcing & logistics.** Reserve Meds coordinates product through our US-licensed specialty wholesale partner, aligned with the manufacturer's controlled-distribution model.
- 5 Arrival, induction & maintenance.** Cold-chain (2–8°C) delivery; infusion facility administers induction, then biweekly maintenance.

Indicative economics

Reference US cash-pay range: USD 500,000+ annualised at US list for PNH/aHUS (Reserve Meds provides a transparent delivered quote at intake).

Indicative first-dose timing

7–14 days from a complete SFDA application to first dispensation; vaccination lead time may extend this. Indicative — not guaranteed.

Reserve Meds's role

Sourcing. US-licensed specialty wholesale partner, DSCSA chain-of-custody. **Documentation.** Regulatory package for your physician and SFDA review, including the meningococcal-infection risk-minimisation block. **Logistics.** Cold-chain (2–8°C) shipment with continuous temperature monitoring and importer-of-record handling. **Concierge case lead.** Named point of contact for family and care team. **We are a coordinator** — not the prescriber, not the dispensing pharmacy. All clinical decisions remain with your treating physician.

COMPOSITE EXAMPLE · PRE-LAUNCH WAITLIST

Join the Soliris × Saudi Arabia first-cohort waitlist. *Our concierge reaches out as we open intake.*

reservemed.com/access-guides/soliris-saudi-arabia.html



SCAN TO JOIN

Reserve Meds · US-based concierge for cross-border specialty medicine. We are a coordinator; we are not the prescriber and not the dispensing pharmacy. All clinical decisions remain with the treating physician. Not medical advice.

Reserve Meds is in pre-launch. Service availability is limited to our first cohort; all timelines published are indicative, not guarantees. Composite case examples only.

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