

Stelara

Kuwait · access guide

How to access Stelara from Kuwait, the named-patient import pathway, 2026

By Reserve Meds · Clinical & regulatory team · Last reviewed 2026-04-23

An Kuwaiti patient with moderate-to-severe plaque psoriasis, psoriatic arthritis, Crohn's disease, or ulcerative colitis may receive a prescription for Stelara (ustekinumab) from their treating dermatologist, rheumatologist, or gastroenterologist. Stelara is FDA-approved, manufactured by Janssen (Johnson & Johnson), and is an IL-12 and IL-23 pathway blocker with an established track record across immune-mediated inflammatory disease. In Kuwait, Stelara has been registered and is available through some tertiary hospital pharmacies, but availability of specific strengths, particularly the 90 mg SC syringe used for adult maintenance and the weight-banded IV induction vial for IBD, can be inconsistent, which is why some families elect the KMOH personal-use import pathway for a predictable start.

This guide explains the pathway, documentation your physician prepares, indicative timing and cost bands, and where Reserve Meds fits in.

The clinical situation

Stelara is a human IgG1 monoclonal antibody that binds the shared p40 subunit of interleukins 12 and 23, blocking downstream Th1 and Th17 inflammatory cascades central to psoriatic disease and IBD. For psoriasis and psoriatic arthritis, the dosing is a subcutaneous 45 mg or 90 mg (weight-banded) injection at weeks 0 and 4, then every 12 weeks. For Crohn's and ulcerative colitis, the regimen starts with a weight-banded intravenous induction (260 / 390 / 520 mg) followed by subcutaneous 90 mg every 8 weeks. Your physician will screen for latent tuberculosis, confirm no active infection, and map out a response-review cadence.

Is Stelara legally importable into Kuwait?

Yes, through the Kuwait Ministry of Health (KMOH) personal-use / named-patient import framework (Rule 36 and related provisions of the Drugs and Cosmetics Rules). The pathway permits import of up to three months' personal supply for a named patient under a registered medical practitioner's prescription, with customs clearance supported by the prescription, the physician's letter, and product documentation. The mechanism has been used routinely for specialty biologics when local supply, specific strength, or institutional procurement timing does not match the clinical plan.

How the pathway works, step by step

1. **Consultation with your treating physician.** Diagnosis confirmation, severity assessment (PASI for psoriasis, Mayo or CDAI for IBD), prior therapy history, and rationale for Stelara.
2. **Baseline screening.** Latent TB, hepatitis panel, baseline CBC and liver function per labeling.
3. **Prescription and import letter.** Your physician issues the prescription and a clinical letter describing indication, dosing schedule, and personal-use rationale.
4. **US-side sourcing.** Reserve Meds coordinates with our US-licensed specialty wholesale partner to secure product from authorised distribution under DSCSA.
5. **Cold-chain shipment to Kuwait.** Stelara ships under validated 2-8 °C conditions with temperature logging; Reserve Meds handles customs documentation with the importing agent.
6. **Arrival and administration.** IV induction runs at the hospital infusion centre; SC maintenance is administered under physician supervision or, after training, by the patient at home.

What documentation your physician needs

- Clinical rationale letter confirming diagnosis, severity, and Stelara as the indicated therapy
- Verification of Medical Council of Kuwait / NMC registration
- PASI score, Mayo/CDAI score, or equivalent severity documentation
- Latent-TB and hepatitis screening results
- Planned dosing schedule (induction plus maintenance)
- Patient identifier and residential address for import clearance

Reserve Meds provides a physician documentation kit that bundles the templates KMOH and customs expect to see for IL-12/23 biologic personal imports.

Typical costs and indicative timing

Stelara's US cash-pay drug-only reference range in 2026 sits at roughly USD 14,000-18,000 per 90 mg SC syringe and higher for weight-banded IV induction vials. International cold-chain logistics, KMOH documentation handling, customs clearance, and concierge coordination are quoted separately. Reserve Meds issues a full transparent delivered quote at intake so your family sees one landed number before committing. Indicative range.

Indicative timing for first dose after cohort intake opens is 7-14 days from the moment complete documentation is in hand. Maintenance refills ship on the 8-week or 12-week cadence set by your physician.

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.

Where Reserve Meds fits in

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

- **Sourcing.** Through our US-licensed specialty wholesale partner, operating under DSCSA chain-of-custody from authorised channels.
- **Documentation.** Regulatory package for your physician, KMOH import documentation, and customs-clearance support.
- **Logistics.** Validated 2-8 °C cold-chain shipment with temperature logging.
- **Concierge case lead.** A named point of contact for your family and physician throughout.

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 physician.

Frequently asked

Is this legal in Kuwait? Yes, when executed through the KMOH personal-use / named-patient framework with a valid prescription and supporting physician letter. See our trust and compliance page for methodology.

What about Stelara biosimilars? Several biosimilars (including ustekinumab-auub / Wezlana in the United States) are now available. Your physician selects the reference product or biosimilar based on clinical fit and availability. We can coordinate either.

How is the IV induction handled? IV induction for IBD is typically administered at a hospital infusion centre. We ship the weight-banded vial on a schedule that matches your infusion appointment.

Can I receive maintenance injections at home? Yes, after physician-supervised training on SC injection technique, maintenance is commonly self-administered or administered by a visiting nurse.

Will private insurance cover this? Cash-pay is the default. Some Kuwaiti private insurers and corporate plans consider named-patient imports case by case; we supply documentation for your submission but do not process claims directly.

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.

Reserve Meds

reserved for you.

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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