

Trodelvy

Morocco · access guide

How to access Trodelvy from Morocco, the named-patient import pathway, 2026

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

A Moroccan patient with metastatic triple-negative breast cancer, HR+/HER2-negative metastatic breast cancer after prior endocrine and at least two prior chemotherapy lines, and locally advanced or metastatic urothelial carcinoma after prior platinum and a checkpoint inhibitor may receive a prescription for Trodelvy (sacituzumab govitecan-hziy) from their treating oncologist. Trodelvy is FDA-approved in the United States and manufactured by Gilead Sciences. It is a Trop-2 directed antibody-drug conjugate administered by intravenous infusion. Local availability of Trodelvy in Morocco 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 DMP 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

Trodelvy is a Trop-2 directed antibody-drug conjugate. Mechanism: a Trop-2 directed antibody conjugated to SN-38, the active metabolite of irinotecan. Dosing: 10 mg/kg by intravenous infusion on days 1 and 8 of a 21-day cycle, per FDA labeling. Baseline workup per FDA labeling includes complete blood count with differential, liver function tests, pregnancy testing where applicable, and UGT1A1 genotype where available. The FDA boxed warning covers severe or life-threatening neutropenia and severe diarrhea. Other important warnings include severe or life-threatening neutropenia and severe diarrhea, embryo-fetal toxicity, and UGT1A1 genotype-informed dosing considerations. Your oncologist will discuss the risk-benefit profile and schedule monitoring before initiating therapy.

Is Trodelvy legally importable into Morocco?

Yes, through the Moroccan Directorate of Medicines and Pharmacy (DMP) named-patient and personal-use import framework, coordinated through a Morocco-licensed treating facility's pharmacy. Morocco 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 DMP named-patient route allows a Moroccan-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 oncologist.** The prescribing decision is clinical. Your oncologist documents the indication, prior therapies where relevant, and rationale for Trodelvy.
2. **Baseline screening.** Complete blood count with differential, liver function tests, pregnancy testing where applicable, and UGT1A1 genotype where available are confirmed and documented.
3. **DMP named-patient application.** Your oncologist 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 Gilead Sciences's authorised distribution under DSCSA chain-of-custody.
5. **Cold-chain shipment.** Trodelvy requires refrigerated transport at 2 to 8 degrees Celsius. Shipments include temperature-monitored packaging with continuous loggers and tamper-evident seals.
6. **Arrival and first dose.** The dispensing pharmacy releases product against the physician's prescription, and your oncologist initiates therapy.

What documentation your physician needs

Your physician will typically need to provide:

- A clinical rationale letter confirming diagnosis, prior therapies where relevant, and Trodelvy as the indicated next step
- Verification of their Moroccan medical licence
- A patient identifier, anonymised reference where privacy is preferred
- Documented pre-treatment screening consistent with FDA labeling (see above)
- The planned dosing regimen (10 mg/kg by intravenous infusion on days 1 and 8 of a 21-day cycle, per FDA labeling)
- A monitoring plan covering UGT1A1 genotype where available, neutropenia and diarrhea management plan, and biomarker confirmation as relevant

Reserve Meds provides a physician documentation kit tailored for Trop-2 antibody-drug conjugate therapies, including the templates DMP 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 single 21-day cycle (two infusions, weight-dependent) of Trodelvy sits in an indicative 2026 band of approximately USD 12,000 to 17,000. International logistics, DMP documentation handling, cold-chain shipping, 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 dosing 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 Trodelvy 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 DMP review, including Trop-2 antibody-drug conjugate class templates.
- **Cold-chain logistics.** Temperature-monitored, internationally tracked shipment to your named dispensing facility with continuous temperature loggers.
- **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 oncologist, and dispensing sits with the licensed Moroccan pharmacy of record. Reserve Meds operates on cash-pay only and does not bill insurance.

Frequently asked

Is this legal in Morocco? Yes, when executed through the DMP 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 Moroccan tertiary centers.

What about the boxed warning? The FDA boxed warning on Trodelvy covers severe or life-threatening neutropenia and severe diarrhea. Your oncologist performs the risk-benefit assessment, schedules monitoring, and counsels the patient per labeling. Reserve Meds does not make that clinical judgement, your physician does.

Will my private health insurance cover this? Cash-pay is the default posture. Cash-pay is the default posture in Morocco; CNOPS and CNSS coverage of specialty imports is limited and case-by-case. We supply documentation for your submission but do not process insurance claims.

How does cold-chain affect timing? Trodelvy ships refrigerated. We use validated packaging with continuous temperature monitoring, and arrival temperature data is logged on every shipment.

What if my physician has not filed a named-patient request before? Named-patient import is an institutional process most major Moroccan tertiary centers (the National Institute of Oncology in Rabat, CHU Ibn Rochd in Casablanca, and the Cheikh Khalifa International University Hospital) have encountered. Our documentation kit is written for first-time applicants and tracks what DMP 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.

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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