

## Xpovio

Oman · access guide

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

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

A Oman patient with relapsed or refractory multiple myeloma (in combination with bortezomib and dexamethasone after at least one prior therapy, or with dexamethasone alone after at least four prior therapies including two proteasome inhibitors, two immunomodulatory agents, and an anti-CD38 monoclonal antibody), or with relapsed or refractory diffuse large B-cell lymphoma after at least two lines of systemic therapy, may receive a prescription for Xpovio (selinexor) from their treating hematologist. Xpovio is FDA-approved in the United States and manufactured by Karyopharm Therapeutics. It is an oral selective inhibitor of nuclear export (SINE) administered by tablet. Local availability of Xpovio in Oman 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 DGPADC 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

Xpovio is an oral selective inhibitor of nuclear export. Mechanism: a small-molecule inhibitor of exportin 1 (XPO1, also known as CRM1) that blocks nuclear export of tumor suppressor proteins, leading to their accumulation and pro-apoptotic activity. Dosing: indication-specific, typically 100 mg orally once weekly with bortezomib and dexamethasone for myeloma, or 60 mg twice weekly for r/r DLBCL, per FDA labeling. Baseline workup per FDA labeling includes CBC with differential, comprehensive metabolic panel including sodium, baseline weight, and assessment of hydration. Other important warnings include thrombocytopenia, neutropenia, gastrointestinal toxicity including nausea, vomiting, diarrhea, anorexia, and weight loss, hyponatremia, serious infections, neurological toxicity, embryo-fetal toxicity, and cataract. Your hematologist will discuss the risk-benefit profile and schedule monitoring before initiating therapy.

## Is Xpovio legally importable into Oman?

Yes, through the Directorate General of Pharmaceutical Affairs and Drug Control (DGPADC) named-patient and personal-use import framework, coordinated through a Oman-licensed treating facility's pharmacy. The Oman 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 DGPADC named-patient route allows a Oman-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

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1. **Consultation with your treating hematologist.** The prescribing decision is clinical. Your hematologist documents the indication, prior therapies, and rationale for Xpovio.
2. **Baseline screening.** CBC with differential, comprehensive metabolic panel including sodium, baseline weight, and hydration assessment are confirmed and documented.
3. **DGPADC 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 Karyopharm Therapeutics' 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 with the supportive-care plan in place.

## What documentation your physician needs

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Your physician will typically need to provide:

- A clinical rationale letter confirming diagnosis (r/r MM with prior-line history, or r/r DLBCL after at least two prior lines), prior therapies, and Xpovio as the indicated next step
- Verification of their Oman 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 (indication-specific, per FDA labeling)
- A monitoring plan covering CBC, sodium, weight, hydration, and supportive antiemetic and nutritional plan

Reserve Meds provides a physician documentation kit tailored for SINE-class therapies, including the templates DGPADC reviewers commonly request.

## Typical costs and indicative timing

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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 Xpovio sits in an indicative 2026 band of approximately USD 22,000 to 27,000. International logistics, DGPADC 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

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Reserve Meds is a US-based concierge coordinator for cross-border specialty medicine. For Xpovio 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 DGPADC review, including SINE-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 Oman pharmacy of record. Reserve Meds operates on cash-pay only and does not bill insurance.

## Frequently asked

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**Is this legal in Oman?** Yes, when executed through the DGPADC 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 Oman tertiary centers.

**Will my private health insurance cover this?** Cash-pay is the default posture. Some Oman private insurers and CCHI-aligned plans reimburse named-patient imports on a case-by-case basis when the documentation package is strong. We supply documentation for your submission but do not process insurance claims.

**How is the GI toxicity managed?** The Xpovio prescribing information includes specific supportive-care recommendations: prophylactic antiemetics with a 5-HT3 antagonist, dose modifications for nausea and weight loss, and aggressive management of hydration and nutrition. Your hematologist coordinates this supportive-care plan with the dispensing pharmacy and clinical team.

**What if my physician has not filed a named-patient request before?** Named-patient import is an institutional process most major Oman tertiary centers (King Faisal Specialist Hospital and Research Centre, King Abdulaziz Medical City, and Prince Sultan Military Medical City) have encountered. Our documentation kit is written for first-time applicants and tracks what DGPADC 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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### **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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