Endari access in Egypt

How Egyptian families pursue L-glutamine oral powder as an adjunctive therapy for sickle cell disease via the EDA named-patient pathway.

Last reviewed 2026-05-12 by Reserve Meds clinical and regulatory team. This page combines the Egypt country research module with the Endari drug module to describe the path families actually walk.

Quick orientation

Endari (L-glutamine oral powder) is an FDA-approved therapy for sickle cell disease developed by Emmaus Life Sciences. The US Food and Drug Administration approved Endari in July 2017 for the reduction of acute complications of sickle cell disease in adult and paediatric patients aged 5 years and older. It is dosed orally as a powder mixed with a beverage or soft food, typically 5 grams to 15 grams twice daily based on body weight. For an Egyptian family with a child or adult living with sickle cell disease, Endari is an adjunct to hydroxyurea, transfusion, and other supportive care rather than a replacement for them. Reserved for you.

Why this drug is hard to source in Egypt

Endari is approximately not registered with the Egyptian Drug Authority (EDA) in our review. The manufacturer Emmaus has pursued registration in selected international markets and the global supply chain is comparatively small relative to the broader oncology and rare disease universe. Two patterns produce the access gap. First, registration status. Endari is FDA-approved and used in the United States but has not been registered through EDA at scale. Second, currency cost. L-glutamine is a comparatively expensive specialty therapy on a per-month basis, and an ongoing daily oral regimen accumulates significant annual cost. With the Egyptian pound near 52 to 53 per US dollar in May 2026 and a controlled-depreciation outlook through year-end, the EGP-denominated bill has roughly tripled since early 2022.

Egypt has a meaningful sickle cell disease population concentrated in particular regions, and the public-sector approach has historically centred on hydroxyurea, transfusion support, and supportive care. Where the treating haematologist determines that Endari is a clinically appropriate addition for a specific patient, the EDA named-patient pathway is the route.

The EDA named-patient pathway

The Egyptian Drug Authority (EDA), established by Law No. 151 of 2019 and operating under the Prime Minister, permits the importation of medicines for a specific patient where no equivalent registered product is available locally, or where the available quantity of an equivalent registered product cannot meet the patient's clinical need. For an Endari case, the filing posture is Personal Importation. The dispensing institution, typically a private specialty hospital pharmacy, a university hospital import desk, or a licensed Cairo-based specialty importer acting on the patient's behalf, files with EDA.

The standard application package includes a clinical justification letter from the treating physician on hospital letterhead with hospital stamp, stating the diagnosis (sickle cell disease confirmed by haemoglobin electrophoresis or genetic testing, with the genotype noted as HbSS, HbSC, or compound heterozygous), the documented history of vaso-occlusive crises, acute chest syndrome episodes, transfusion burden, and hospitalisations, the prior therapy outcomes including hydroxyurea response and tolerability, and the rationale for L-glutamine as an adjunctive therapy; a recent prescription specifying brand name (Endari), generic name (L-glutamine oral powder), strength (5 gram packets), quantity for the dosing schedule; the patient's national ID or passport copy; the treating physician's Egyptian Medical Syndicate membership number and Ministry of Health licence reference; product details including manufacturer (Emmaus Life Sciences); the destination dispensing facility licence; and the chain-of-custody plan for the room-temperature shipment to Cairo International Airport.

Real costs in EGP and USD

Reserve Meds quotes in USD and accepts USD wire transfers. The US wholesale acquisition cost for Endari runs approximately USD 3,000 to 4,000 per month for an adult on a 10 gram twice-daily regimen, with paediatric dosing scaled to body weight and therefore at a lower monthly cost. Annual cost runs approximately USD 36,000 to 50,000 for an adult on ongoing therapy. International logistics from the US source to Cairo for a room-temperature oral powder shipment typically run USD 200 to 700 per shipment depending on volume and route, with shipments timed to dispensing cycles. Regulatory documentation handling on the Egyptian side varies by dispensing facility, and the Reserve Meds concierge fee is itemized on every firm quote and is never bundled.

The transparent USD quote insulates the family from intra-case EGP movement. We do not perform currency conversion and we do not hold local-currency accounts. Many Egyptian families coordinate USD funds through relatives in the Gulf, the UK, or North America.

Timing, what to expect

Routine EDA personal-import authorisations for sickle cell disease cases typically process in 15 to 30 business days from submission of a complete package. Complex submissions or first-time files for a particular dispensing facility can extend to 8 to 12 weeks. Once authorisation comes through, US-side sourcing, manufacturer release, and shipment from the US to Cairo typically run 2 to 4 weeks. For an established patient on ongoing therapy, the practical rhythm is a continuous cycle with the EDA permit covering a defined quantity and time window, and the cycle resets on the next approval. Reserve Meds frames sickle cell disease cases as multi-year engagements.

What your physician needs

The treating physician on an Endari case in Egypt is typically a haematologist or a paediatrician with haematology expertise. The clinical justification letter typically addresses the confirmed sickle cell disease diagnosis (haemoglobin electrophoresis, ideally paired with genetic testing for the precise genotype), the documented disease burden including vaso-occlusive crisis frequency, acute chest syndrome episodes, transfusion history, hospital admissions, and the prior therapy outcomes including hydroxyurea trial. The letter articulates the rationale for L-glutamine as an adjunct, including the published evidence for reduction in pain crises and acute chest syndrome episodes.

The treating physician's Egyptian Medical Syndicate membership and active Ministry of Health licence are the cornerstone. The dispensing facility, whether Cairo University Hospitals (Kasr Al Ainy), Ain Shams University Hospitals, Children's Cancer Hospital 57357 where paediatric sickle cell overlaps with haematology care, or a private specialty hospital, must hold a current pharmaceutical establishment licence. Reserve Meds supplies the physician-facing documentation kit. Filing remains with the dispensing facility.

UPA, Universal Health Insurance, and the private-pay context

Egypt's Universal Health Insurance (UHI) system, launched under Law No. 2 of 2018 and operated by the Universal Health Insurance Authority (UHIA), is in mid-rollout across six geographic clusters through 2032. For named-patient Endari imports in 2026, UHIA coverage is not the funding path for most patients in most governorates. Cash-pay or private insurance reimbursement is.

The Unified Procurement Authority (UPA), Egypt's centralised public-sector medicines procurement agency, handles bulk purchasing for public hospitals. Where Endari is not in the UPA-procured catalogue, the named-patient framework is the practical route. Bupa

Egypt, AXA Egypt, MetLife Egypt, Allianz Egypt, Misr Insurance, and other carriers assess sickle cell adjunct therapy claims case by case, and pre-authorisation is the norm. We do not promise coverage from any insurer. We supply the documentation an insurer would request.

Pharmacovigilance and cold-chain

Endari is an oral powder stored at room temperature, which simplifies the chain-of-custody documentation compared to refrigerated biologics. The shipment plan in the EDA submission identifies the freight forwarder, the expected port of entry (typically Cairo International Airport), and the receiving facility's confirmation of secure storage. Reserve Meds confirms the receiving facility's confirmation before initiating shipment.

Egypt operates an active national pharmacovigilance system through the Egyptian Pharmacovigilance Center (EPVC), part of EDA. The treating physician and dispensing pharmacy retain pharmacovigilance responsibility for the duration of therapy, including adverse drug reaction reporting through EPVC using Yellow Card or CIOMS forms. Reserve Meds does not file adverse-event reports on behalf of physicians; that obligation is tied to the local licence and stays with the treating clinician. We include the EPVC reference contacts in the physician documentation kit.

Common questions about Endari in Egypt

Is Endari a replacement for hydroxyurea? No. Endari is positioned as an adjunct to standard sickle cell disease management, which typically includes hydroxyurea, transfusion support where indicated, and supportive care. The clinical decision to add L-glutamine rests with the treating haematologist.

What about voxelotor (Oxbryta) or crizanlizumab (Adakveo)? Both are newer FDA-approved sickle cell disease therapies with different mechanisms. Voxelotor was withdrawn from the US and selected international markets in September 2024 following manufacturer assessment of post-marketing data. Crizanlizumab remains available. Reserve Meds can scope alternative pathways where the treating physician determines a different therapy is clinically appropriate.

Will my insurance cover this? Bupa Egypt, AXA Egypt, MetLife Egypt, Allianz Egypt, Misr Insurance, and other carriers assess sickle cell adjunct claims case by case. We do not promise coverage. We supply the documentation an insurer would request.

Can a paediatric patient receive Endari through this pathway? Yes. Endari is FDA-approved in patients aged 5 years and older. The paediatric haematology units at Egyptian academic hospitals and the private specialty hospital paediatric services handle paediatric

named-patient imports routinely. The clinical justification letter typically includes weight-adjusted dosing and paediatric-specific monitoring.

Is Endari a controlled substance? No. Endari is not a DEA scheduled substance. Reserve Meds does not handle controlled substances. The standard EDA personal-import framework applies.

Cairo and the regional context

Cairo is the dominant import gateway for Egypt, and Cairo International Airport handles the vast majority of pharmaceutical air freight, with secondary capacity at Alexandria. The dispensing facility or licensed importer handles customs clearance on the Egyptian side, and Reserve Meds aligns the US-side sourcing and the international freight forwarder. Egyptian patients also frequently coordinate care across the diaspora. A typical pattern: the patient and treating physician are in Cairo or Alexandria, an adult child in the UAE, Saudi Arabia, the UK, or the US handles the USD wire and case correspondence, and the case requires Arabic-language coordination on the patient side alongside English-language coordination on the family side. Reserve Meds supports both sides in parallel with a single named coordinator running the case end to end.

Egypt's pharmaceutical sector imports roughly USD 3 billion in finished drug product annually, and a meaningful slice of that demand sits inside small named-patient cases rather than mass-market supply. EDA processes a substantial volume of personal-import authorisations each year, and the dispensing institutions named on this page handle named-patient cases as routine workflow. Cross-border patient flow from Sudan and from Libya into Egypt is a meaningful element of the region's specialty-care economy; the Gulf-to-Egypt patient flow is smaller in volume but real.

The patient experience, what your family actually does

From the family's perspective, the steps look like this. Your physician decides this specific medicine is the right next step. That is a clinical decision and stays with them. Your physician or the hospital pharmacy team reaches out to Reserve Meds, or the patient or family submits the waitlist request and we connect with the physician. Reserve Meds confirms eligibility within 24 to 48 hours and sends a documentation kit to the treating physician, with Arabic-language patient-facing summaries where the family requests them. Your physician prepares the clinical justification letter, gathers the patient identifier documents, and the dispensing facility files the personal-import application with EDA. While EDA reviews, Reserve Meds aligns US-side sourcing, manufacturer documentation, and the international logistics plan. EDA authorisation comes through. We arrange the shipment from the US source to Cairo International Airport, with the dispensing facility or licensed importer handling customs clearance. The medicine reaches the licensed

dispensing pharmacy. Your physician initiates therapy. Pharmacovigilance reporting through EPVC runs through the course of therapy.

Where Reserve Meds fits

Reserve Meds is a US-based concierge coordinator. We do not replace your treating physician, the EDA, your dispensing pharmacy, or your insurance carrier. For Endari specifically, our work is to align US-side sourcing, prepare the regulatory documentation kit your physician needs for the EDA filing, coordinate the international logistics to Cairo, and hold a single named coordinator through the case in both English and Arabic. Reserved for you.

Next step

If a treating physician in Egypt is weighing Endari for a patient, the waitlist is the first step. We respond within 24 to 48 hours with an eligibility confirmation and a documentation kit for the physician.

Reserved for you.

Related

- Endari clinical resource
- Egypt country page
- Named-patient pathway overview

Sources

1. FDA approval and prescribing information for Endari (L-glutamine oral powder), Emmaus Life Sciences.
2. Egyptian Drug Authority, personal-import framework under Law No. 151 of 2019, with executive regulations under Prime Minister Decision No. 777 of 2020.
3. Egypt Universal Health Insurance, Law No. 2 of 2018, and Universal Health Insurance Authority (UHIA) governorate phased rollout.
4. Manufacturer product monograph and US wholesale acquisition cost references for Endari dosing and pricing.

Review and oversight. Content on this page is reviewed by the Reserve Meds clinical and regulatory team. A US-licensed pharmacist reviews every prescription before dispensing.

Regulatory posture is informational, not legal advice; case-specific questions route to retained outside counsel. Review methodology ›

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