Lynparza access in Egypt

How Egyptian oncology patients access olaparib for BRCA-mutated and HRR-mutated cancers 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 Lynparza drug module to describe the path families actually walk.

Quick orientation

Lynparza (olaparib) is an oral PARP (poly ADP-ribose polymerase) inhibitor jointly developed and marketed by AstraZeneca and Merck. The US Food and Drug Administration first approved Lynparza in December 2014 for advanced ovarian cancer with germline BRCA mutations, with subsequent approvals expanding into BRCA-mutated metastatic breast cancer (2018), BRCA-mutated metastatic pancreatic adenocarcinoma (2019), HRR-mutated metastatic castration-resistant prostate cancer (2020), and BRCA-mutated HER2-negative high-risk early breast cancer adjuvant therapy (2022), among other indications. It is dosed orally at 300 mg twice daily as 150 mg tablets, with dose modifications based on tolerability. For an Egyptian oncology patient with a BRCA, HRR, or other actionable mutation, Lynparza is a targeted therapy that follows genomic testing and a precise clinical rationale. Reserved for you.

Why this drug is hard to source in Egypt

Lynparza is approximately registered with the Egyptian Drug Authority (EDA) in our review for selected oncology indications. Three patterns produce the access gap. First, indication mismatch. The drug may be locally registered for one indication while the treating oncologist is prescribing it for a different FDA-approved indication, requiring named-patient routing for the specific use case. Second, supply availability. The drug exists on the registration list but stock availability fluctuates at the dispensing facility, and the oncology workflow cannot tolerate a multi-week gap. Third, currency cost. Olaparib at 300 mg twice daily runs approximately USD 14,000 to 18,000 per month at US wholesale acquisition cost, putting annual therapy cost in the USD 170,000 to 215,000 range. With the Egyptian pound near 52 to 53 per US dollar in May 2026, the EGP-denominated bill has roughly tripled since early 2022.

Egypt's oncology infrastructure, including the National Cancer Institute (NCI Cairo) within Cairo University, Children's Cancer Hospital 57357 for paediatric cases, and the private

specialty hospital oncology services, handles named-patient oncology imports as routine workflow.

The EDA named-patient pathway

The Egyptian Drug Authority (EDA), established by Law No. 151 of 2019, permits the importation of medicines for a specific patient where no equivalent registered product is available locally for the patient's specific indication, or where the available quantity of a registered product cannot meet the patient's clinical need. For a Lynparza case, the dispensing institution, typically the National Cancer Institute, a university hospital oncology unit, or a private specialty hospital oncology department, files with EDA.

The standard application package includes a clinical justification letter from the treating oncologist on hospital letterhead with hospital stamp, stating the cancer diagnosis with histology and stage, the genomic testing result confirming the actionable mutation (germline or somatic BRCA1, BRCA2, HRR gene panel as applicable), the prior therapy history including platinum-based regimens where relevant, and the rationale for olaparib for the specific indication; a recent prescription specifying brand name (Lynparza), generic name (olaparib), strength (150 mg tablets), quantity for the dosing cycle; the patient's national ID or passport copy; the treating oncologist's Egyptian Medical Syndicate membership number and Ministry of Health licence reference; product details including manufacturers (AstraZeneca and Merck); 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 Lynparza runs approximately USD 14,000 to 18,000 per month at 300 mg twice daily. Annual cost runs approximately USD 170,000 to 215,000 for ongoing therapy. International logistics from the US source to Cairo for a room-temperature oral tablet shipment typically run USD 200 to 600 per shipment, 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. Many Egyptian families coordinate USD funds through relatives in the Gulf, the UK, or North America for oncology cases where the cumulative cost is significant.

Timing, what to expect

Routine EDA personal-import authorisations for oncology cases where the drug is recognised and the genomic-test-paired indication is documented typically process in 15 to 30 business days from submission of a complete package. Complex submissions, off-label indications, or first-time files for a particular dispensing facility can extend to 8 to 12 weeks. For oncology cases where treatment cannot wait, Reserve Meds plans the lead time in parallel with the EDA submission so that US-side sourcing and international logistics are ready when authorisation arrives. Once authorisation comes through, US-side sourcing, manufacturer release, and shipment from the US to Cairo typically run 2 to 4 weeks.

For ongoing oncology therapy, the practical rhythm is a continuous cycle. The EDA permit covers a defined quantity and time window, and the cycle resets on the next approval.

What your physician needs

The treating physician on a Lynparza case in Egypt is a medical oncologist. The clinical justification letter typically addresses the cancer diagnosis with histology, stage, and biomarker status; the genomic testing result confirming the actionable mutation (germline BRCA1 or BRCA2, somatic BRCA, HRR gene panel for prostate cancer, MSI or HRD status as relevant); the prior therapy history including platinum-based regimens, hormone therapy, taxanes, anthracyclines, immune checkpoint inhibitors as applicable; and the rationale for olaparib for the specific indication aligned to the FDA-approved label. The letter typically references the supporting clinical trial data, including SOLO-1, SOLO-2, OlympiAD, PROfound, OlympiA, or POLO depending on the indication.

The treating oncologist's Egyptian Medical Syndicate membership and active Ministry of Health licence are the cornerstone. The dispensing facility, whether the National Cancer Institute (NCI Cairo), Children's Cancer Hospital 57357 for paediatric or rare paediatric oncology cases, the oncology units at Kasr Al Ainy or Ain Shams, or private specialty oncology centres in the Cleopatra group, Dar Al Fouad, or As-Salam International, must hold a current pharmaceutical establishment licence and oncology dispensing capability. 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 Lynparza imports in 2026, UHIA

coverage is not the funding path for most patients in most governorates. The Unified Procurement Authority (UPA), Egypt's centralised public-sector medicines procurement agency, handles bulk oncology procurement for public hospitals, including the National Cancer Institute, where Lynparza may be available through institutional channels for indications matching the UPA-procured catalogue.

Where the patient's indication is not in the UPA-procured catalogue, where local supply is intermittent, or where the patient elects private care, the named-patient framework is the practical route. Bupa Egypt, AXA Egypt, MetLife Egypt, Allianz Egypt, Misr Insurance, and other carriers assess oncology 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

Lynparza tablets are 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 with controlled-temperature parameters.

Egypt operates an active national pharmacovigilance system through the Egyptian Pharmacovigilance Center (EPVC), part of EDA. The treating oncologist and dispensing pharmacy retain pharmacovigilance responsibility for the duration of therapy, including adverse drug reaction reporting through EPVC using Yellow Card or CIOMS forms. Olaparib carries warnings for myelodysplastic syndrome and acute myeloid leukaemia, pneumonitis, and embryo-fetal toxicity; the treating team monitors complete blood counts and clinical status accordingly. Reserve Meds includes the EPVC reference contacts in the physician documentation kit.

Common questions about Lynparza in Egypt

Do I need genomic testing first? Yes. Lynparza is a targeted therapy whose indications hinge on specific genomic biomarkers, typically BRCA1 or BRCA2 germline or somatic mutations, or HRR gene panel results in prostate cancer. The genomic test is run before the prescription, and the test result is referenced in the EDA clinical justification letter.

What about other PARP inhibitors, niraparib (Zejula) or rucaparib (Rubraca)? Niraparib (GSK) and rucaparib (Clovis) are alternative PARP inhibitors with different indication portfolios and toxicity profiles. The clinical choice rests with the treating oncologist based on indication, prior therapy, and patient-specific factors.

Will my insurance cover this? Each insurer assesses oncology claims case by case based on indication, supporting genomic testing, and plan terms. We do not promise coverage. We supply the documentation an insurer would request.

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

Can I take Lynparza at home? Yes. Lynparza is an oral tablet taken at home twice daily. Dispensing remains through a licensed oncology pharmacy. The patient does not need to be in an infusion centre.

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 Lynparza 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 Lynparza 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

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

Sources

1. FDA approval and prescribing information for Lynparza (olaparib), AstraZeneca and Merck.
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 Lynparza 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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