

Nucala access in Egypt

How Egyptian patients access mepolizumab for severe eosinophilic asthma, EGPA, hypereosinophilic syndrome, and nasal polyps 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 Nucala drug module to describe the path families actually walk.

Quick orientation

Nucala (mepolizumab) is an anti-interleukin-5 (anti-IL-5) monoclonal antibody developed by GlaxoSmithKline (GSK). The US Food and Drug Administration first approved Nucala in November 2015 for severe eosinophilic asthma in adults aged 12 years and older, with subsequent approvals expanding into eosinophilic granulomatosis with polyangiitis (EGPA, 2017), hypereosinophilic syndrome (HES, 2020), chronic rhinosinusitis with nasal polyps (CRSwNP, 2021), and asthma in paediatric patients aged 6 to 11 years. It is dosed as a 100 mg subcutaneous injection every 4 weeks for severe eosinophilic asthma, with 300 mg for EGPA and HES. For an Egyptian patient with severe eosinophilic asthma not controlled on inhaled corticosteroids and a long-acting beta-agonist, or an EGPA, HES, or nasal polyps case, Nucala is a biologic step beyond conventional therapy. Reserved for you.

Why this drug is hard to source in Egypt

Nucala is approximately registered with the Egyptian Drug Authority (EDA) in our review for the severe eosinophilic asthma indication. Two patterns produce the access gap. First, indication scope and stock. The drug may be registered for severe eosinophilic asthma but stock availability fluctuates, and the additional indications (EGPA, HES, nasal polyps, paediatric asthma) may not be uniformly reflected in local prescribing patterns or insurance coverage. Second, currency cost. Mepolizumab runs approximately USD 3,500 to 4,500 per monthly injection at US wholesale acquisition cost for the standard 100 mg dose, putting annual therapy cost in the USD 42,000 to 54,000 range for asthma and substantially higher for EGPA or HES at the 300 mg dose. With the Egyptian pound near 52 to 53 per US dollar in May 2026, the EGP-denominated bill has roughly tripled since early 2022.

Where the treating pulmonologist, rheumatologist, or allergist determines that Nucala is the appropriate therapy and local supply is intermittent, or where the indication is not in the locally registered scope, 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, permits the importation of medicines for a specific patient where no equivalent registered product is available locally for the indication, or where the available quantity of an equivalent registered product cannot meet the patient's clinical need. For a Nucala case, the dispensing institution, typically a private specialty hospital pharmacy, a university hospital import desk, or a licensed Cairo-based specialty importer, 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 (severe eosinophilic asthma confirmed by blood eosinophil count, EGPA confirmed by clinical and laboratory criteria, hypereosinophilic syndrome with documented end-organ involvement, or chronic rhinosinusitis with nasal polyps), the baseline eosinophil count, the prior therapy history (high-dose inhaled corticosteroids, long-acting beta-agonists, leukotriene receptor antagonists, oral corticosteroids, omalizumab where applicable), the documented exacerbation history, and the rationale for mepolizumab specifically; a recent prescription specifying brand name (Nucala), generic name (mepolizumab), strength (100 mg pre-filled syringe or autoinjector), 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 (GSK); the destination dispensing facility licence; and the chain-of-custody plan for the refrigerated 2 to 8 degree Celsius shipment to Cairo International Airport with documented temperature logging.

Real costs in EGP and USD

Reserve Meds quotes in USD and accepts USD wire transfers. The US wholesale acquisition cost for Nucala runs approximately USD 3,500 to 4,500 per monthly 100 mg injection. Annual cost runs approximately USD 42,000 to 54,000 for severe eosinophilic asthma, and substantially higher for EGPA or HES at the 300 mg dose with annual cost in the USD 130,000 to 160,000 range. International cold-chain logistics from the US source to Cairo for a refrigerated biologic shipment typically run USD 400 to 1,200 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. 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 severe asthma or related eosinophilic-disease cases typically process in 15 to 30 business days from submission of a complete package. Complex submissions, less common indications such as HES, 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 cold-chain shipment from the US to Cairo typically run 2 to 4 weeks. For ongoing therapy on a 4-week injection cycle, the practical rhythm is continuous. Reserve Meds frames severe asthma cases as multi-year engagements.

What your physician needs

The treating physician on a Nucala case in Egypt is typically a pulmonologist, allergist, rheumatologist for EGPA, or haematologist for HES. The clinical justification letter typically addresses the confirmed diagnosis with supporting laboratory data, the baseline eosinophil count (Type 2 inflammation profile), the documented exacerbation history for asthma, the prior step-up therapy ladder (high-dose ICS-LABA, leukotriene modifier, oral corticosteroid burden), and the rationale for mepolizumab. The letter typically references the supporting clinical trial evidence, including DREAM, MENSA, SIRIUS for asthma, or MIRRA for EGPA depending on the indication.

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, the pulmonology services at Children's Cancer Hospital 57357 for paediatric cases overlapping with paediatric pulmonology, or a private specialty hospital in the Cleopatra group, Dar Al Fouad, or As-Salam International, must hold a current pharmaceutical establishment licence and refrigerated storage. 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 Nucala 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 purchasing for public hospitals. Where Nucala is in the UPA-procured catalogue for the locally registered indication, public-sector patients may access it through

institutional channels. Where the patient is treated in a private specialty hospital or the indication is outside the UPA-procured scope, the named-patient framework is the route.

Bupa Egypt, AXA Egypt, MetLife Egypt, Allianz Egypt, Misr Insurance, and other carriers assess severe asthma biologic 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

Nucala is a recombinant monoclonal antibody stored refrigerated at 2 to 8 degrees Celsius in pre-filled syringe or autoinjector form. The cold-chain chain-of-custody plan in the EDA submission includes the US-side cold-pack configuration, the door-to-door temperature logger, the dedicated freight forwarder, the expected port of entry (typically Cairo International Airport), and the receiving institution's confirmation of refrigerated storage on arrival. Any temperature excursion is documented and triaged before the product enters dispensing.

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. Mepolizumab carries warnings for hypersensitivity reactions, herpes zoster infections, and parasitic infections; the treating team monitors accordingly. Reserve Meds includes the EPVC reference contacts in the physician documentation kit.

Common questions about Nucala in Egypt

What about other anti-IL-5 or anti-IL-5R biologics, benralizumab (Fasenra) or reslizumab (Cinqair)? Benralizumab and reslizumab are alternative anti-IL-5 pathway biologics with different administration routes, dosing schedules, and indication scopes. The clinical choice rests with the treating physician. Reserve Meds can scope alternative pathways where the treating physician determines a different biologic is clinically appropriate.

What about anti-IgE (omalizumab, Xolair) or anti-TSLP (tezepelumab, Tezspire) or anti-IL-4Ra (dupilumab, Dupixent)? Each targets a different inflammatory pathway and is appropriate for different patient profiles. The clinical choice rests with the treating physician based on the inflammatory phenotype, comorbidities, and prior therapy response.

Will my insurance cover this? Bupa Egypt, AXA Egypt, MetLife Egypt, Allianz Egypt, Misr Insurance, and other carriers assess severe asthma biologic claims case by case based on

the documented eosinophilic phenotype, the prior therapy ladder, and the plan terms. We do not promise coverage. We supply the documentation an insurer would request.

Can I self-administer Nucala at home? Yes for the asthma indication. Nucala is available as a pre-filled syringe and an autoinjector for patient or caregiver self-administration at home after appropriate training. Dispensing remains through a licensed pharmacy.

Is Nucala a controlled substance? No. Nucala 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 Nucala 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 Nucala 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

- [Nucala clinical resource](#)
- [Egypt country page](#)
- [Named-patient pathway overview](#)

Sources

1. FDA approval and prescribing information for Nucala (mepolizumab), GlaxoSmithKline (GSK).
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 Nucala 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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