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Nigeria's Electronic Pharmacy Regulations 2026: *Market Entry and Compliance for E-Pharmacy Operators*

Introduction

Ordering medicines online is no longer a niche convenience. Nigeria's digital healthcare market, valued at approximately USD 1.5 billion, is expanding as consumers embrace convenient digital healthcare and investors turn to health-tech opportunities.[1] On 13 February 2026, the Pharmacy Council of Nigeria ("**PCN**") issued the Electronic Pharmacy Regulations, 2026 (the "**EPR 2026**" or the "**Regulations**"), repealing the Online Pharmacy Regulations, 2021 (the "**Repealed Regulations**").

An electronic pharmacy (or "**e-pharmacy**") is a digital service through which consumers can order medicines, submit prescriptions, consult pharmacists or other healthcare professionals remotely, and arrange delivery. Depending on the model, it may run its own licensed pharmacy, partner with an existing physical pharmacy, or connect consumers with independently licensed pharmacies.

The new rules respond to gaps left by the Repealed Regulations, including gaps around market entry, platform-based operations, digital prescription fulfilment and technology-enabled healthcare models. They therefore matter not only to pharmacies, but also to digital health businesses, investors and other potential market participants.

The EPR 2026 aims to build a "safe, accessible, and fully regulated national e-pharmacy ecosystem" capable of supporting market expansion and investor participation, as the Minister of Health noted at the launch of the Regulations.[2]

Importantly, the EPR 2026 sits within a wider regulatory framework. While the PCN regulates pharmacy practice, pharmacists and pharmacy premises,[3] the National Agency for Food and Drug

[1] Research Markets, available at https://www.researchandmarkets.com/reports/6207334/nigeria-digital-health-telemedicine-market?srsltid=AfmBOopqld1Iu8iRCa9xqIT8tgX8h_o7vwwh4dXdM7wG7ZOIWAuBQSN7 accessed 22 June 2026.
[2] Punch website, available at https://healthwise.punchng.com/fg-unveils-e-pharmacy-regulations-targets-safer-drug-markets/#google_vignette accessed 22 June 2026.
[3] Section 4 of the PCN Act.

Administration and Control ("**NAFDAC**") regulates the products themselves including their importation, distribution, advertisement, sale, use, safety, quality and efficacy.[4] State Ministries of Health may also impose additional operational or premises requirements, which can vary from state to state.

This article explains the routes into the market, the obligations that come with each route, and what the new framework means for operators and investors.

Pathways into Nigeria's Digital Pharmaceutical Market

The EPR 2026 recognises two regulated operator categories: Electronic Pharmaceutical Service Providers ("**EPSPs**" or "**Providers**") and Electronic Pharmacy Aggregators ("**EPAs**" or "**Aggregators**"). The route a business takes depends on whether it will perform regulated pharmaceutical activities itself and whether it has access to licensed physical pharmacy premises. That choice determines who holds the PCN licence, who performs the regulated functions and which agreements the model requires.

***Pathway A – Existing* Physical Pharmacies Expanding into Digital Operations**

Pathway A is for existing licensed physical pharmacies, including retail, wholesale and chain businesses that want to add digital services through their own website or platform.

A pharmacy with licensed premises that seeks a digital licence must provide its existing premises registration certificate.[5] For traditional operators, this is the most direct route into digital pharmacy.

***Pathway B* – Digital-First Operators Partnering with Licensed Pharmacies**

The EPR 2026 also recognises digital-first operators that do not own or operate physical pharmacy premises. A business with the necessary digital infrastructure may register as an EPSP if it enters into a legally binding partnership with a licensed physical pharmacy. The agreement must clearly allocate the parties' roles and responsibilities.

This model may suit telemedicine and telehealth businesses offering remote consultations and prescriptions; e-commerce businesses with pharmaceutical or healthcare segments; digital health platforms integrating prescription fulfilment and delivery; and healthcare technology start-ups seeking entry into pharmaceutical distribution.

To qualify, the operator must have a robust partnership agreement with a licensed pharmaceutical operator. This route removes the need for every digital operator to establish its own licensed physical premises, while preserving the licensed pharmacy's role in the regulated service.

This is a meaningful departure from traditional online-pharmacy models in jurisdictions like the United Kingdom, where physical premises are generally required first.[6]

Pathway C – Electronic Pharmacy Aggregators and Third-Party Marketplaces

Under this structure, an Aggregator neither provides pharmaceutical services nor owns or sells the products listed on its platform. It operates a third-party marketplace through which independently licensed EPSPs connect with consumers. The Aggregator manages the platform and related technology; consumers use it to access services offered by participating EPSPs.

Although it does not dispense medicines itself, an Aggregator is independently regulated and must obtain a PCN licence. The model suits marketplace pharmacy platforms, health-tech infrastructure providers, medicine-delivery applications and businesses building scalable pharmaceutical ecosystems without owning or dispensing medicines.

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[4] Section 5 of the NAFDAC ACT.
[5] Regulation 4(2)(l) of the Regulations. Under Regulation 14 of the Pharmaceutical Premises Location, Inspection, Structure, Monitoring and Enforcement Regulations, 2021, a "Premises Certificate" means the authority conferred on a premises to carry on pharmacy practice and business in a particular location, issued by the PCN.
[6] Available at https://rxsure.co.uk/blog/how-to-start-online-pharmacy-uk/ accessed 22 June 2026.

An application must include the service-level agreement with each proposed EPSP, setting out the parties' responsibilities. It must also include evidence of registration with the Nigerian Information Technology Development Agency and the Nigerian Data Protection Commission ("**NDPC**").

Key Licensing, Operational, and Compliance Obligations under the EPR 2026

The main obligations are set out below.

a. *Superintendent Pharmacist*

The Superintendent Pharmacist ("**SP**") is the principal professional responsible for securing the registration of an EPSP or Aggregator and supervising its pharmaceutical services.

The SP must give a formal undertaking accepting responsibility for pharmaceutical services provided by the EPSP, its partner premises or an Aggregator platform. The SP may supervise only one electronic pharmacy platform at a time, so a single pharmacist cannot cover multiple ventures.

The designated-pharmacist requirement reflects a familiar safeguard in other regulated pharmacy markets.[7]

Businesses should therefore treat the appointment and retention of an SP as a core operational and governance issue, particularly because non-compliance may lead to closure of the platform or website.

b. *Data Privacy Obligations*

The EPR 2026 brings Nigeria's data protection framework directly into electronic pharmacy operations. Providers and Aggregators must comply with the Nigeria Data Protection Act, 2023 ("**NDPA**") and other applicable data privacy regulations.

The rules cover data minimisation, encryption and cybersecurity safeguards, secure retention of customer records, consent management for telehealth interactions, and breach response and notification procedures.

Operators therefore face both sanctions under the Regulations and the broader enforcement jurisdiction of the NDPC.

c. *Prescription Controls and Delivery Obligations*

While operators that sell Over-The-Counter ("**OTC**") medicines must comply with existing laws governing the sale and advertising of OTC products, the rules for Prescription-Only Medicines ("**POMs**") are stricter.

An EPSP may dispense POMs only on a valid prescription[8] issued by a duly licensed healthcare professional with a physical address in Nigeria. Dispensing POMs without a valid prescription attracts imprisonment for up to 2 (two) years, a fine of ₦2,000,000 (Two Million Naira), or both.

The Regulations also prohibit the online sale of controlled medicines and dangerous drugs. A breach attracts imprisonment for up to 2 (two) years, a fine of ₦2,500,000 (Two Million, Five Hundred Thousand Naira), or both.

EPSPs remain responsible for compliance with Good Distribution Practices ("**GDP**") even when they use third-party logistics providers. They must also maintain an auditable trail covering each pharmaceutical transaction from prescription request through final delivery.

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[7] Available at https://www.pharmacyregulation.org/pharmacists/changes-registration/becoming-superintendent-pharmacist accessed 22 June 2026.
[8] A valid prescription must contain specific information including the prescriber's name, signature, registration number, telephone number, and physical address of the clinic or hospital in Nigeria, Regulations 20(4) of the Regulations.

d. The National Electronic Pharmacy Platform

The EPR 2026 establishes the National Electronic Pharmacy Platform ("**NEPP**"), a centralised, government-backed infrastructure intended to facilitate and monitor electronic pharmaceutical activity in Nigeria.

Registered EPSPs and Aggregators must use the NEPP as a gateway, and all online drug orders must pass through it. Independent platforms must be legally and technically linked to the NEPP, with transaction flows recorded and stored synchronously. EPSPs must also use identity verification to ensure services are provided only to adults.

e. Registration, Renewal, and Corporate Liability Exposure

The EPR 2026 includes transitional arrangements for electronic pharmacies registered under the Repealed Regulations. Previously registered EPSPs must submit any additional documents required under the new Regulations within 6 (six) months of the commencement of the EPR 2026.[9] This appears to preserve existing registrations rather than require a fresh application, provided operators bring their registration documents into compliance.

All registered EPSPs and Aggregators must renew their licences annually. Licences expire on 31 December and are due for renewal on 1 January. Failure to renew by 31 January triggers the prescribed renewal fee plus a late fee equal to 50% of that fee.

Because the licence year is fixed, a business that registers later in the year may have only a short period before renewal is due. The Regulations do not provide for pro-rating the licence period or fee. Pending further PCN guidance, early registration may therefore offer greater commercial value.

Additionally, operating as an EPSP without the required licence attracts imprisonment for up to 2 (two) years, a fine of ₦2,500,000 (Two Million, Five Hundred Thousand Naira), or both, and closure of the platform. An Aggregator that operates without a licence is liable to a fine of ₦3,000,000 (Three Million Naira), imprisonment for up to 2 (two) years, or both.

Liability may extend beyond the corporate entity to directors, officers, managers and SPs where breaches occur with their consent, connivance, neglect or involvement. Compliance is therefore a board-level governance and enterprise-risk issue, not merely an operational obligation.

Commercial Implications and Opportunities for Investors

For existing and prospective investors, the key commercial implications include:

- Regulatory due diligence must go beyond corporate incorporation and platform functionality. Investors and counterparties should verify the relevant PCN licences, the appointment of qualified SPs, compliance with data privacy requirements, and where applicable, properly drafted partnership agreements with licensed physical pharmacies.

- The EPR 2026 formalises relationships between technology-driven healthcare businesses and traditional pharmacy operators. Partnership and service-level agreements are now central to compliance, making careful drafting a market-entry requirement.

- The EPR 2026 also increases management-level accountability: in certain circumstances, liability extends to directors, officers, managers and SPs. Compliance is therefore a board-level governance and risk-management issue for operators and investors.

[9] Regulation 4 (6) of the Regulations.

- The Regulations prohibit the cross-border online sale of pharmaceutical products into or out of Nigeria, except in limited circumstances involving life-saving medicines.[10] Foreign pharmaceutical platforms and international digital-health operators will likely need a licensed local structure rather than servicing Nigeria remotely. A chain pharmacy or foreign pharmacy in Nigeria must have at least one Nigerian licensed pharmacist who sits on its board of directors and directly or indirectly owns at least 40% (forty percent) of the company's shares. If the company manufactures, imports, exports, distributes, wholesales or stores pharmaceutical products, that pharmacist-director must hold at least one share.[11]

Conclusion

The EPR 2026 moves Nigeria's digital healthcare and pharmaceutical sector toward a clearer, more structured and commercially viable framework. It opens more routes into the market while making licensing, partnerships, data protection, prescription controls and governance non-negotiable. Businesses that build compliant, technology-enabled and operationally resilient models will be best placed to capture the sector's next phase of growth.

If you require any further information, do not hesitate to contact us.

[10] Regulations 35(1) and (2) of the Regulations. Further, the sale or purchase has to be conducted by a registered and currently licensed pharmacist, the source of the products is specified and properly documented, and the transaction complies with Nigerian laws and the laws of the country of origin.
[11] Section 27(3)(4) of the PCN Act, 2022.