WEEKLY REPORT

03/14/2026

BRAZIL SETS DRUG PRICE ADJUSTMENT BETWEEN 1.13% AND 3.81%, CMED SAYS
Brazil's drug pricing regulator, the Drug Market Regulation Chamber (CMED), defines the annual price adjustment for medicines to range between 1.13% and 3.81%, depending on the level of market competition in each therapeutic class. The adjustment is expected to take effect from April 1, when companies may update prices within the authorized ceiling. Under Brazil's price-cap system, the annual adjustment sets a maximum permitted increase, not an automatic change in retail prices. The formula considers factors such as inflation (IPCA), productivity gains in the pharmaceutical industry and competitive dynamics across therapeutic classes, aiming to balance consumer protection with industry sustainability. Read more.

BRAZIL JUDICIARY CREATES COMMITTEE TO OVERSEE NATIONAL PLATFORM FOR MEDICINE REQUESTS IN SUS
The National Justice Council (CNJ) establishes a governance committee to oversee the National Health Platform, a digital system designed to centralize information on requests for medicines within Brazil's Unified Health System (SUS). The committee will define governance rules, establish operational procedures, and monitor the development and functioning of the platform. The platform allows physicians to register requests for medicines and enables public health managers to evaluate them, while members of the judiciary, public prosecutors and public defenders can monitor the cases. The initiative involves institutions such as the Ministry of Health, the National Commission for Health Technology Incorporation in the SUS (CONITEC), the National Health Surveillance Agency (ANVISA), and state and municipal health authorities. Read more.

BRAZIL REGULATOR PROVIDES UPDATED LIST OF REFERENCE MEDICINES FOR GENERICS AND SIMILAR DRUGS
The National Health Surveillance Agency (ANVISA) provides an updated List of Reference Medicines (LMR) used as the regulatory benchmark for the approval of generic and similar drugs in Brazil. Reference medicines are innovative products whose safety, efficacy and quality were demonstrated through full clinical studies, serving as the standard against which other medicines must prove therapeutic equivalence. The list is periodically updated to include newly approved medicines, remove discontinued products and adjust regulatory records. According to ANVISA, the reference list is organized into groups based on whether products contain a single active pharmaceutical ingredient or combinations, ensuring a clear framework for bioequivalence studies and therapeutic interchangeability in the Brazilian pharmaceutical market. Read more.

BRAZIL REGULATOR APPROVES THREE NEW BIOLOGICAL MEDICINES FOR CANCER, DIABETES AND RARE DISEASE
The National Health Surveillance Agency (ANVISA) approves the registration of three new biological medicines, expanding therapeutic options for patients with cancer, autoimmune disease, and a rare genetic condition. The approvals are published in Brazil's Official Gazette (DOU) and include innovative treatments targeting different medical areas. Among the newly authorized products are Datroway®, indicated for adults with unresectable or metastatic breast cancer with hormone-receptor positive and HER2-negative disease; Tzield® (teplizumab), an immunotherapy that can delay the onset of type 1 diabetes in patients at high risk; and

Andembry® (garadacimab), a monoclonal antibody used to prevent attacks of hereditary angioedema, a rare genetic disorder. The approvals broaden the availability of advanced biologic therapies in the Brazilian market. Read more.

BRAZIL UPDATES ELIGIBILITY CRITERIA FOR PATIENT PARTICIPATION IN HEALTH TECHNOLOGY ASSESSMENTS

The National Commission for Health Technology Incorporation in the Unified Health System (CONITEC) announces updated eligibility criteria for participation in the "Patient Perspective" initiative, a mechanism that allows patients and caregivers to share real-world experiences during health technology assessment discussions. Under the new rules, participation is open to individuals with health conditions under evaluation, as well as family members or caregivers with direct experience using the technology being assessed. Participants will be selected through a random draw among registered applicants, with priority given to those who have direct experience with the technology under evaluation. The initiative is designed to incorporate patient experiences—such as treatment benefits, quality-of-life impacts, and practical challenges—into the decision-making process on medicines, procedures and other technologies considered for inclusion in Brazil's Unified Health System (SUS). Read more.

FRAGMENTATION AND INEFFICIENCY THREATEN SUSTAINABILITY OF BRAZIL'S PUBLIC HEALTH SYSTEM, TCU AUDITOR SAYS

Fragmentation of services and inefficiency in resource allocation are among the main challenges affecting the sustainability of Brazil's Unified Health System (SUS), according to Alexandre Giraux, head of the health audit unit at the Federal Court of Accounts (TCU). In an interview, Giraux says the court has intensified audits and monitoring in areas considered high risk for the health system, including hospital contracts, strategic policies, and access to specialized care. According to the auditor, difficulties in accessing medium- and high-complexity services remain a structural problem, partly due to fragmented care networks and the limited scale of many small hospitals. The TCU is also monitoring issues such as the judicialization of healthcare, incorporation of health technologies, execution of parliamentary amendments and policies linked to Brazil's Health Economic-Industrial Complex (CEIS). Read more.

BRAZIL FACES CHALLENGES TO EXPAND EARLY DETECTION OF RARE DISEASES

Brazil is working to expand early diagnosis of rare diseases through genomic technologies, but structural challenges still limit large-scale implementation in the Unified Health System (SUS). The Ministry of Health plans to offer whole-exome sequencing to help identify genetic conditions more quickly, potentially reducing the average diagnostic journey from about seven years to roughly six months. Despite technological advances, experts warn that expanding early detection depends on strengthening the National Neonatal Screening Program, commonly known as the heel-prick test. The program still screens for only six conditions in most of the country, even though legislation approved in 2021 mandates a gradual expansion to more than 50 diseases. Implementation faces barriers such as limited laboratory capacity, shortage of specialized professionals and logistical challenges in transporting samples and delivering results. Read more.

EARLY DIAGNOSIS FROM NEONATAL SCREENING IMPROVES OUTCOMES FOR RARE DISEASES IN BRAZIL

Early diagnosis through tools such as neonatal screening, widely known as the heel-prick test, plays a key role in identifying serious conditions before symptoms appear, allowing treatment to begin in the earliest stages of disease. Specialists highlight that detecting disorders shortly after birth can prevent disease progression, severe complications, and irreversible damage in many cases. Brazilian legislation approved in 2021 establishes the gradual expansion of neonatal screening in the Unified Health System (SUS) to include up to 53 diseases, compared with six conditions previously tested. Experts note, however, that implementing the expanded program requires strengthening laboratory capacity, diagnostic confirmation, and referral centers to ensure that early detection leads to timely treatment. Read more.

BRAZIL SENATE DEBATE HIGHLIGHTS GAPS IN COMPREHENSIVE CARE FOR RARE DISEASES

A public hearing at the Human Rights and Participatory Legislation Committee of the Federal Senate highlights persistent gaps in comprehensive care for people living with rare diseases in Brazil. Participants stress the need for stronger public policies focused on early diagnosis, access to treatment and the organization of care pathways within the Unified Health System (SUS). During the debate, lawmakers, specialists, and patient representatives note that around 13 million Brazilians live with rare diseases, many of which are genetic and appear in childhood, requiring specialized and continuous care. Advocates argue that delays in diagnosis and limited access to specialized services remain major barriers to effective treatment and support for affected families. Read more.

GENOMICS SHORTENS DIAGNOSTIC JOURNEY FOR RARE DISEASES IN BRAZIL

Advances in genomic sequencing are helping shorten the diagnostic journey for patients with rare diseases in Brazil, allowing doctors to identify genetic conditions faster and with greater precision. Technologies such as next-generation sequencing enable the analysis of multiple genes simultaneously, reducing the time patients spend undergoing multiple exams before receiving a confirmed diagnosis. Despite these advances, specialists warn that access to genomic tests remains uneven across the country. Rare diseases affect millions of people and often require specialized care and coordinated health services, but barriers such as limited access to diagnostic technologies and specialized centers still delay treatment and care in many regions. Read more.

PATENT DELAYS OF UP TO 17 YEARS FUEL DEBATE OVER COMPENSATION BILL IN BRAZIL

Delays in Brazil's patent examination process are increasing pressure in Congress to advance Bill 5,810/2025, which proposes compensation mechanisms when administrative backlogs reduce the effective protection period for inventions. The debate gained visibility after a patent application related to polylaminin, a biomedical technology developed by a researcher at the Federal University of Rio de Janeiro (UFRJ), took nearly 17 years to receive a decision from the National Institute of Industrial Property (INPI). Because patent protection in Brazil begins at the time of filing rather than approval, long examination periods can significantly reduce the time innovators are able to commercially exploit their inventions. Supporters of the bill argue that the proposal would adjust the patent term to compensate for delays attributable to the government, aligning Brazil with mechanisms used in other countries to preserve effective protection for research-intensive sectors such as biotechnology and pharmaceuticals. Read more.

RIO DE JANEIRO TO INTRODUCE WEIGHT-LOSS INJECTION IN PUBLIC HEALTH SYSTEM, DEBATE REACHES FEDERAL LEVEL IN BRAZIL

Rio de Janeiro Mayor Eduardo Paes announces that the city will begin offering weight-loss injections such as semaglutide (Ozempic) in the municipal public health system starting next week, with distribution expected to begin at a new health center in the city's west zone. The initiative aims to expand access to treatments used for diabetes and obesity that have become widely known for their weight-loss effects. During the announcement, President Luiz Inácio Lula da Silva says the issue is "delicate," emphasizing that such medicines should be prescribed based on medical need and accompanied by lifestyle guidance, including healthy diet and physical activity. The proposal also revives debate over broader adoption of GLP-1 medicines in Brazil's public health system (SUS). Read more.

EMS PLANS TO LAUNCH GENERIC OZEMPIC IN BRAZIL BY SEPTEMBER

Brazilian pharmaceutical company EMS plans to launch a generic version of Ozempic (semaglutide) in Brazil by September 2026, pending regulatory approval from the National Health Surveillance Agency (ANVISA). According to company executives, the decision on the

marketing authorization is expected within the next 60 days, after which the firm would begin distribution preparations. The company expects the product to enter the market around 20% cheaper than the reference drug, potentially falling further as competition increases. The move comes as patent protection for semaglutide, a GLP-1 medicine widely used for diabetes and weight loss, expires in Brazil, opening space for rival manufacturers to launch competing products once regulatory approval is granted. Read more.

IRAN CONFLICT RAISES CONCERNS OVER BRAZIL'S DEPENDENCE ON IMPORTED MEDICINES AND INPUTS

The escalation of the conflict involving Iran, the United States and Israel is increasing pressure on Brazil's pharmaceutical supply chain and highlighting the country's heavy dependence on imported drug ingredients. Industry representatives warn that disruptions to logistics routes in the Middle East could affect shipments of active pharmaceutical ingredients (APIs) and hospital supplies used by Brazilian manufacturers. Brazil currently imports around 85% to 95% of the APIs used in medicines, with China and India accounting for most of the supply. According to pharmaceutical industry associations, the conflict is already raising logistics costs and insurance premiums for cargo passing through the region, with estimates pointing to a 20% to 25% increase in transportation costs. The Ministry of Health has also signaled concern that prolonged disruptions could increase prices for health products in the country. Read more.

MERCOSUR-EU DEAL MAY TRIGGER DEINDUSTRIALIZATION RISK FOR BRAZIL'S PHARMA-CHEMICAL SECTOR, INDUSTRY GROUP WARNS

Brazil's pharmaceutical active ingredients industry warns that the Mercosur–European Union trade agreement could accelerate deindustrialization of the domestic sector due to increased competition from European imports. According to the Brazilian Association of the Chemical Industry (ABIQUIM), tariff reductions could make it harder for local producers of pharmaceutical inputs to compete with suppliers from the European bloc. Industry representatives argue that the agreement may deepen Brazil's dependence on imported pharmaceutical ingredients if no compensatory industrial policies are adopted. The deal, signed in 2026 after more than two decades of negotiations, foresees gradual tariff elimination for most traded goods between the blocs, creating one of the world's largest free-trade areas and intensifying competition in sectors such as chemicals and pharmaceuticals. Read more.

RIVOTRIL ORAL DROPS RETURN TO BRAZILIAN PHARMACIES AFTER SHORTAGE, SUBLINGUAL VERSION STILL UNAVAILABLE

The oral-drop formulation of Rivotril (clonazepam) is returning to pharmacies across Brazil after nearly six months of shortage, according to the distributor Biopas Brasil Produtos Farmacêuticos. Distribution resumed after manufacturing updates at a production facility in Italy, with supply gradually reaching retail pharmacy chains nationwide. However, the 0.25 mg sublingual tablet remains largely unavailable in the country. The company states the product is undergoing a manufacturing transition to a plant in Spain and to return to the market in the first half of 2026. The supply disruption began during the relocation of production to European facilities, affecting availability in several Brazilian cities. Read more.

ROCHE TARGETS R$1.7 BILLION IN BRAZIL WITH EXPANSION IN SUS AND DIABETES MONITORING

Roche Diagnósticos expects to generate R$1.7 billion in revenue in Brazil in 2026, a projected 13% increase compared with the previous year, according to company executives. The growth strategy is based on three pillars: contracts with private laboratories, expansion of diagnostic programs within the Unified Health System (SUS) and the retail market for diabetes monitoring technologies. Part of the expansion involves partnerships with the Ministry of Health to supply molecular diagnostic infrastructure for programs targeting diseases such as HIV, HPV, and tuberculosis. The company is also investing in the diabetes segment through sensors for continuous glucose monitoring, which allow patients to track glucose levels throughout the day and integrate digital and artificial intelligence tools for disease management. Read more.

HYPOFARMA ANNOUNCES R$440 MILLION INVESTMENT IN NEW PHARMACEUTICAL PLANT IN BRAZIL

Brazilian pharmaceutical company Hypofarma announces an investment of R$440 million to build a new manufacturing plant in Montes Claros, Minas Gerais, reinforcing the region's position as one of Brazil's main pharmaceutical hubs. Construction is expected to begin in the second half of 2026, with the facility initially focused on producing oral oncology medicines, anesthetics, and antibiotics. The project is expected to generate about 320 jobs during construction and 250 permanent positions once operations begin. According to the company, the investment is part of a broader expansion strategy that may reach up to R$1.5 billion in the coming years, including spending on research, development and new products aimed at hospitals and government buyers. Read more.

EUROFARMA OBTAINS REGULATORY APPROVAL IN BRAZIL FOR EPILEPSY TREATMENT

Eurofarma obtains marketing authorization from the National Health Surveillance Agency (ANVISA) for cenobamate, an anti-epileptic medicine indicated for the treatment of focal seizures in adults who continue to experience episodes despite previous therapies. The drug will be marketed in Brazil under the brand name XCOPRI, marking the first approval of the product in the country. The company expects the medicine to reach the Brazilian market in 2026, strengthening its portfolio in treatments for the central nervous system. Although the product has obtained regulatory approval, commercialization will depend on the definition of a maximum price by the Drug Market Regulation Chamber (CMED), while potential incorporation into the Unified Health System (SUS) would require evaluation by the National Commission for Health Technology Incorporation in the Unified Health System (CONITEC). Read more.

ORGANIZED CANCER SCREENING PROGRAMS SHOULD BE A TOP PRIORITY IN BRAZIL, ONCOLOGIST SAYS

Expanding organized cancer screening programs should be a top priority for Brazil's public health policy, according to oncologist Angélica Nogueira, honorary president of the Brazilian Society of Clinical Oncology (SBOC). In an interview, she argues that improving prevention and early detection could significantly reduce cancer mortality in the country, especially for diseases such as breast, cervical and colorectal cancer. Nogueira notes that while Brazil has long-standing screening initiatives, many programs remain fragmented or fail to reach adequate population coverage. She highlights that cervical cancer screening has existed for decades but has not substantially reduced mortality, while colorectal cancer still lacks an organized national screening program. According to the specialist, strengthening primary care, improving data systems, and expanding access to preventive tests are key steps to improving outcomes. Read more.

BRAZIL SENATE SENDS BILL EXPANDING ACCESS TO CANCER IMMUNOTHERAPY IN SUS TO PRESIDENTIAL SANCTION

Brazil's Federal Senate approves Bill 2,371/2021, which aims to facilitate access to immunotherapy for cancer treatment within the Unified Health System (SUS). The proposal amends the Organic Health Law to allow immunotherapy to be included in clinical protocols and therapeutic guidelines whenever it proves more effective or safer than traditional treatments. The measure seeks to reduce delays in the adoption of innovative cancer therapies in the public system. Lawmakers argue that patients often wait months for new treatments to be incorporated administratively, which can be critical in oncology care. The bill, authored by Representative Bibo Nunes, now awaits presidential sanction. Read more.

ALZHEIMER BECOMES SECOND MOST FEARED DISEASE AMONG BRAZILIANS, SURVEY SHOWS

Alzheimer's disease ranks as the second most feared diagnosis among Brazilians, behind only cancer, according to a Datafolha survey commissioned by Eli Lilly. The poll, conducted with

2,002 respondents aged 16 and older, finds that 75% cite cancer as the most feared illness, followed by Alzheimer's (13%), AIDS (9%), and Parkinson's disease (1%). The survey also shows that four in ten Brazilians know someone diagnosed with Alzheimer's, reflecting the growing visibility of the disease as the population ages. Specialists warn that stigma and lack of information still delay diagnosis and treatment, while data from Brazil's Ministry of Health indicate that around 80% of dementia cases in the country remain undiagnosed. Read more.

BRAZIL MEDICAL COUNCIL PLANS PLATFORM TO COMBAT ILLEGAL PRACTICE OF MEDICINE

The Federal Council of Medicine (CFM) plans to launch a national digital platform called "Medicina Segura CFM" to help identify and combat the illegal practice of medicine in Brazil. The system will collect and organize reports of procedures, prescriptions and clinical interventions performed by individuals without medical training, strengthening oversight and patient protection. Created under Resolution No. 2,453/2026, the platform will centralize complaints and forward them to the Regional Councils of Medicine (CRMs) for investigation. The initiative will also integrate information with health authorities, law-enforcement agencies, and judicial bodies, aiming to standardize reporting procedures and improve enforcement against unauthorized medical activities. Read more.

MORE HIGHLIGHTS

Women's health is a top priority for Brazil's Ministry of Health, minister says

Platform launched to expand access to information on rare diseases in Brazil

Brazil Senate debate highlights push to include achondroplasia drug in public health system

Brazil adopts domestic technology to improve care for premature babies in public health system

BRAZIL NEWS

Brazil sees slightly higher inflation this year after oil shock

Brazil's Petrobras expects little impact on consumers from diesel price hike

Biodiesel turns cheaper than imported diesel in Brazil amid debate over higher mix

Brazil top court panel keeps Banco Master owner Vorcaro in jail

Lula says he barred Trump adviser Beattie from entering Brazil

Trump asks Brazil to take in foreigners captured in the US, Folha reports

Embraer sees E175 assembly in India in 2028 if it secures 200 orders

Tighter checks disrupt Brazilian soybean exports to China

Brazil's Raizen secures $12.6 billion out-of-court debt restructuring deal

Brazil's dreams for industrial-scale cocoa farms fading after price crash