WEEKLY REPORT

07/25/2026

BRAZIL ENACTS NATIONAL STRATEGY FOR THE HEALTH ECONOMIC-INDUSTRIAL COMPLEX

President Luiz Inácio Lula da Silva has signed into law the National Strategy for the Health Economic-Industrial Complex (CEIS), establishing a permanent policy to strengthen Brazil's capacity to develop, manufacture, and innovate in strategic health technologies for the Unified Health System (SUS). The legislation aims to reduce the country's dependence on imported medicines, vaccines, medical devices, and other strategic health products by promoting domestic production and innovation. The law makes permanent key industrial policy instruments, including Partnerships for Productive Development (PDPs), the Local Development and Innovation Program (PDIL), and Technological Procurement mechanisms. It also establishes contractual provisions to allocate technological and financial risks between the government and private partners during product development and technology transfer, while creating the framework for accrediting Strategic Health Companies and reinforcing the use of public procurement to support Brazil's health industrial base. Read more.

BRAZIL CREATES PERMANENT COMMITTEE TO NEGOTIATE SUS TECHNOLOGY PRICES

Brazil's Ministry of Health has created a Permanent Health Technology Price Negotiation Committee, establishing a formal mechanism to negotiate prices for medicines and other technologies purchased by the Unified Health System (SUS). According to Health Ministry officials, the initiative is expected to achieve price reductions of up to 50% in some negotiations and opens the door to the adoption of confidential discounts, a pricing strategy widely used in other countries but not previously institutionalized in Brazil. The committee will support negotiations for technologies recommended for incorporation into the SUS, seeking to improve affordability while preserving access to innovative treatments. The move is also expected to facilitate more sophisticated purchasing arrangements, including confidential commercial agreements, as Brazil looks to strengthen its health technology assessment and procurement framework. Read more.

HEALTH MINISTRY CREATES MONITORING PROCESS FOR THE ROLLOUT OF NEWLY INCORPORATED SUS TECHNOLOGIES

Brazil's Ministry of Health has established a formal process to monitor and coordinate the implementation of health technologies incorporated into the Unified Health System (SUS) and funded by the federal government. The new regulation assigns responsibilities across the Ministry, establishes implementation milestones, and creates a monitoring mechanism to track whether newly approved medicines, devices, and other technologies are effectively made available to patients after incorporation. The measure seeks to address a longstanding gap between regulatory incorporation and real-world access by improving coordination, transparency, and accountability during the post-incorporation phase. According to the Ministry, the new workflow is expected to help reduce delays in the availability of technologies recommended by the National Commission for the Incorporation of Technologies into the Unified Health System (Conitec). Read more.

GOVERNMENT FORMALIZES LIST OF ULTRA-HIGH-COST ONCOLOGY THERAPIES FOR THE SUS

Brazil's Ministry of Health has officially classified 18 oncology medicines as ultra-high-cost therapies, establishing a dedicated reimbursement and procurement framework under the Oncology Pharmaceutical Assistance Component (AF-Onco). The list is dominated by immunotherapies, targeted therapies, and monoclonal antibodies used to treat breast, lung, hematologic, gastrointestinal, and other complex cancers, and is intended to support the rollout of recently incorporated technologies within the Unified Health System (SUS). The measure is part of the government's broader oncology reform, which includes a new financing model, centralized procurement, and enhanced monitoring of high-cost treatments. While stakeholders welcomed the initiative as a step toward expanding access, experts noted that effective implementation will depend on timely purchasing, distribution, and coordination across Brazil's public healthcare network. Read more.

BRAZIL'S HEALTH MINISTRY SIGNS R$65.4 MILLION CONTRACT FOR ZOLGENSMA

Brazil's Ministry of Health has signed a R$65.4 million contract to purchase Zolgensma (onasemnogene abeparvovec), one of the world's most expensive medicines, for the treatment of children with spinal muscular atrophy (SMA). The gene therapy is provided through the Unified Health System (SUS) for eligible infants with Type 1 SMA under a managed entry agreement that links payment to patients' clinical outcomes. The agreement follows the government's negotiation to reduce the therapy's price to approximately R$7 million per dose, about half its market price. The latest procurement is part of the Ministry's strategy to expand access to ultra-high-cost therapies while using innovative purchasing models to improve affordability and sustainability within the public health system. Read more.

CNJ ADOPTS STRICTER GUIDELINES FOR HEALTH-RELATED LAWSUITS

Brazil's National Council of Justice (CNJ) has approved new and revised guidelines for health-related litigation that introduce stricter criteria for judicial decisions involving access to medicines, medical treatments, and health insurance coverage. According to an analysis by JOTA, more than half of the new or amended recommendations adopted during the VIII Health Law Conference impose additional conditions for patients seeking court-ordered access to healthcare. The updated guidance reinforces the role of technical assessments by the National Commission for the Incorporation of Technologies into the Unified Health System (Conitec) and the Judiciary's Technical Support Centers (NatJus), while encouraging greater deference to administrative processes and existing care pathways. Following criticism from patient organizations, public defenders, and industry stakeholders, several proposed provisions were either withdrawn or revised before final approval to preserve judicial review in exceptional cases. Read more.

NATJUS EXPANDS INFLUENCE ON BRAZIL'S HEALTHCARE LITIGATION

The Judiciary's Technical Support Centers (NatJus) are playing an increasingly central role in Brazil's healthcare litigation, following recent Supreme Federal Court (STF) rulings and new National Council of Justice (CNJ) guidelines that require judges to rely more heavily on scientific evidence when deciding cases involving medicines and health technologies. Technical opinions issued by NatJus have also become mandatory in disputes involving private health insurance, reinforcing evidence-based decision-making across both the public and supplementary health systems. Experts interviewed by Futuro da Saúde say the growing use of NatJus is helping standardize judicial decisions and improve the technical quality of rulings, while reducing inconsistent court orders. At the same time, they argue that broader structural reforms (including faster technology assessment and improved access to innovative treatments) remain essential to curb the rising volume of healthcare litigation in Brazil. Read more.

BRAZIL'S RADICAL INNOVATION PROGRAM DRAWS INDUSTRY INTEREST, BUT CALLS FOR CLEAR GOVERNANCE

Brazil's newly launched National Radical Innovation Program in Health (PNIRS) has been broadly welcomed by the pharmaceutical industry as a strategic initiative to strengthen domestic innovation and reduce dependence on imported technologies. However, industry

representatives stress that the program's success will depend on transparent governance, stable funding, clear project selection criteria, and long-term policy continuity. The program aims to boost the development of new molecules, advanced therapies, medical devices, biotechnologies, and other strategic health technologies through collaboration among government, academia, research institutions, and the private sector. Stakeholders interviewed by Futuro da Saúde also highlighted the importance of ensuring alignment with existing industrial and regulatory policies to create a predictable environment for innovation and investment. Read more.

STUDY SHOWS PHARMACEUTICAL PATENTS TAKE 20% LONGER THAN AVERAGE TO BE REVIEWED IN BRAZIL

Pharmaceutical patent applications in Brazil take an average of 6.8 years to receive a first-instance decision by the National Institute of Industrial Property (INPI), around 20% longer than the overall average for patent applications, according to a new study by intellectual property law firm Dannemann Siemsen. The report also found that the patent backlog has started to grow again after previous reductions, while the number of patent grants fell by approximately 53% between 2021 and 2024. The findings have renewed concerns among research-based pharmaceutical companies about legal certainty and innovation in Brazil. Industry representatives argue that lengthy examination times discourage investment in research and development, while experts have proposed mechanisms such as patent term adjustment (PTA) to compensate for excessive administrative delays. Read more.

PHARMACEUTICAL CARGO THEFT COSTS BRAZIL'S INDUSTRY R$283 MILLION

Cargo theft continues to pose a major threat to Brazil's pharmaceutical supply chain, with industry losses totaling R$283 million in 2025, according to a study by logistics risk management company Overhaul commissioned by the Brazilian Association of Specialized, High-Cost and Hospital Drug Distributors (ABRADIMEX). Although the number of pharmaceutical cargo thefts in São Paulo fell 17.6% in the first five months of 2026 compared with the same period last year, high-value medicines remain a prime target for organized crime. Industry representatives warn that the impact extends well beyond financial losses. Theft of oncology drugs, immunobiologicals, rare disease therapies, and other temperature-sensitive medicines can disrupt patient treatment, compromise product integrity, and increase logistics, insurance, and security costs. The sector is calling for stronger cargo traceability, intelligence sharing, and coordinated enforcement to curb the illicit market for stolen pharmaceuticals. Read more.

ANVISA SCALES BACK INSPECTIONS OF COMPOUNDING PHARMACIES PRODUCING GLP-1 WEIGHT-LOSS DRUGS

The Brazilian Health Regulatory Agency (Anvisa) has reduced inspections at compounding pharmacies producing GLP-1 weight-loss medications, despite announcing stricter enforcement earlier this year. According to Folha de S.Paulo, the agency has not inspected these facilities since May after issuing an internal directive to temporarily pause inspections while developing a standardized inspection protocol. Anvisa denies that inspections have been suspended, stating that only a distributor inspection was postponed and that routine oversight remains primarily the responsibility of state and municipal health authorities. The development comes as Anvisa continues reviewing new regulatory requirements for the compounding of semaglutide and tirzepatide products. The proposed rules would strengthen controls over imported active pharmaceutical ingredients (APIs) and manufacturing practices, following concerns over irregularities in the rapidly growing market for compounded GLP-1 medicines. Read more.

STUDY FINDS BRAZIL AMONG LATIN AMERICA'S LEAST EFFICIENT HEALTH SYSTEMS IN RESOURCE USE

A study published in the International Journal of Health Planning and Management found that Brazil ranks among the least efficient health systems in Latin America and the Caribbean in

terms of resource utilization, despite achieving relatively good health outcomes. The research, which analyzed 23 countries over a ten-year period, concluded that Brazil uses comparatively higher levels of healthcare spending, hospital beds, physicians, and nurses to produce results such as life expectancy and infant mortality. The study identified 13 countries as efficient throughout the analysis, while Brazil consistently remained in the lower-performing group. According to the authors, the findings do not indicate that Brazil's health system is ineffective, but rather that there is significant room to improve the efficiency of resource allocation and management. Read more.

STUDY FINDS HEALTH EARMARKS OFTEN FINANCE OFFICE EQUIPMENT INSTEAD OF MEDICAL DEVICES

Parliamentary earmarks allocated to Brazil's Unified Health System (SUS) financed more office furniture, computers, and air conditioners than basic medical equipment for primary healthcare facilities in 2025, according to a report by the Institute for Health Policy Studies (IEPS). The analysis found that investments prioritized administrative infrastructure over essential devices such as electrocardiographs, fetal Dopplers, and emergency equipment used in frontline care. The findings have renewed concerns about how discretionary health funding is allocated at the local level. Researchers argue that parliamentary amendments should better align with healthcare needs and planning priorities to strengthen primary care capacity and improve service delivery, particularly as congressional earmarks account for an increasing share of Brazil's public health budget. Read more.

LOW ADOPTION OF FEDERAL SUS SYSTEMS HAMPERS NATIONAL WAITING LIST MONITORING, TCU SAYS

An audit by Brazil's Federal Court of Accounts (TCU) found that limited adoption of the federal government's healthcare regulation systems—particularly in São Paulo—is undermining the Ministry of Health's ability to monitor waiting lists for consultations, diagnostic tests, and elective surgeries nationwide. Although São Paulo operates the country's largest public health network, only 11.2% of its municipalities use federal platforms such as Sisreg and e-SUS Regulação, contributing to major gaps in the National Health Data Network (RNDS). According to the audit, the RNDS captured just 6.8% of elective surgeries performed by the Unified Health System (SUS) in 2024, while many states continue to rely on their own regulation systems instead of the federal platform. The TCU warned that fragmented data make it difficult to assess waiting times, measure the impact of the Agora Tem Especialistas program, and support evidence-based policymaking, reinforcing the need for greater interoperability across Brazil's healthcare information systems. Read more.

BRAZIL ADVANCES ON HEALTH DATA INTEROPERABILITY, BUT INTEGRATED CARE NETWORK REMAINS DISTANT

Brazil has made significant progress in health data interoperability through initiatives such as the National Health Data Network (RNDS), but experts say the country is still far from achieving a fully integrated healthcare system. According to specialists interviewed by Futuro da Saúde, connecting patient information across public and private providers is essential to improve continuity of care, reduce duplicated tests, enhance clinical decision-making, and enable broader use of artificial intelligence in healthcare. While interoperability has become a strategic priority in Brazil's digital health agenda, challenges remain, including fragmented information systems, uneven adoption of common standards, and limited integration between the public and private sectors. Stakeholders argue that overcoming these barriers will require stronger governance, regulatory alignment, and sustained investment to build a truly connected health ecosystem. Read more.

HEALTH MINISTRY OPENS PUBLIC CONSULTATION ON NEW OPEN DATA PLAN

Brazil's Ministry of Health has launched a public consultation to support the development of its Open Data Plan (PDA-MS) 2026–2028, inviting citizens, researchers, companies, and civil society organizations to help define which public health datasets should be prioritized for

publication in open formats. Contributions will be accepted through July 31 via the Brasil Participativo platform. The initiative aims to expand transparency, improve public access to health information, and encourage the reuse of government data for research, innovation, and policymaking. The new plan will establish the Ministry's priorities for publishing and updating open datasets over the next two years, reinforcing Brazil's broader digital health and open government agenda. Read more.

MORE HIGHLIGHTS

Brazil's Public Health System to Offer Edaravone for Early-Stage ALS

Anvisa Approves New Therapy for Aggressive Non-Hodgkin Lymphoma

Anvisa Expands Pediatric Indications for Lupus and Multiple Sclerosis Treatments

ANS Adds Two New Treatments to Mandatory Health Insurance Coverage

Brazilian Medical Device Industry Warns of Risks from New U.S. Tariffs

BRAZIL NEWS

Lula leads Flavio Bolsonaro in Brazil election poll

Flavio Bolsonaro launches Brazil presidential campaign

Son of Brazil's former President Bolsonaro secures US green card

US aimed to send envoys to Brazil to question its electoral system

Brazil justice suspends visits to ex-President Bolsonaro for 30 days

Brazil finance chief pledges reciprocity, not retaliation, after new U.S. tariffs

Brazil and US clash over future of payments as popular Pix system stirs global interest

Brazil says 16.5% of exports face combined US duties of 37.5%

Brazil fuel subsidies to cost around 6.8 billion reais a month, minister says

Brazil says US tariffs related to forced labor are 'arbitrary' and 'unjustified'

Brazil eases spending curb despite revenue shortfall from dividend tax

Brazil's Lula signs into law foie gras ban, angering France