WEEKLY REPORT

CONSULTORES
Relações Governamentais

10/24/2026

SUS FUNDING, WAITING LISTS AND EMERGING HEALTH RISKS CHALLENGE BRAZIL'S NEXT PRESIDENT

The next Brazilian president will face a difficult combination of fiscal constraints, long waiting lists for medical care and emerging public-health risks, including gambling addiction. The National Council of State Health Secretaries (Conass) advocates increasing public health spending from approximately 4% to 6% of GDP by 2030, while experts call for stronger primary care and regional coordination among federal, state and municipal governments. The article also highlights the need to incorporate climate risks and population ageing into health planning. The candidates' proposals offer different approaches, but leave important questions unresolved. President Luiz Inácio Lula da Silva's programme emphasizes investment through the Growth Acceleration Programme (PAC), expansion of primary-care teams and the continuation of the "Agora Tem Especialistas" initiative to reduce waiting lists, including partnerships with private hospitals. Senator Flávio Bolsonaro proposes adjusting the SUS payment schedule and expanding access to private-sector capacity through a "Brazil Without Queues" programme, but the funding and implementation details remain unclear. According to the experts interviewed, neither programme adequately resolves the long-term financing challenge or establishes durable regional governance. The next administration will also face pressure to respond to gambling-related mental-health problems, as SUS appointments for these conditions increased 140% between 2018 and 2025, reaching 6,157 in 2025. Read more.

ENDING THE CONSTITUTIONAL HEALTH-SPENDING LINK COULD CUT SPENDING BY R$30 BILLION A YEAR

Ending the constitutional requirement that links federal health spending to government revenue could reduce public health expenditure by an average of R$30 billion a year, according to estimates reported by Valor Econômico. The proposal is associated with a fiscal adjustment approach being discussed by the economic team of presidential candidate Flávio Bolsonaro. Under the alternative mechanism, federal health spending would be adjusted for inflation rather than continue to follow the current revenue-linked formula. The idea raises questions about the future financing of the Unified Health System (SUS), particularly its ability to respond to rising demand for consultations, procedures and medicines. However, the measure should not be described as an official campaign commitment: the report says Bolsonaro's team stated that the proposal was not part of his published government programme. The R$30 billion figure is an estimated impact of the potential change, not an approved reduction in spending. Any reform would need to address the balance between fiscal flexibility and the constitutional safeguards underpinning public healthcare funding. Read more.

PUBLIC AND PRIVATE INTENSIVE-CARE UNITS SHOW A MAJOR GAP IN BRAZIL

A report describes significant differences between public and private intensive-care units in Brazil, reflecting unequal access to infrastructure, staffing and resources. ICU capacity is critical for patients with severe or unstable conditions, and differences in availability can influence waiting times, transfer decisions and the ability to deliver specialized care. Reducing the gap requires reliable data on beds and staffing, regional planning and investment in the public network, alongside effective regulation of patient transfers. The comparison also underscores that the number of beds alone does not capture quality: outcomes depend on trained teams,

equipment, infection control and the availability of diagnostic and therapeutic support. The disparity is a broader challenge for equity across the health system. Read more.

DRUGMAKERS OPPOSE EMS PROPOSAL TO RAISE IMPORT TARIFFS ON WEIGHT-LOSS INJECTIONS

EMS has proposed increasing the import duty on competing injectable weight-loss medicines from 7.2% to 15%, a rise of 108% in the tariff rate. At least nine industry associations and five companies have opposed the proposal in submissions to Brazil's Foreign Trade Chamber (Camex), arguing that the measure could weaken competition, limit supply and increase costs without a demonstrated benefit to domestic production. EMS says the temporary tariff increase would support local manufacturing after investing more than R$1 billion in production capacity and technology. The dispute follows the expiry of semaglutide's patent in March 2026, which opened the Brazilian market to additional competitors. The decision could affect market entry, pricing and access to GLP-1 medicines, making the balance between industrial policy and competition central to the debate. Read more.

BRAZILIANS KNOW OZEMPIC BETTER THAN THE GLOBAL AVERAGE AND OFTEN GET INFORMATION FROM SOCIAL MEDIA

A global Ipsos survey across 32 countries found that 74% of Brazilians had heard of GLP-1 medicines such as Ozempic, Wegovy and Mounjaro, compared with a global average of 50%. Among Brazilians familiar with these products, 61% said they obtained information through social media, while only 14% reported receiving information directly from healthcare professionals. The findings raise concerns about self-medication, off-label or purely cosmetic use and reliance on influencers rather than clinical assessment. GLP-1 medicines can have adverse effects and are not suitable for everyone; safe use requires an individualized prescription and monitoring. The same survey found that 41% of Brazilians viewed insufficient investment in prevention as a major health-system problem and 76% considered waiting times for consultations or tests too long. Read more.

DRUG DISTRIBUTORS SEEK TALKS ON REMUNERATION AND TAX REFORM

Pharmaceutical distributors are calling for dialogue with manufacturers, pharmacies and public authorities to revisit remuneration models and the effects of Brazil's tax reform. The discussion reflects pressure across the distribution chain, where operating costs, commercial terms and changes in tax treatment can affect the economics of supplying medicines. The issue is relevant to the pharmaceutical market because distributors connect manufacturers to pharmacies and healthcare providers, while changes in margins or tax rules may affect service levels and prices. Any revised model will need to account for the financial sustainability of distribution, the impact on smaller businesses and the continuity of medicine supply. Read more.

SUS BEGINS OFFERING NINE CANCER MEDICINES UNDER A NEW POLICY

Brazil's Ministry of Health has begun making nine cancer medicines available through the Unified Health System (SUS), covering 13 treatment indications and an estimated 116,000 patients. The medicines address several tumour types, including breast, stomach, kidney, prostate, lung and thyroid cancers. The initial group includes abemaciclib, trastuzumab, rituximab and gefitinib, with distribution planned through 21 cancer-treatment centres in 17 states. The initiative is part of the Oncology Pharmaceutical Assistance Component (AF-Onco), designed to improve the organization and financing of cancer-drug supply. The Ministry aims to make 23 new treatments available by the end of 2026 and has earmarked R$3.9 billion for a redesigned purchasing model in 2027, subject to budget approval. Implementation and procurement will determine whether the new framework reduces delays between treatment decisions and access. Read more.

PROSTATE CANCER CAUSED MORE THAN 11,000 DEATHS IN BRAZIL IN 2026

Brazil recorded 11,257 deaths from prostate cancer in 2026, equivalent to approximately 46 deaths per day, according to mortality data cited by CNN Brasil. The Southeast accounted for

more than 42% of recorded deaths, followed by the Northeast with 27%. The figures renewed attention to early diagnosis and the barriers that prevent men from seeking assessment. Prostate cancer can develop without symptoms in its early stages, and symptoms that appear later may overlap with benign conditions. Clinical assessment can include prostate-specific antigen (PSA) testing and a rectal examination, with biopsy used to confirm diagnosis when indicated. The article highlights the importance of timely medical evaluation and awareness, particularly among older men and those with a family history of the disease. Read more.

FEWER THAN 15% OF WOMEN DIAGNOSED WITH BREAST CANCER BEFORE AGE 40 ARE FOUND AT THE EARLIEST STAGES

The reported data indicate that fewer than 15% of women diagnosed with breast cancer by age 39 are identified in the earliest stages. The finding highlights a challenge in younger patients, for whom symptoms may be overlooked and routine screening recommendations differ from those for older age groups. Earlier diagnosis depends on awareness of symptoms, timely clinical assessment, appropriate imaging and evaluation of family history or inherited risk. The figures also reinforce the importance of reducing delays between an initial concern and diagnostic confirmation. Because breast cancer in younger women may have different clinical and genetic characteristics, care pathways should ensure that age does not become a barrier to investigating suspicious findings. Read more.

MENOPAUSE: PHYSICIANS SAY FEAR OF HORMONE THERAPY MAY EXCEED THE RISKS FOR SOME PATIENTS

Physicians say that fear of menopausal hormone therapy has persisted despite later research refining the risks identified in an influential study published around the turn of the century. In the United States, the FDA has removed the most prominent boxed warnings from certain hormone-therapy labels, a move that Brazilian specialists say may help improve understanding of treatment options. The therapy can relieve symptoms such as hot flashes, night sweats and vaginal discomfort, but it is not appropriate for every woman and should not be treated as risk-free. Individual assessment must consider age, time since menopause, medical history and contraindications, including a history of breast cancer. The central message is to balance benefits and risks with a clinician rather than avoid treatment solely because of generalized fear or use hormones for unsupported purposes. Read more.

BRAZIL'S CLINICAL-TRIAL COSTS ARE UP TO 69% LOWER THAN IN THE UNITED STATES

A study by IQVIA for Interfarma estimates that clinical research in Brazil can be substantially less expensive than in the United States. The largest reported difference is for an infectious-disease study, with a relative cost 69.3% lower in Brazil. The analysis also found cost advantages in selected neurological and oncology studies and estimated annualized investments of approximately R$1.5 billion from eight multinational pharmaceutical companies. Brazil's attractiveness is also reflected in Anvisa data: 329 of 352 clinical-trial applications submitted in 2025 involved international cooperation. Cost competitiveness alone, however, does not guarantee more trials. Predictable regulation, research-site capacity, trained investigators, faster start-up and broader geographic distribution remain important to attract investment and expand patient access to clinical research. Read more.

ANVISA TIGHTENS RULES FOR POLYLAMININ USE AFTER REPORTS OF EIGHT DEATHS

Anvisa has restricted the inclusion of patients in compassionate-use programmes involving polylaminin after reporting eight deaths associated with its use since January 2026. The protein is being investigated for potential use in acute spinal-cord injuries, but it has not received full marketing authorization. The agency said some uses occurred outside the conditions and eligibility criteria established for the programme. The regulator's decision reinforces the distinction between experimental access and established treatment. Anvisa cited the need for evidence supporting the benefit-risk balance and noted that the approved clinical study was at

an early stage. The case highlights the challenges of balancing urgent patient demand and court-ordered access with the safeguards required for investigational therapies. Read more.

ANVISA REPORTS RECORD REVIEW OUTPUT AND CLEARS THE RADIOPHARMACEUTICAL BACKLOG

Anvisa reported its highest historical output in reviewing applications for synthetic medicines, biological products and radiopharmaceuticals during the first ten months of 2026. The agency completed 405 applications for synthetic-drug registration between January and October, exceeding the 399 completed in all of 2018 and nearly doubling the 204 concluded in 2025. It also reported that the radiopharmaceutical backlog had been eliminated. The agency said it completed 84 applications for biological medicines and radiopharmaceuticals in the first ten months of 2026, above the total for any full year since 2017. The improvement may reduce regulatory waiting times and increase predictability for companies, although sustained progress will depend on staffing, process management and technology upgrades as new applications continue to arrive. Read more.

FDA PROPOSES A NEW REVIEW MODEL FOR RARE-DISEASE MEDICINES

The U.S. Food and Drug Administration (FDA) has proposed adapting drug-development and review methods to the particular challenges of rare diseases, where small patient populations can make conventional clinical trials difficult to conduct. The initiative seeks to encourage patient participation and the use of scientific and statistical methods suited to limited evidence, while retaining safety and efficacy standards. The discussion is relevant to Brazil as the Brazilian Health Regulatory Agency (Anvisa) is also reviewing its rules for medicines intended for rare diseases. More flexible approaches, including adaptive trial designs and real-world evidence where appropriate, could help address evidence gaps, but regulatory decisions will still need clear standards and continued monitoring of safety and effectiveness after approval. Read more.

LONG-ACTING HIV-PREVENTION INJECTION SET AT UP TO R$20,900 IN BRAZIL

The maximum consumer price for lenacapavir, a long-acting injectable medicine for HIV prevention, has been set at R$20,900 per injection in Brazil. The injection is administered every six months, and the price decision by the Drug Market Regulation Chamber (CMED) marks a step toward commercial availability following Anvisa's authorization for preventive use earlier in 2026. The price ceiling does not by itself guarantee immediate availability: the manufacturer still needs to make an offer to supply the Brazilian market. Public-sector access would require a separate assessment by the National Commission for the Incorporation of Technologies into the SUS (Conitec). The medicine's long dosing interval could offer a new prevention option, but affordability, procurement terms and implementation will be decisive for broader access. Read more.

BAYER EXECUTIVE DISCUSSES BRAZIL AS A HUB FOR CLINICAL STUDIES AND PHARMACEUTICAL BUSINESS

Augusto Vieira of Bayer discusses Brazil's potential to serve as a hub for clinical research and pharmaceutical business. The country offers a large and diverse patient population, established research institutions and opportunities to recruit participants for studies across several therapeutic areas. Its role in multinational development programmes can also support local expertise and collaboration between companies, hospitals and investigators. Realizing this potential requires predictable review timelines, adequate research infrastructure, trained teams and efficient contracting and ethics processes. Recent debate over clinical-trial costs and regulatory capacity suggests that Brazil has competitive advantages, but it must continue improving the conditions needed to turn interest into sustained investment. Inclusion in global studies can bring scientific and economic benefits while expanding opportunities for eligible patients. Read more.

PFIZER OFFERS A 43.5% DISCOUNT TO SUPPORT GROWTH-HORMONE MEDICINE COVERAGE

Pfizer has offered a 43.5% discount on somatrogon, a growth-hormone treatment for children and adolescents with growth-hormone deficiency, in an effort to reverse a preliminary recommendation against adding the medicine to the National Supplementary Health Agency's (ANS) coverage list. The proposal was presented during a public hearing and submitted to the agency for consideration. Pfizer estimates that the revised price and economic assumptions would reduce the five-year budget impact to R$172 million. ANS's preliminary analysis used a higher estimate, and the agency had not yet assessed the company's updated calculations when the report was published. The case illustrates how price concessions and budget-impact assumptions can influence health-technology assessment and decisions on mandatory private-plan coverage. Read more.

BOEHRINGER INGELHEIM INCLUDES BRAZIL IN GLOBAL PHASE 3 OBESITY-DRUG STRATEGY

Boehringer Ingelheim has included Brazil in its global clinical-development strategy for an obesity medicine in Phase 3 trials. The move places Brazilian research centres and patients within a late-stage development programme for a therapeutic area attracting substantial investment from pharmaceutical companies. Participation in international trials can bring research opportunities, specialist training and earlier access to investigational treatments for eligible participants. The broader impact will depend on trial design, site selection, recruitment and the eventual clinical results. Phase 3 status means the medicine is still under investigation and should not be interpreted as evidence of approval or confirmed effectiveness in routine care. Read more.

GENERIC MEDICINES AND PHARMACIES LOSE MOMENTUM IN SEPTEMBER

Brazil's pharmaceutical retail market grew 3.7% year on year in September 2026, slowing from 5.7% in August, according to a BTG Pactual sector report based on sell-out data compiled by IQVIA and released by Sindusfarma. Generic medicines also decelerated, with growth falling to 3.4% in September from 4.4% in August and 10.5% in July. Despite the slowdown, sales remained positive over the first nine months of the year: the total market grew 9.6%, while generics advanced 10.4%. The report also identifies GLP-1 medicines as a meaningful revenue driver for listed pharmacy chains. The figures suggest that retailers are still expanding, but at a slower pace, with category mix and weight-loss treatments influencing performance. Read more.

MERCADO LIVRE AND IFOOD INCREASE COMPETITION IN THE PHARMACEUTICAL RETAIL MARKET

Digital platforms Mercado Livre and iFood are expanding their role in the pharmaceutical retail market, intensifying competition for established pharmacy chains and online drugstores. Their participation reflects the growing importance of digital discovery, delivery and convenience in the way consumers obtain medicines and health-related products. For pharmacies and manufacturers, platform competition creates opportunities to reach consumers but also increases pressure on pricing, fulfilment and customer experience. The commercial impact will depend on the products offered, applicable rules for medicine sales, partnerships with licensed retailers and the ability to protect patient safety while meeting expectations for fast delivery. Read more.

BEFORE REGULATING, BRAZIL MUST DECIDE WHETHER SUPPLEMENTARY HEALTHCARE SHOULD EXPAND, SAYS ANAHP'S ANTÔNIO BRITTO

Antônio Britto, executive director of the National Association of Private Hospitals (Anahp), argues that policymakers and the sector should first agree on whether private health coverage is expected to expand before designing further regulation. He points to a long period of stagnation in overall coverage and says the sector needs to establish clear goals for bringing more people into supplementary healthcare. Prevention is another concern: Anahp data cited

in the discussion indicate that operators spent 0.26% of revenue on prevention programmes in the second quarter of 2026. Britto says short enrolment cycles can discourage investment because beneficiaries may change plans before preventive spending produces returns. The debate raises questions about incentives, market structure and the balance between consumer protection and wider access. Read more.

CO-PAYMENTS IN HEALTH PLANS EXPAND AS ANS REVIEWS RULES DATING FROM 1998

In 2025, 71.1% of beneficiaries in employer-sponsored group health plans had contracts involving co-payments, deductibles or both, up from 63.5% in 2020. The current framework is based on a 1998 rule that prohibits charges from severely restricting access but sets no clear percentage ceiling or annual out-of-pocket limit. ANS has established a technical working group to review the issue, but no timetable for a public consultation or new rule has been announced. A study by researchers at the Federal University of Minas Gerais examined approaches in nine countries and concluded that co-payments may encourage appropriate use but can also deter necessary care when poorly designed. Researchers advocate safeguards for people with chronic illnesses and other vulnerable groups, as well as advance transparency about charges. Health-plan operators oppose universal caps, arguing that additional restrictions could raise costs or reduce supply. Read more.

NEARLY 90% OF VIRAL HEALTH CONTENT IS FALSE, AGÊNCIA LUPA SAYS

A report attributed to fact-checking agency Agência Lupa says that nearly 90% of viral health-related content examined was false. The finding highlights the scale of misinformation circulating online about diseases, treatments, medicines and prevention, where emotionally compelling claims can spread faster than evidence-based corrections. Health misinformation can undermine vaccination, encourage unsafe self-medication and distort decisions about treatment. Public agencies, healthcare professionals, media organizations and digital platforms all have roles in strengthening health literacy and making reliable information easier to find. The reported proportion should be understood in the context of the content sample and methodology used, rather than as a claim that 90% of all health information on the internet is false. Read more.

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MORE HIGHLIGHTS

ANS proposes guidance for health-plan treatment of autistic people

Court orders federal coverage of an Alzheimer's medicine

Health plan must provide a child with a medicine outside the ANS list

Court orders home care for a patient with ALS

Court orders health plan to cover an oral cancer drug approved in the US

Mammography requests increased 24.7% between 2022 and 2026

Anvisa orders seizure of counterfeit botulinum toxin

Federal Police target illegal medicine trade and block R$35 million

Anvisa recognizes technical standards for medical devices

Anvisa approves targeted therapy for advanced lung cancer

Ministry of Health approves protocol to treat children with hemophilia A

BRAZIL NEWS

Brazil election live: Lula and Bolsonaro face off in presidential runoff

Lula, Bolsonaro rally supporters on final day before Brazil presidential runoff

Bolsonaro, Lula about even in polls for Brazil runoff vote

Bolsonaro and Lula clash on living costs, corruption in final Brazil election debate

With his first smartphone, Lula seeks to catch up to Brazil's online generation

For Flavio Bolsonaro, runoff vote tests Brazilians' appetite for family's political brand

For Lula, Brazil's sovereignty is at stake in final election

Foreign diplomats in Brazil discuss quick recognition of runoff winner

Brazil mid-month inflation undershoots forecasts ahead of presidential runoff

Brazil central bank looks to encourage responsible lending in consumer debt crackdown, sources say

Brazil may offer credit lines to ease impact of tax, labor reforms, minister says

China's BYD plans to double capacity at Brazilian plant

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