WEEKLY REPORT

10/31/2026

LULA'S RE-ELECTION AND THE OUTLOOK FOR BRAZIL'S HEALTHCARE SECTOR

Re-elected on Sunday, October 25, with 51.79% of valid votes, President Luiz Inácio Lula da Silva will begin his fourth term on January 5, 2027. The next administration will face fiscal constraints, a complex relationship with the National Congress and growing demands on the healthcare system. Against this backdrop, **NK Consultores** has prepared "What to expect from the new Lula administration: Health", an analysis that examines the broader challenges facing the next government, including the economy and public budget, governability, public security, foreign relations and political succession, before focusing on the outlook for health policy. The study covers 22 policy areas, including SUS financing, waiting lists, oncology, women's health, rare diseases, health technology assessment and private health insurance. The analysis also provides links to the sources consulted. Access full report – What to Expect from the new Lula Administration.

LULA'S FOURTH TERM: CONTINUITY, BUDGET PRESSURES AND MAJOR CHALLENGES FOR BRAZIL'S HEALTHCARE SYSTEM

Brazil's fourth Lula administration is expected to maintain continuity in health policy. According to a report by Futuro da Saúde, the expectation is that the Ministry of Health will remain under Padilha's leadership, allowing the government to continue projects launched over the past four years. The agenda for 2027–2030 will combine the consolidation of existing initiatives with pressure to expand access, improve the efficiency of the public health system and address long-standing funding constraints. Among the main priorities are reducing waiting lists for consultations, examinations and surgeries, strengthening cancer diagnosis and treatment, expanding specialized care and adapting the healthcare network to an ageing population. Financing will be one of the central challenges. According to Saúde Insider, the 2027 budget proposal allocates R$272.18 billion to public health services, only R$20 million above the estimated constitutional minimum. The publication also highlights the Ministry of Health's dependence on parliamentary amendments, which accounted for 43.45% of its discretionary spending in 2025, as well as the challenge of ensuring predictable funding for the SUS. Another major issue is the reform of the SUS reimbursement model: Padilha has signaled his intention to replace the traditional SUS payment table, which hospitals and philanthropic institutions consider outdated and insufficient. The expansion of cancer care is also expected to remain prominent, with the implementation of the National Policy for Cancer Prevention and Control, the AF-Onco initiative and efforts to accelerate access to incorporated technologies. The government will also face decisions on high-cost medicines, including GLP-1 drugs for obesity, whose potential incorporation into the SUS will depend on price negotiations, clinical evidence and budget impact. These priorities and demands from different healthcare stakeholders were also highlighted in the Futuro da Saúde report. For the pharmaceutical and medical technology industries, priorities include greater predictability in technology assessment and pricing, transparent procedures for confidential discounts and stronger institutional capacity at Anvisa, the National Supplementary Health Agency (ANS) and the National Institute of Industrial Property (INPI). Other challenges include strengthening the domestic production of medicines and medical supplies, expanding mental healthcare, addressing workforce shortages and preparing the system for the growing demand associated with ageing and chronic diseases. These issues are among the ten major challenges identified by Saúde Insider for Lula's fourth term.

ANVISA DECISIONS OUTPACE NEW DRUG REGISTRATION APPLICATIONS IN 2026

Brazil's Health Regulatory Agency (Anvisa) has made reducing medicine registration backlogs its main strategic priority for 2026, describing the effort as a "year of war" against waiting lists. Data released by the agency show that, between January and October, decisions outnumbered new applications in key categories. For synthetic medicines, Anvisa processed 405 applications against 289 new submissions, while biological medicines and radiopharmaceuticals recorded 84 decisions and 56 new applications. The agency also reported that the radiopharmaceutical backlog had been eliminated. The results reflect a concentrated effort involving changes to internal workflows and a voluntary initiative known as Missão Registro, which mobilizes agency staff to review pending applications. In September, the average time for an application to leave the backlog was 102 days, and 93% of decisions were issued within one year. Anvisa aims to meet its backlog-reduction targets by December and will undergo a World Health Organization audit by March 2027, as part of its efforts to strengthen its international regulatory standing. Persistent constraints include staff shortages, manual processes and budget limitations. Read more.

ANVISA IS ACCELERATING REGULATORY PROCESSES TO KEEP PACE WITH HEALTHCARE INNOVATION, SAYS DIRECTOR

Anvisa director Daniela Marreco says the agency is accelerating its regulatory processes to keep pace with innovation in medicines, biological products and advanced therapies, while maintaining patient safety. In an interview with Futuro da Saúde, she said Anvisa had already surpassed, in October 2026, its previous record for decisions on synthetic medicine registration applications, set in 2018. The improvement followed changes to review procedures, closer dialogue with companies and the adoption of technologies such as artificial intelligence. The agency has also hired 99 new employees, although staffing shortages remain a challenge. Marreco highlighted regulatory sandboxes as a potential tool to test innovative products and business models under controlled conditions. Anvisa has already begun an initiative involving personalized cosmetics and is developing a proposal related to patient associations working with cannabis. The agency is also considering the model for smart hospitals. Looking ahead to 2027, priorities include maintaining the pace of regulatory reviews, revising rules for biological products and biosimilars, discussing digital package leaflets and expanding the use of artificial intelligence. A public consultation on new rules for medicines intended for rare diseases is expected by the first quarter of 2027. Read more.

BRAZIL HAS THE POTENTIAL TO BECOME A CLINICAL RESEARCH HUB, BUT NEEDS TO SCALE UP

Brazil is gaining ground in the global clinical research landscape, supported by a more favorable regulatory environment, greater legal certainty and a population with significant ethnic and demographic diversity. Regulatory changes have helped reduce the time required to approve clinical studies, addressing a longstanding obstacle to attracting international research projects. According to Fernando de Rezende, executive director of the Brazilian Association of Clinical Research Organizations (Abracro), the country's installed capacity, workforce, pharmaceutical market and economic scale could place it among the world's ten leading destinations for clinical research. Reaching that position, however, will require expanding the number of research centers and strengthening the sector beyond Brazil's South and Southeast regions. The challenge is not limited to regulatory improvements: the country also needs to increase its capacity to conduct studies, train professionals and distribute research infrastructure more evenly. Scaling up clinical research could attract more international investment, strengthen the domestic innovation ecosystem and expand Brazilian patients' access to clinical studies and new therapies. Read more.

INAEP OPENS TWO PUBLIC CONSULTATIONS TO IMPROVE ETHICAL RULES FOR RESEARCH INVOLVING HUMAN PARTICIPANTS

Brazil's National Research Ethics Authority (Inaep), linked to the Ministry of Health, has opened two public consultations to update the rules governing ethical reviews of research involving human participants. The proposals are part of the implementation of the National System for Ethics in Research Involving Human Participants (Sinep) and address the classification of research risks, the processing of study protocols and amendments, and administrative appeals. The initiative seeks to improve the system's procedures while safeguarding participants' rights, dignity, safety and well-being. One consultation proposes classifying studies into three risk levels (low, moderate and high) with review procedures proportionate to each study's characteristics and potential risks. The classification would not automatically authorize research or replace ethical review. Contributions to this consultation can be submitted through the Brasil Participativo platform until December 26, 2026. The second consultation concerns the administrative appeals process, another component of the effort to establish clearer and more efficient procedures for the national research ethics system. Read more.

AMID DEBATE OVER POLYLAMININ, PHARMACEUTICAL INDUSTRY WARNS AGAINST EXPANDING ACCESS WITHOUT EVIDENCE

Nine pharmaceutical industry associations have expressed support for the Brazilian Health Regulatory Agency's (Anvisa) technical approach to evaluating access to experimental medicines, amid controversy over restrictions on the compassionate use of polylaminin, an experimental substance being studied for spinal cord injuries. The agency has limited authorizations to patients meeting the criteria of the ongoing Phase I clinical trial: complete thoracic spinal cord injuries between T2 and T10, sustained less than 72 hours earlier, with a surgical indication. Previously, compassionate use could be authorized for patients with other types of spinal cord injuries, including those occurring longer ago. Anvisa said reliable safety data are still unavailable and that the Phase I study, authorized in January, had not yet started. The manufacturer, Cristália, said it was waiting to identify eligible participants. The debate intensified after reports of nine deaths among patients who received the substance through compassionate use. Anvisa counted 119 administrations, while Cristália reported 111 and said it had found no causal relationship between the deaths and the product. The associations emphasized that the occurrence of deaths does not establish causation, but argued that experimental therapies must be assessed through rigorous clinical development. Read more.

GOVERNMENT PUBLISHES NEW CLINICAL PROTOCOLS FOR CANCER TREATMENT IN THE SUS

Brazil's Ministry of Health has published 16 new Clinical Protocols and Therapeutic Guidelines (PCDTs) for cancer treatment within the Unified Health System (SUS), covering several types of cancer, including breast cancer, multiple myeloma, Hodgkin lymphoma, head and neck squamous cell carcinoma, esophageal carcinoma, differentiated thyroid cancer, ovarian cancer, prostate adenocarcinoma, cutaneous melanoma and stomach adenocarcinoma. The documents establish evidence-based criteria for diagnosis, treatment and patient follow-up, helping standardize care and guide the use of technologies available in the public health system. The publication is part of the implementation of the National Policy for Cancer Prevention and Control, established by Law No. 14,758/2023, which made PCDTs the main reference for oncology care. The new regulations also include Brazilian guidelines for colorectal cancer screening and the second part of the cervical cancer screening guidelines, addressing the assessment, treatment and follow-up of women with abnormalities detected through screening. The update follows public consultations conducted by the National Commission for the Incorporation of Technologies into the SUS (Conitec) in August, when proposals for 12 oncology protocols were submitted for public contributions. Read more.

"WE WANT ORAL MEDICINES INCLUDED IN PRIVATE HEALTH INSURANCE COVERAGE," SAYS BRAZILIAN SOCIETY OF RHEUMATOLOGY PRESIDENT

Valderílio Azevedo, the newly elected president of the Brazilian Society of Rheumatology (SBR), has identified the inclusion of targeted oral medicines in private health insurance coverage as a key priority for his term. He points to rheumatoid arthritis as an example of the gap between public and private healthcare: the SUS provides access to eight biological medicines, including three targeted molecules, in addition to conventional treatments, while patients covered by private plans still face barriers to accessing certain oral targeted therapies. The SBR plans to discuss the issue with the National Supplementary Health Agency (ANS), through its Public Policy Committee, and work with other medical organizations and government bodies to promote regulatory improvements. Azevedo argues that expanding coverage should improve equity without undermining the financial sustainability of the supplementary health system, which includes more than 600 operators. He also highlights the potential of biosimilars to reduce treatment costs and strengthen the sustainability of healthcare systems. Although Brazil has made significant progress in incorporating these medicines, he believes further action is needed to increase confidence among physicians and patients. According to the SBR president, some biosimilars incorporated into the public system can cost two to three times less than in the private sector, reflecting the SUS's greater purchasing scale and centralized negotiations. He advocates exploring ways to extend the benefits of these purchasing conditions to private healthcare. Read more.

COURTS LAUNCH TASK FORCE TO SEEK SETTLEMENTS IN MORE THAN 5,000 LAWSUITS AGAINST HEALTH INSURERS

Brazil's National Council of Justice (CNJ) will coordinate a nationwide task force from November 9 to 13 to promote settlements in more than 5,000 lawsuits involving private health insurance providers. The initiative is expected to include over 3,200 conciliation hearings and comes amid a growing judicial backlog: approximately 221,000 supplementary healthcare cases were awaiting a court ruling as of September 2026. The effort follows an agreement signed in June with major insurers, including SulAmérica, Hapvida, Amil and Unimed do Brasil, as well as the Brazilian Association of Health Plans (Abramge) and the National Federation of Supplementary Health (FenaSaúde). The cases selected for negotiation involve coverage authorizations for procedures and tests, medicines, reimbursements, waiting periods, contract cancellations and annual or age-related premium increases. The initiative reflects the growing pressure of litigation on the private healthcare sector. In the first half of 2026, new lawsuits involving health insurance providers exceeded those related to the public health system for the first time: more than 181,000 cases compared with 164,000. According to the CNJ, 43% of supplementary healthcare lawsuits concern requests for medical or hospital treatments, while medicine-related claims account for 15%. The council reported 22,200 conciliation hearings and more than 7,400 approved settlements in the sector through September. Read more.

TELEHEALTH EXPANDS ACROSS THE SUS, REACHING 63 CENTERS

Brazil's Unified Health System (SUS) has expanded its telehealth network from 13 centers in 2022 to 63 in 2026, a 384.6% increase, with coverage now extending to all 27 states and the Federal District. More than 12 million telehealth procedures were recorded between January 2025 and October 2026, supporting primary and specialized care, clinical decision-making and referrals. The Ministry of Health says the expansion is intended to bring specialized knowledge closer to patients and improve continuity of care, particularly in regions with limited access to healthcare services. Funding for telehealth centers and service points reached R$172.3 million in 2026. The Ministry also reported growth in remote diagnostics and specialized teleconsultations, reinforcing digital health as a central component of its strategy to expand access to care. Read more.

HEALTH MINISTRY EXPANDS PARTNERSHIPS WITH LEADING HOSPITALS, WITH R$3.95 BILLION ALLOCATED TO PROADI-SUS

Brazil's Ministry of Health has announced R$3.95 billion in tax-exempt resources for projects under the next three-year cycle of the Institutional Development Support Program of the SUS (Proadi-SUS), covering 2027–2029. The program brings together seven leading private nonprofit hospitals to support the public health system through projects in digital health, artificial intelligence, transplants, high-complexity care, research and hospital modernization. The new allocation represents an 18.6% increase compared with the previous cycle. The participating institutions are Hospital Israelita Albert Einstein, Hospital Sírio-Libanês, Beneficência Portuguesa de São Paulo, Hcor, Hospital Moinhos de Vento, Hospital Alemão Oswaldo Cruz and A.C.Camargo Cancer Center. Digital transformation and climate adaptation are among the main priorities for the new cycle. Projects will include the development of smart hospitals, greater connectivity between medical equipment, artificial intelligence applications and telehealth services, as well as investments to help healthcare facilities in vulnerable areas adapt to climate-related risks. Albert Einstein accounts for 41 projects, with an estimated R$1.68 billion in resources, including a clinical intelligence platform supported by R$300 million in financing approved by Finep. Since its creation, Proadi-SUS has directly benefited more than 11 million people in over 5,500 municipalities and trained more than 750,000 healthcare professionals. Read more.

BRAZIL ESTABLISHES NATIONAL POLICY ON INFORMATION AND DIGITAL HEALTH, CONSOLIDATING THE SUS DIGITAL TRANSFORMATION

Brazil has formally established its National Policy on Information and Digital Health (PNISD), through Ministry of Health Ordinance No. 12,301, dated October 27, 2026. The policy provides a national framework to guide and sustain the digital transformation of the Unified Health System (SUS), establishing principles, guidelines and responsibilities for the use of technology and health information. Its main priorities include placing patients at the center of care, reducing inequalities, protecting personal data, strengthening digital sovereignty and promoting the safe and responsible use of emerging technologies. The policy consolidates the National Health Data Network (RNDS) as the interoperability platform for the SUS data ecosystem and establishes the Brazilian individual taxpayer registry number (CPF) as the preferred identifier for users across health information systems. It also reinforces telehealth and digital infrastructure nationwide. The policy was approved unanimously by the National Health Council in August and subsequently negotiated within the Tripartite Inter-Management Commission, which brings together federal, state and municipal health authorities. Within 180 days of publication, the government is expected to agree on an implementation action plan. Read more.

MINISTER OF HEALTH SEEKS UNICAMP PROFESSORS TO DEVELOP A MENOPAUSE CARE PROGRAM FOR THE SUS

Health Minister Alexandre Padilha has invited professors from the University of Campinas (Unicamp), particularly specialists at its Center for Integral Attention to Women's Health (CAISM), to help develop a new public healthcare program for women going through the menopausal transition and menopause. The initiative aims to improve access to medicines, treatments and healthcare practices within the Unified Health System (SUS). Padilha said the university center was selected because of its previous contributions to public health policies, including initiatives in maternal and child care and the implementation of improved cervical cancer screening and HPV detection techniques. The proposed program is expected to consider expanding access to bone densitometry, an examination used to monitor bone health and prevent fractures among women during this stage of life. Padilha also discussed the possibility of replicating Unicamp's clinical radiopharmacy model in other regions, particularly in the North, Northeast and Central-West, where facilities capable of preparing radiopharmaceuticals remain scarce. During the visit, he also saw the university hospital's SPECT/CT equipment, an R$8.6 million system using artificial intelligence to produce high-quality 3D images. The hospital is reportedly the first public institution in Latin America to have this technology. Read more.

MENOPAUSE-RELATED CARE INCREASES IN THE SUS, BUT ACCESS TO HORMONE THERAPY REMAINS LIMITED

The number of healthcare visits related to menopause and the menopausal transition in Brazil's Unified Health System (SUS) has increased significantly, rising from 803,000 in 2023 to 2.2 million in the first eight months of 2026, according to the Ministry of Health. However, the figures refer to medical appointments rather than individual women treated, meaning that repeated visits by the same patient may be counted more than once. Brazil has approximately 33.5 million women aged 40 to 64, a population that includes a large share of those experiencing the menopausal transition and early post-menopause. Despite the increase in consultations, access to hormone replacement therapy remains uneven across the public health system. The SUS provides vaginal estriol cream, which can help treat genitourinary symptoms such as vaginal dryness, but this treatment does not replace systemic hormone therapy used to address hot flashes and night sweats. Other hormonal medicines may be offered by states and municipalities using their own resources, resulting in significant regional differences in availability. Women with similar symptoms and clinical indications may therefore have access to different treatment options depending on where they live. The figures highlight the need to strengthen public policies for menopause care, including more consistent access to specialized services and appropriate therapies. Read more.

LULA'S PROMISE TO OLDER BRAZILIANS FACES SLOW PROGRESS IN NATIONAL CARE POLICY

President Luiz Inácio Lula da Silva has pledged to prioritize care for older people in his next term, but the implementation of Brazil's National Care Policy remains slow. Established in December 2024, the policy was followed by the Brazil Cares Plan, launched a year later with 79 actions across five areas and an estimated R$25 billion in investments for 2025–2027. The challenge is significant: Brazil has 36.6 million people aged 60 or older, representing 17.1% of the population, and studies indicate that 30% to 35% of older adults need assistance with daily activities. Experts estimate that more than 10 million people require some form of support, while the country still lacks a coordinated public care network. Implementation depends heavily on voluntary participation by states and municipalities, and the policy does not earmark specific funding, leaving expenditure subject to the budgetary capacity of each level of government. The shortage of professional caregivers is another obstacle: the occupation remains unregulated, and only around 2% of the country's approximately 7,000 long-term care institutions for older people are public. Existing municipal initiatives, such as Belo Horizonte's Maior Cuidado program and São Paulo's Elderly Companion Program, offer examples of integrated care, but their reach remains limited. At the federal level, the Cuidado em Casa initiative is still a pilot, serving approximately 300 older people in each of three municipalities. Specialists argue that Brazil needs a structured system combining home-based care, support for family caregivers, day centers and long-term care facilities. Read more.

BNDES APPROVES R$298 MILLION FOR ALTHAIA TO DEVELOP 31 MEDICINES AND RESEARCH NEW MOLECULES

Brazil's National Bank for Economic and Social Development (BNDES) has approved R$298 million in financing for pharmaceutical company Althaia to develop new medicines and expand its research and development activities. Based in Atibaia, São Paulo state, the company will allocate the resources to two projects: research into new molecules and the development of 31 medicines for human use. Of the total amount, R$100 million will support radical innovation projects involving previously unexplored molecules and compounds, with research focused on potential treatments for obesity, metabolic disorders and neurodegenerative diseases, as well as formulations for gastrointestinal infections and digestive disorders. The remaining R$198 million will finance the development of 31 medicines, including 20 generic products not yet available on the Brazilian market and 11 products incorporating incremental innovations. The portfolio includes treatments for hypothyroidism, depression, attention-deficit/hyperactivity disorder (ADHD), prostate enlargement, menopause and epilepsy. The projects will also use

artificial intelligence to support the discovery and development of bioactive peptides for sarcopenia, a condition characterized by progressive loss of muscle mass and strength. The financing includes equipment for Althaia's Epicenter research facility, developed in partnership with the Brazilian Industrial Research and Innovation Company (Embrapii). The investment is part of BNDES Mais Inovação, a program designed to strengthen domestic pharmaceutical innovation and cooperation between industry and research institutions. Read more.

AS DIGITAL COMPETITION GROWS, DRUGSTORES POSITION THEMSELVES AS HEALTHCARE DESTINATIONS

Brazil's major pharmacy chains are expanding vaccination rooms and pharmacist-led consultation services to differentiate their physical stores from digital platforms and strengthen customer loyalty. Although these services still account for a small share of revenue, companies say they increase shopping frequency and customer spending. Members of the Brazilian Association of Pharmacies and Drugstores (Abrafarma) currently operate 9,248 pharmaceutical service rooms, and the sector's priority is increasingly to improve the use of existing infrastructure and integrate in-store services with digital sales channels. Online sales already represent a significant share of retail revenue at major chains, reaching 33.7% at Panvel, 31% at RD Saúde and 24.1% at Pague Menos in the second quarter. The business case is based largely on customer retention rather than direct service revenue. At Panvel, customers using its Panvel Clinic platform shop more than 3.5 times as frequently as other customers and spend four times more annually. At Pague Menos, users of pharmacist consultations purchase 2.4 times more frequently and spend 3.3 times more than the average customer. Vaccination is the fastest-growing service: the volume of doses administered through the Clinicarx platform increased 74% in the first half of the year, while RD Saúde administered 470,000 vaccines during the period. The strategy reflects an effort to turn physical pharmacies into healthcare access points that complement, rather than compete directly with, digital commerce.
Read more.

GLP-1 MARKET COMES UNDER PRESSURE AS AVERAGE PRICES FALL AND SEMAGLUTIDE SALES DROP 52%

Brazil's pharmaceutical industry recorded a further slowdown in September 2026, with sell-in revenue reaching R$13.2 billion, up 4% year-on-year, compared with growth of 6% in August and approximately 9.5% in June and July. Total sales volume declined 0.5%, indicating that revenue growth was entirely driven by higher prices rather than increased demand. The figures, compiled by XP Investimentos using data from Sindusfarma and IQVIA, also point to growing competitive pressure in the market for GLP-1 medicines used to treat obesity and type 2 diabetes. The semaglutide market proxy, which includes reference products such as Ozempic and Wegovy, fell 12% month-on-month and 52% year-on-year in September, reflecting declines in both prices and volume. By contrast, the tirzepatide proxy, associated with Mounjaro, reached R$840 million, down 6% from August but up 60% year-on-year. The expansion of lower-priced alternatives and promotional strategies is expected to put further pressure on average prices and margins. Read more.

WEIGHT-LOSS INJECTION LAUNCHED IN SEPTEMBER BECOMES HYPERA'S BEST-SELLING PRODUCT

Hypera Pharma's Semavy, an injectable semaglutide product launched in September, has quickly become the company's best-selling medicine by volume. The product sold approximately 93,000 to 94,000 units in its first month on the market, reaching more than 11% of Brazil's injectable semaglutide market and distribution in over 18,000 pharmacies. The company expects sales volume to nearly double in October. Semavy is marketed by Hypera's Mantecorp division and was developed through a partnership with India's Sun Pharma, which manufactures the medicine. Priced at approximately R$300, Semavy is positioned at around 66% below the price of the reference product, helping expand access and intensify competition in the GLP-1 segment. Hypera said the product had already been prescribed by more than 30,000 physicians, particularly endocrinologists and cardiologists. Read more.

JUDGE REJECTS LABORATORY TESTING OF MOUNJARO BROUGHT FROM PARAGUAY

A federal judge in Porto Alegre has rejected a request for laboratory testing of samples of tirzepatide and other medicines brought from Paraguay, in lawsuits challenging Brazil's restrictions on the importation of weight-loss injections from the neighboring country. The cases were filed by patient associations against the Brazilian Health Regulatory Agency (Anvisa) and the federal government, questioning the rules governing the importation of medicines such as Mounjaro. The plaintiffs had sought physicochemical testing to assess the quality and composition of the products. In rejecting the request, Federal Judge Bruno Risch Fagundes de Oliveira argued that testing isolated samples would not establish whether the products met broader sanitary requirements. The decision reinforces the distinction between laboratory analysis of individual units and the regulatory assessment required to ensure the safety, quality and traceability of medicines throughout the supply chain. The lawsuits reflect growing legal and regulatory disputes over access to GLP-1 medicines purchased abroad, particularly amid high domestic prices and increasing demand for treatments based on semaglutide and tirzepatide. Read more.

SPECIALISTS SUPPORT ACCESS TO OBESITY INJECTIONS THROUGH THE SUS AND HEALTH PLANS, BUT COST REMAINS A CHALLENGE

Specialists have called for broader access to modern obesity medicines, including semaglutide and tirzepatide, through Brazil's public health system (SUS) and private health insurance. The issue was discussed at the Estadão Summit Saúde, where endocrinologists highlighted that these medicines can deliver benefits beyond weight loss by improving conditions associated with obesity and type 2 diabetes. Despite their growing clinical relevance, the treatments are not currently covered by the SUS or included as a standard benefit under supplementary health insurance. The debate is increasingly focused on how to define eligible patients and establish sustainable access models. The high cost of treatment remains a major obstacle, particularly given the large number of Brazilians living with overweight and obesity and the need for long-term medical follow-up. Specialists argue that decisions on coverage should consider not only the price of medicines but also their potential to reduce complications, hospitalizations and other costs associated with obesity-related diseases. Any expansion of access would require clear clinical criteria, appropriate monitoring and an assessment of long-term outcomes. The discussion also raises questions about the financial impact on public budgets and private insurers, as well as the role of new competitors and lower-priced products in making treatment more affordable. Read more.

PRESCRIPTION MEDICINES GROW 17.5%, GENERATING R$149.7 BILLION IN BRAZIL

Brazil's prescription medicine market generated R$149.7 billion in retail sales in the 12 months through August 2026, representing a 17.5% increase compared with the same period a year earlier. The figures, compiled by Close-Up International, also show that sales volume reached 3.7 billion units, up 5.6%. The difference between revenue and volume growth reflects the combined impact of price increases and changes in the product mix. Similar medicines accounted for 42.3% of market value and 31.7% of units sold, while generics represented 55.1% of total units, maintaining their leading position by volume. Among product categories, medicines for diabetes and obesity recorded the strongest growth, with a 54.5% increase in value and a 14.4% rise in volume. Cardiovascular medicines grew 16.1% in value and 10.7% in units, while central nervous system medicines increased 16.8% and 8.4%, respectively. Reference medicines registered the strongest revenue growth among the three main categories, up 26.6%, while generics recorded a 20.7% increase in value and an 8.2% rise in volume. The data highlight the growing weight of chronic disease treatments, particularly diabetes and obesity therapies, in Brazil's pharmaceutical market. Read more.

MORE HIGHLIGHTS

Anvisa approves a new drug for the treatment of spinal muscular atrophy (SMA)

Anvisa approves five new GLP-1 weight-loss injections

Anvisa approves a new drug for lung cancer

Anvisa expands Gazyva's use to treat lupus after study reports a 76.7% clinical response rate

Anvisa approves extension of Implanon's duration of use from three to five years

Anvisa reassesses antimicrobial stewardship programs after identifying gaps in hospitals

Ministry of Health modernizes treatment and incorporates a new drug into the SUS for paroxysmal nocturnal hemoglobinuria

More than 15 million Brazilians are affected by rheumatic diseases

Retirement benefits for community health workers are projected to cost R$27.9 billion over ten years

Early detection test for cervical cancer now available in 26 Brazilian states

BRAZIL NEWS

Brazil's Lula wins historic fourth term, Flavio Bolsonaro refuses to concede

Bolsonaro refuses to concede, says he will seek annulment of Brazil vote

Lula hangs on, but his final term promises to be toughest yet

When buses stopped running on Brazil election day, 'Lula's Army' grabbed their car keys

Flavio Bolsonaro declares himself rightful president-elect of Brazil

Trump not planning to back Bolsonaro's claim to be Brazil's leader, sources say

Brazil summons Argentine diplomat over role in Bolsonaro's flight to US

Trump says Flávio Bolsonaro can stay in US as long as he wants

Flavio Bolsonaro says Brazil federal police asked for his passports

Five economic challenges facing Brazil's re-elected President Lula

Brazil finance minister signals more ambitious primary surplus for next year

Brazil stocks, real tumble as Lula win shifts investor focus

Brazil debt climbs to $1.8 trillion as interest costs surge