

## Article

**Supporting evidence-based judicial decisions on health care in Brazil: an experience report**

Apoio técnico-científico à tomada de decisão judicial em saúde no Brasil: um relato de experiência

Apoyo técnico-científico a la toma de decisiones judiciales en salud en Brasil: un relato de experiencia.

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**Abstract**

**Objective:** The main objective of this study is to report on the implementation and results of the “Supporting Health-Related Judicial Decisions in Brazil” project conducted at the Health Technology Assessment Center, Hospital Sírio-Libanês through the “Programa de Apoio ao Desenvolvimento Institucional do Sistema Único de Saúde”, in Brazil. **Methods:** This study is an experience report of a

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project conducted at the Health Technology Assessment Center, Hospital Sírio-Libanês. **Results:** The activities of the project occurred in 2023 and included two online training courses on primary studies and systematic reviews, 11 one-day workshops with technical-scientific content for members of the Technical Support Centers for the Judiciary (NATJus), 40 online technical-scientific consultations for magistrates on a digital platform, 11 technical-scientific reports addressing the most legally claimed technologies in Brazil; two methodological tools, a national forum (hybrid event), 10 chat-based mentorships for NATJus members; and the maintenance of an open-access blog, by publishing news on relevant topics on law and health. **Discussion and conclusion:** This project has contributed to the improvement of the judicial decision-making process by providing a range of activities aimed at aiding the prioritization of health technologies that are clearly effective and safe over those that are ineffective, harmful, or have uncertain effects.

**Keywords:** Evidence-Based Medicine; Technology Assessment Biomedical; Health's Judicialization; Use of Scientific Information for Health Decision Making.

## Resumo

**Objetivo:** O objetivo principal deste estudo é relatar a implementação e os resultados do projeto “Apoio técnico-científico à tomada de decisão judicial em Saúde no Brasil” realizado no Hospital Sírio-Libanês por meio do “Programa de Apoio ao Desenvolvimento Institucional do Sistema Único de Saúde”. **Métodos:** Este estudo é um relato de experiência de um projeto realizado no Núcleo de Avaliação de Tecnologias em Saúde do Hospital Sírio-Libanês. **Resultados:** As atividades do projeto ocorreram em 2023 e incluíram dois cursos de formação online sobre estudos primários e revisões sistemáticas, 11 oficinas de um dia com conteúdo técnico-científico para membros dos Núcleos de Apoio Técnico ao Judiciário (NATJus), 40 consultas on-line técnico-científicas para magistrados em plataforma digital, 11 relatórios técnico-científicos abordando as tecnologias mais reivindicadas judicialmente no Brasil; duas ferramentas metodológicas, um fórum nacional (evento híbrido), 10 mentorias via chat para membros do NATJus; e a manutenção de um blog de acesso aberto, com publicação de notícias sobre temas relevantes de direito e saúde. **Discussão e conclusão:** Este projeto contribuiu para a melhoria do processo de tomada de decisão judicial, fornecendo uma série de atividades destinadas a ajudar na priorização de tecnologias de saúde que sejam claramente eficazes e seguras em detrimento daquelas que são ineficazes, prejudiciais ou têm efeitos incertos.

**Palavras-chave:** Medicina Baseada em Evidências; Avaliação da Tecnologia Biomédica; Judicialização da Saúde; Uso da Informação Científica na Tomada de Decisões em Saúde.

## Resumen

**Objetivo:** El objetivo principal de este estudio es informar sobre la implementación y los resultados del proyecto “Apoyo a las Decisiones Judiciales Relacionadas con la Salud en Brasil” realizado en el Centro de Tecnología en Salud del Hospital Sírio-Libanês a través del “Programa de Apoio ao Desenvolvimento Institucional do Sistema Único de Saúde”, en Brasil. **Métodos:** Este estudio es un informe de experiencia de un proyecto realizado en el Centro de Tecnología en Salud del Hospital Sírio-Libanês. **Resultados:** Las actividades del proyecto ocurrieron en 2023 e incluyeron dos cursos de capacitación en línea sobre estudios primarios y revisiones sistemáticas, 11 talleres de un día de contenido técnico-científico para miembros de los Centros de Apoio Técnico al Poder Judicial (NATJus), 40 consultas técnico-científicas en línea para magistrados en plataforma digital, 11 informes técnico-científicos que abordan las tecnologías más reclamadas legalmente en Brasil; dos herramientas metodológicas, un foro nacional (evento híbrido), 10 mentorías basadas en chat para miembros de NATJus; y el mantenimiento de un blog de acceso abierto, mediante la publicación de noticias sobre temas relevantes en derecho y salud. **Discusión y conclusión:** Este proyecto ha contribuido a mejorar el proceso de toma de decisiones judiciales proporcionando actividades para priorizar las tecnologías sanitarias claramente eficaces y seguras frente a aquellas que son ineficaces, nocivas o de efectos inciertos.

**Palabras clave:** Medicina Basada en la Evidencia; Evaluación de la Tecnología Biomédica; Judicialización de la Salud; Uso de la Información Científica en la Toma de Decisiones en Salud.

## Introduction

The Brazilian public health system (Sistema Único de Saúde, SUS) was established in 1990 and has had the challenge of providing free health care and services to 200 million users, under the principles of universality and equity<sup>(1)</sup>. Over these years, evidence-informed policies and processes have been adopted when deciding on the incorporation of technologies into the SUS, according to the results of efficacy, safety, cost-effectiveness and budgetary impact of each technology.

In parallel with the regular health technology incorporation process, there has been a progressive increase of judicial demands for access to technologies that are not provided in the Brazilian public health system (either because they have not yet been evaluated by the National Commission for the Evaluation of Technologies in the SUS (Conitec) or their incorporation has not been recommended).

Judicial health-related processes have increased by 130% in Brazil between a ten-year assessment (2008–2017)<sup>(2)</sup> and, during 2022, the Brazilian judiciary system received 480,410 thousand new lawsuits for the supply of drugs, devices, procedures, or other health-related processes in the SUS and supplementary health combined<sup>(3)</sup>. Furthermore, concerning the governmental expenses, in 2016, for example, approximately 91% (over 1.1 billion in local currency) of the total amount disbursed by the federal government to comply with court decisions was earmarked for high-cost medications which benefited 1,262 of the 200 million users of the SUS, undermining equity, one of the principles of the system<sup>(4)</sup>.

To respond to the higher number of judicial health-related demands, the Brazilian National Council of Justice (Conselho Nacional de Justiça, CNJ) started several actions to support judges. One of these actions was the establishment of 'Judiciary Technical Support Centers' (NATJus) to provide technical support to magistrates, aiding judgment in the assessment of health-related lawsuits. The idealization of the Centers first began in 2010, through a public hearing held by the Federal Supreme Court (Supremo Tribunal Federal, STF). The national hearing discussed the issues relating to the lack of scientific and clinical information provided to magistrates to aid decision-making<sup>(5)</sup>.

An increase in the number and complexity of health lawsuits has added challenges to the decision-making process, including the need for a larger, more efficient workforce with skills that go beyond the legal knowledge already needed. These comprise updating training, tools, and enhancing services<sup>(6)</sup> on Evidence-Based Medicine (EBM) and Health Technology Assessment (HTA) for identifying scientific evidence about the efficacy, safety, and cost-effectiveness of specific technologies. The need for a theoretical conceptualization of EBM and HTA was emphasized in a 2020 study of academic detailing for judges<sup>(7)</sup>, where participants highlighted the importance of acquiring knowledge of those concepts to improve decision-making in litigious proceedings. An additional issue is translating scientific knowledge into plain language so that it can be easily understood by law professionals.

Faced with this scenario, strategies have been implemented in Brazil to overcome these challenges, including initiatives to build capacity in health evidence<sup>(8)</sup> and knowledge translation studies<sup>(9)</sup>.

The objective of this study is to report on the implementation and main results of the second edition of the project titled "Supporting health-related judicial decisions in Brazil," which was

conducted in 2023 at Hospital Sírio-Libanês, São Paulo, Brazil, through a partnership with the Brazilian Ministry of Health and the Brazilian National Council of Justice.

## Methods

This is a descriptive study, consisting of an experience report on the implementation and results of a project conducted at the Health Technology Assessment Center, Hospital Sírio-Libanês, São Paulo, Brazil, within the scope of the ‘Institutional Development Support Program of the SUS’ (Programa de Apoio ao Desenvolvimento Institucional do SUS, PROADI-SUS) initiative, and through a partnership with the Brazilian National Council of Justice (CNJ) and the Brazilian Ministry of Health.

## Results

### *Project details and background*

The Health Technology Assessment Center’s research team from Hospital Sírio-Libanês has been partnering with CNJ since 2016 in different endeavors to enhance decision-making in the judiciary system in Brazil. The first edition of a structured collaboration project happened between 2018 and 2020 to support the development of the NATJus, allowing the magistrates access to the best evidence on the most frequent judicially requested health technologies.

In 2023, the second edition of the project, which started to be funded by the Brazilian Ministry of Health through PROADI-SUS, aimed at supporting the judicial decision-making process in health, providing technical-scientific products on the efficacy and safety of health interventions and technologies, and improving the knowledge and skills of judicial collaborators in the development of such products.

To achieve the main objective of this collaboration, the activities and products of the current project (second edition) were structured in four areas:

- (i) Structural activities to strengthen the NATJus Centers, comprised of health professionals in charge of providing evidence support for judges and magistrates, concerning the use of tools, concepts, and methods proposed by the areas of EBM and HTA.
- (ii) Provide technical-scientific support for judges and magistrates in making judicial decisions based on scientific evidence;
- (iii) Teaching and qualifying NATJus professionals to improve the development of technical-scientific reports;
- (iv) Steps were taken to publicize the project and its results.

### *Project team*

The activities were conducted by the research team of the Health Technology Assessment Center, Hospital Sírio-Libanês, which is composed of seven health researchers who graduated in different areas (medicine, physiotherapy, nutrition, psychology, speech and language pathology) with experience in HTA, EBM, and clinical epidemiology.

### *Project budget*

For this project (second edition), a total of USD 411,397.206 was approved (conversion rate: 1 USD = 5.3471 BRL; November 18, 2022, date of project official approval).

### *Project activities*

In the second edition of the project, the following activities and products were developed: online training courses for NATJus members; face-to-face workshops on EBM and HTA; reactivation and maintenance of a blog with health and law content; online technical-scientific consultations for judges, magistrates, and health professionals to aid in the decision-making process; a scientific event; the development of technical-scientific reports; and others. A full description of the delivered activities and products is presented in Table 1.

**Box 1.** Strategies developed during the project “Supporting health-related judicial decision in Brazil.

Strategy	Description	Objective	Duration	Target audience	Results
Online training courses.	Two online courses aimed at training NATJus members on tools, concepts, and methods proposed by the areas of EBM and HTA.	The main objective of the training is to develop skills that cover all stages of the critical evaluation of studies, either primary or secondary study designs.	Each course lasted 44 hours, during an 8-week period.	NATJus members and magistrates.	Course 1: critical appraisal of primary studies Total participants: 73 enrolled participants and of those 50 responded to the satisfaction questionnaire. Of the 73 enrolled participants, 38 were approved (considering attendance and activities delivered); Course evaluation: 100% of the 50 responders evaluated the course content as ‘good’ or ‘great’; Recommendation: 88% of the 50 responders are extremely likely to recommend the course to another person; Course 2: critical appraisal of secondary studies Total participants: 51 enrolled participants and of those 32 responded to the satisfaction questionnaire. Of the 51 enrolled participants, 35 were approved (considering attendance and activities delivered); Course evaluation: 100% of the 32 responders evaluated the course content as ‘good’ or ‘great’; Recommendation: 75% of the 32 responders are extremely likely to recommend the course to another person.

In person workshops.	Regional workshops for members of the NATJus.	The regional workshops focused on evidence syntheses methods, highlighting the search, selection of evidence, and what tools to use for appraisal of quality and certainty of evidence.	8-hour day workshops, that took place from May to November of 2023.	NATJus members and magistrates.	11 regional workshops: Pará (May 4 <sup>th</sup> of 2023; 15 participants); Tocantins (May 25 <sup>th</sup> of 2023; 26 participants); Mato Grosso (June 15 <sup>th</sup> of 2023; 36 participants); Maranhão (June 23 <sup>rd</sup> of 2023; 12 participants); Rio Grande do Sul (June 30 <sup>th</sup> of 2023; 24 participants); Amazonas (July 18 <sup>th</sup> of 2023; 35 participants); Ceará (August 4 <sup>th</sup> of 2023; 21 participants); Roraima (August 24 <sup>th</sup> of 2023; 20 participants); Distrito Federal (September 19 <sup>th</sup> of 2023; 15 participants); Rio Grande do Norte (October 4 <sup>th</sup> of 2023; 5 participants); Espírito Santo (November 30 <sup>th</sup> of 2023; 14 participants). Workshops feedback: Total workshops participants: 223 participants and of those 170 responded to the satisfaction questionnaire. 87.39% of the 170 responders indicated high overall satisfaction with the workshop's format and content; 85.29% of the 170 responders are extremely likely to recommend the workshop to another person.
Technical-scientific online mentorships for the preparation of technical reports through the e-NATJus system, for NATJus participants.	Chat-based mentorships for health professionals who provide technical support to the judiciary.	To aid health professionals who provide technical support to the judiciary, on technical-scientific content.	Response time: one to ten business days.	NATJus members and magistrates.	10 chat-based mentorships on the following topics: 10 <sup>th</sup> of March of 2023: trial run; 20 <sup>th</sup> of March of 2023: recurrent medicine; 21 <sup>st</sup> of June of 2023: federated entity responsible for making compounded medicine available; 7 <sup>th</sup> of August of 2023: considerations on an off-label use of a medication; 18 <sup>th</sup> of August of 2023: aeromedical transportation of a patient in need of intensive care; 5 <sup>th</sup> of September of 2023: mexiletine for Timothy Syndrome; 12 <sup>th</sup> of September of 2023: transcranial direct current stimulation for Pick's Disease Dementia; 3 <sup>rd</sup> of October of 2023: complex ablation for flutter and atrial fibrillation and unidentified stroke; 4 <sup>th</sup> of October of 2023: generic and similar medicines.



					24 <sup>th</sup> of October of 2023: zuclopenthixol decanoate for children with bronchial asthma, allergic rhinitis and atopic dermatitis.
Online consultations for magistrates with experts on clinical (health issues) and/or methodological topics.	Consultations with experts on clinical (health issues) and/or methodological topics. The consultations were individual and asynchronous via chat in the digital channel.	To aid magistrates on technical-scientific content.	Response time: one to three business days.	Magistrates	<p>Seven consultations requested out of 40 available:</p> <p>11<sup>th</sup> of August of 2023: volanesorsen (Waylivra™) for the treatment of Familial Chylomicronemia Syndrome;</p> <p>24<sup>th</sup> of August of 2023: aeromedical transportation;</p> <p>1<sup>st</sup> of November of 2023: difference between 'clinical protocols and therapeutic guidelines' from 'diagnostic and therapeutic guidelines';</p> <p>8<sup>th</sup> of November of 2023: percutaneous aortic valve implantation;</p> <p>10<sup>th</sup> of November of 2023: shoulder arthroscopy;</p> <p>13<sup>th</sup> of November of 2023: biosimilar interchangeability;</p> <p>14<sup>th</sup> of November of 2023: classification of melanoma in situ.</p> <p>Consultations feedback:</p> <p>The mean overall satisfaction with the online consultations, from 7 responders was of 9.2 (1 to 10 grading).</p> <p>Low demand for consultations (7 out of 40) may be due to the novelty of the platform, since it was launched in the second semester of 2023.</p>
Evidence synthesis reports addressing the PICO question derived from the most legally demanded technologies.	Evidence synthesis reports for the most demanded health technologies.	Develop, validate and make available technical-scientific reports on the most legally demanded technologies.	Average of three months from the start to a finished product.	NATJus members and magistrates	<p>11 evidence synthesis reports:</p> <p>Dupilumab for atopic dermatitis in children and adolescents. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=1d6c1598178f2ba884befae53026df90fdc83f6">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=1d6c1598178f2ba884befae53026df90fdc83f6</a></p> <p>Dupilumab for atopic dermatitis in adults. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=36d02c3671cb35a074ea20adf284bdd9d14cfad1">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=36d02c3671cb35a074ea20adf284bdd9d14cfad1</a></p> <p>Dupilumab for asthma in children. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-">https://www.pje.jus.br/e-natjus/arquivo-</a></p>

					<p><a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=2b9b14cb413d7cef349c36365a06b92c7fa9a274">download.php?hash=2b9b14cb413d7cef349c36365a06b92c7fa9a274</a></p> <p>Dupilumab for asthma in adolescents and adults. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=f8480f9738d590e89bfc321f6f5fde6b76b1c8f5">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=f8480f9738d590e89bfc321f6f5fde6b76b1c8f5</a></p> <p>Bevacizumab in combination with Fluoropyrimidine-based chemotherapy for colorectal cancer. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=57a22e0a0868330b9030ca00750e4719d7d92aac">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=57a22e0a0868330b9030ca00750e4719d7d92aac</a></p> <p>Nivolumab for advanced renal cell carcinoma. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=8fb886c410f6609ff4613d2296bf62f69765ad79">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=8fb886c410f6609ff4613d2296bf62f69765ad79</a></p> <p>Pembrolizumab for non-small cell lung cancer. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=ffe62b4be47e1e278738fcd03dc2cf9a4c29e684">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=ffe62b4be47e1e278738fcd03dc2cf9a4c29e684</a></p> <p>Nintedanib for interstitial lung disease. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=14c093b8dad6927e071b2753de3e027b6f6f309d">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=14c093b8dad6927e071b2753de3e027b6f6f309d</a></p> <p>Encorafenib associated with binimetinib for unresectable or metastatic melanoma and with the BRAF V600 mutation. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=fcb2054077b14a15aa7f69987c585c99ce5fc54">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=fcb2054077b14a15aa7f69987c585c99ce5fc54</a></p> <p>Cannabis and its derivatives for autism spectrum disorder. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=787643cd0730e16b154bdace601d29936908eb9c">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=787643cd0730e16b154bdace601d29936908eb9c</a></p> <p>Cannabis and its derivatives for multiple sclerosis. Full text (Portuguese): <a href="https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=ebde87b3b666b7c91edb32d618a5874cb7be1abe">https://www.pje.jus.br/e-natjus/arquivo-download.php?hash=ebde87b3b666b7c91edb32d618a5874cb7be1abe</a></p>
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Methodological tools (template and checklist) for preparing technical-scientific reports.	Update of template for structuring technical-scientific reports. Review and update the validation checklist for technical-scientific reports.	Update tools (template and checklist) for preparing technical-scientific reports.	Average of three months from the start to a finished product.	NATJus members and magistrates	1 template for structuring technical-scientific reports; 1 checklist for technical-scientific reports.
Scientific event on health judicialization .	A national forum for health and law professionals. Hybrid format, with the in-person location at the Hospital Sírio-Libanês in São Paulo, Brazil.	Aimed at promoting strategies to support judicial decision-making in health, furthering the interaction between law and health.	The event took place between October 31 <sup>st</sup> and November 1 <sup>st</sup> of 2023.	NATJus members, lawyers, health professionals, and magistrates.	A national forum: The event format was hybrid, with in-person panels coupled with the live transmission for online viewers. The participants were health and law professionals, from all regions in Brazil, which work with health judicialization processes. Seventy people participated in person and around eighty (approximated number) in the online format across sessions and panels. National forum feedback: Total of participants: approximately 150 participants and of those 117 responded to the satisfaction questionnaire. 77.78% of the 117 responders indicated high overall satisfaction with the content (classification as 'great' in all responses). 67.52% of the 117 responders indicated that they were extremely likely to recommend the event to another person.
Online blog	Maintaining a blog with three informative posts per week, published in: <a href="https://redenatjus.org.br/blog/">https://redenatjus.org.br/blog/</a> .	Reactivate and maintain the NATJus Network blog.	From March to December of 2023	NATJus members, lawyers, health professionals, and magistrates.	"NATJus Network" blog: One hundred and fifteen posts were made since its reactivation, from March up to December of 2023. Between March and December of 2023, the blog received over 13,899 new visualizations and 5,700 new users, with most of the users located in Brazil (5,372) followed by the United States (219) [data from google analytics reports].

Producing and disseminating technical-scientific products with project results.	Produce and disseminate technical-scientific products with project results.	Disseminate technical-scientific products with the project's results.	4 to 6 of September of 2023.	NATJus members, lawyers, health professionals, magistrates, and scientific community.	A poster presentation was made on the international event "The Cochrane Colloquium", which took place in London, United Kingdom.
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Source: elaborated by the study authors.

## Discussion

Using evidence to aid decision-making in the Brazilian judiciary system is an important tool for improving the quality and certainty of those decisions. This project was one of the steps in the process of institutionalizing evidence-based decision-making in the judicial system.

It is a complex and nuanced process to establish evidence-based decision-making in any institution. The path toward this transformation involves sustained changes and a cultural shift<sup>(10)</sup>. A recent framework<sup>(10)</sup> developed for the institutionalization of evidence-informed decision-making for policy highlights the importance of promoting standardized routines and processes, partnerships, training courses, networking, committed leadership prioritizing resource allocation, and incentivizing an institutional culture for evidence use. Some of these goals were reached in the project, especially with online courses and regional workshops, the collaborative development of technical-scientific reports, and the promotion of these events.

However, some of the barriers during project implementation need to be addressed to improve future actions toward the institutionalization of evidence use in the judiciary system. These issues consisted of the need for a centralized communication channel and the standardization of processes and tools.

The diversity between regional NATJus Centers is an issue identified through workshops on EBM and HTA and in the mentorships provided. These differences were also present in the work processes, including the format of the reports and their technical content. A different process is used in each NATJus in Brazil to provide the evidence needed for a lawsuit submitted to attain a health technology or procedure. There is a lack of standardization in the search and selection of the best evidence available, with the main sources being the website of the 'National Committee for Health Technology Incorporation' (Comissão Nacional de Incorporação de Tecnologias no Sistema Único de Saúde, Conitec) or the online page of the 'Brazilian Health Regulatory Agency' (Agência Nacional de Vigilância Sanitária, Anvisa). Both sources are widely known and provide a range of evidence on the health technologies accessible in Brazil. Nevertheless, further international sources should also be included in the search for evidence, especially in cases where a specific health technology is not yet at 'one's disposal' in the region.

To help standardize the reports, the CNJ has provided an online page compiling the available resources for the NATJus Centers<sup>(11)</sup>, with manuals containing each step and topic needed for a technical report on the assessment of judicial demand on health technology. These resources should be regularly used to provide guidance when responding to judicial demands at all NATJus Centers.

The lack of an established communication channel and system has also impacted on the standardization of processes and the quality of the delivered technical reports. Communication can be a challenge in an institution, especially if there is no clear path or if many steps are involved in sharing information, such as waiting for the approval of managers before sharing content<sup>(12)</sup>. A possible solution for that challenge is to increase the use of the mentoring and consultation channel developed by the Hospital Sírio-Libanês team, one of the recently established activities of the collaboration between CNJ and Hospital Sírio-Libanês. Further communication strategies may include partnerships between NATJus from different regions in Brazil, and the use of the current blog for news, training opportunities, and related content. Monitoring those channels will also be an important step for gauging their impact and improving communication.

The high-volume workflow of the technicians in the Centers was also a challenge perceived during the project's implementation. The availability to perform or analyze research is an important step in the goal of a culture of evidence-based decision-making. It will take a change in perspective, moving away from the idea that gathering scientific evidence is an extra task and towards the idea that scientific evidence serves as a primary path for making decisions<sup>(12)</sup>.

The main highlights of the project consisted of the development of the 11 technical-scientific reports by the Hospital Sírio-Libanês's HTA Center- and its partners, which were fundamental in streamlining internal processes in the regional NATJus and facilitating access to evidence regarding the efficacy and safety of the most legally demanded health technologies in Brazil. The regional workshops were also incremental in the training and encouragement of using standard evidence synthesis methods. The content of these workshops focused on identifying evidence nationally and internationally, the types of evidence to choose from, and assessing the quality and certainty of that evidence with specific tools. The presentation and promotion of standard methods and steps are indispensable for establishing a culture of use of evidence for judicial decision-making.

Furthermore, very few initiatives have been implemented or published concerning the use of scientific evidence to aid judicial decision-making in health. The lack of initiatives enhances the need for the continuation and propagation of projects such as the one developed, focusing on activities that will further promote evidence use by decision-makers.

### *Limitations*

The limitations of this report consisted of the short period of assessment of the project results (limited to 2023), the indirect evaluation of the project's effects on the judicial decision-making process, and the low adherence to the online consultation for magistrates' activity. Direct assessment of the effectiveness of MBE and HTA activities needs to be explored in future projects (long-term) focused on gauging their impact on the Brazilian judicial system. Dissemination strategies should also be implemented to promote the online consultation channel and the adherence of magistrates.

### *Future perspectives*

Some of the future activities that are suggested to continue include the standardization of the process for evidence-based decision-making, such as using the available resources and manuals for requesting and preparing technical notes. It is also relevant to continue to promote training and networking opportunities within and between NATJus from different Brazilian regions. Moreover, analyzing judicial decisions after implementing EBM and HTA strategies is also an important step to take in assessing the impact of these initiatives. Magistrate-focused activities also need to be further explored and encouraged in future initiatives, especially when considering raising awareness over the use of evidence to inform decisions.

### **Conclusion**

The project has contributed to the improvement of the judicial decision-making process by providing a range of activities aimed at aiding the prioritization of health technologies that are clearly effective and safe over those that are ineffective, harmful, or have uncertain effects. This action reinforces the judicial process related to healthcare in Brazil by encouraging the use of the best

available evidence and adopting transparent, rigorous, and reproducible scientific methods, thus contributing to equity and sustainability in the Brazilian public health system.

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### Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

### Authors' contribution

Toledo IP, Pacheco RL, Martimbianco ALC, and Riera R contributed to the conception/design of the article, data analysis and interpretation, drafting of the article, critical revision of its content, and approval of the final version. Latorraca COC, Silva RB, and Colpani V contributed to the conception/design of the article, critical revision of its content, and approval of the final version.

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