

# RB Weekly AI Brief - Issue 7 - 20.05.2026

Covering the week of 20.05.2026 · Issue 7 of the RB Weekly AI Brief

Recurring themes: Regulatory & HTA Signals (4 of last 4 issues) · Regulation & Policy (3 of last 4 issues) · Healthcare & Life Sciences (3 of last 4 issues) · Models & Research (3 of last 4 issues)

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## AI News Roundup

### Regulatory & HTA Signals

No qualifying HTA news items identified this week. This section requires stories from official HTA body sources or specialist health policy outlets — general AI regulation stories are excluded.

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### Regulation & Policy

#### EU AI Act Omnibus Deal Confirmed: Medical Devices Stay High-Risk

On 7 May 2026, EU co-legislators reached a provisional political agreement on the Digital Omnibus on AI, the first set of amendments to the EU AI Act since its 2024 adoption. The deal confirms that AI embedded in medical devices and IVDs remains classified as high-risk under Annex I, with compliance deadlines extended to August 2028 — but critically, medical technologies did not secure the single-pathway exemption the industry had sought. MedTech Europe publicly criticised the outcome, calling for the MDR/IVDR revision to resolve the remaining dual-compliance burden.

***So what?** Pharma and medtech companies deploying AI in diagnostic tools, clinical decision support, or regulated SaMD must now plan for dual conformity assessment under both the AI Act and MDR/IVDR — with a hard backstop of August 2028 — meaning evidence generation strategies and regulatory submissions for AI-enabled products need to account for AI Act documentation, bias monitoring, and human oversight requirements on top of existing device frameworks.*

MedTech Europe

#### EU Commission Opens Consultation on AI Transparency Guidelines

On 8 May 2026, the European Commission published draft guidelines on AI transparency obligations under Article 50 of the EU AI Act, opening a targeted stakeholder consultation running until 3 June 2026. The guidelines — the first Commission instrument to cover the full scope of Article 50 — clarify disclosure requirements for interactive AI systems, deepfake labelling, emotion recognition, and biometric categorisation systems, all of which apply from 2 August 2026. A grandfathering rule agreed in the Digital Omnibus gives generative AI systems already on the EU market before August 2026 until December 2026 to comply with watermarking requirements.

***So what?** Pharma companies operating AI-powered patient portals, chatbots, digital health tools, or medical information services in the EU must now prepare concrete disclosure and labelling mechanisms ahead of the August 2026 deadline — and with the stakeholder consultation running until 3 June 2026, there is a short window to formally input on how these obligations are defined.*

European Commission

## Healthcare & Life Sciences

### Google Launches Gemini for Science Suite for Life Sciences Research

At Google I/O 2026 on 19 May, Google unveiled Gemini for Science — a collection of experimental AI research tools including Hypothesis Generation, Computational Discovery, and Literature Insights — alongside a Nature publication of its Co-Scientist multi-agent research system. The suite integrates with over 30 major life science databases including UniProt, AlphaFold, and InterPro, and is already in private preview with pharma partners including Daiichi Sankyo and Bayer Crop Science.

***So what?** For HEOR and medical affairs teams, AI-accelerated hypothesis generation and literature synthesis tools from a major cloud vendor with established pharma partnerships could meaningfully shorten evidence development timelines — but will require clear governance policies and transparency declarations to satisfy HTA body expectations around systematic review methodology and author accountability.*

Google DeepMind

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## Models & Research

### Google Releases Gemini 3.5 Flash: Frontier Performance at Half the Cost

Google launched Gemini 3.5 Flash at Google I/O 2026 on 19 May, making it immediately available across the Gemini app, Google Search AI Mode, and enterprise APIs. The model delivers frontier-level intelligence at four times the speed of comparable models and less than half the cost, outperforming Gemini 3.1 Pro on key agentic and coding benchmarks. A more powerful Gemini 3.5 Pro is already in internal use and expected to launch in June 2026.

***So what?** For pharma and HEOR teams evaluating AI for large-scale evidence synthesis, pharmacovigilance signal detection, or clinical trial data analysis, the combination of frontier model quality at substantially lower cost and higher throughput directly improves the economic case for deploying AI in production workflows.*

Google

### EU-US Regulatory Convergence Marks Week of Unprecedented AI Acceleration

The week of 13–20 May 2026 saw the EU AI Act Omnibus political agreement formally communicated to the European Parliament on 18 May — setting the stage for a July vote and August publication. Simultaneously at Google I/O, Sundar Pichai revealed Google now processes over 3.2 quadrillion tokens per month, a sevenfold year-on-year increase, reflecting unprecedented enterprise AI adoption. Competing models including GPT-5.5, Claude Opus 4.7, and Gemini 3.5 Flash are now all available simultaneously, intensifying the commercial frontier model race.

***So what?** The simultaneous acceleration of model capability and regulatory formalisation in both the EU and US means pharma AI strategy teams can no longer treat governance and deployment as sequential — companies must now run model evaluation, compliance readiness, and evidence planning in parallel to stay competitive and avoid regulatory exposure.*

European Council

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## Academic Paper Summaries

*Selected from PubMed · Published within the last 12 months · New selections each week*

*Domain Paper — HEOR / Health Economics / Market Access*

### **Value-Based Healthcare — What Does it Look Like for Medical Radiation Sciences in the Australian Context?**

*Davison A · Journal of medical radiation sciences · 2025*

**#HTA · #Oncology · #PatientOutcomes**

This editorial examines how value-based healthcare principles are being applied to medical imaging and radiation therapy services in Australia, using New South Wales Health as a key example. It highlights programmes that use AI, virtual reality, and advanced radiotherapy techniques to deliver better patient outcomes more efficiently. For healthcare executives, it illustrates practical pathways for embedding value-based commissioning into radiology and oncology services at a system level.

PMID: 40083096

PubMed →

DOI →

*AI Research Paper 1*

### **Performance of a large language model on the reasoning tasks of a physician.**

*Brodeur PG, Buckley TA, Kanjee Z, et al. · Science · 2026*

**#ClinicalAI · #Diagnostics · #PatientOutcomes**

This landmark study — the brief's first 2026 paper, published in Science — tested OpenAI's o1 reasoning model against experienced physicians across six clinical experiments including real emergency department cases. The AI correctly identified or closely matched diagnoses in 67% of triage cases compared to 50–55% for human physicians, with performance improving as more patient data became available. The authors caution that benchmark performance does not equate to safety in live clinical deployment and call for rigorous prospective trials before any clinical rollout. PubMed indexing pending — access via DOI.

PMID: Pending

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