

International Comparative Legal Guides

Drug & Medical Device Litigation 2026

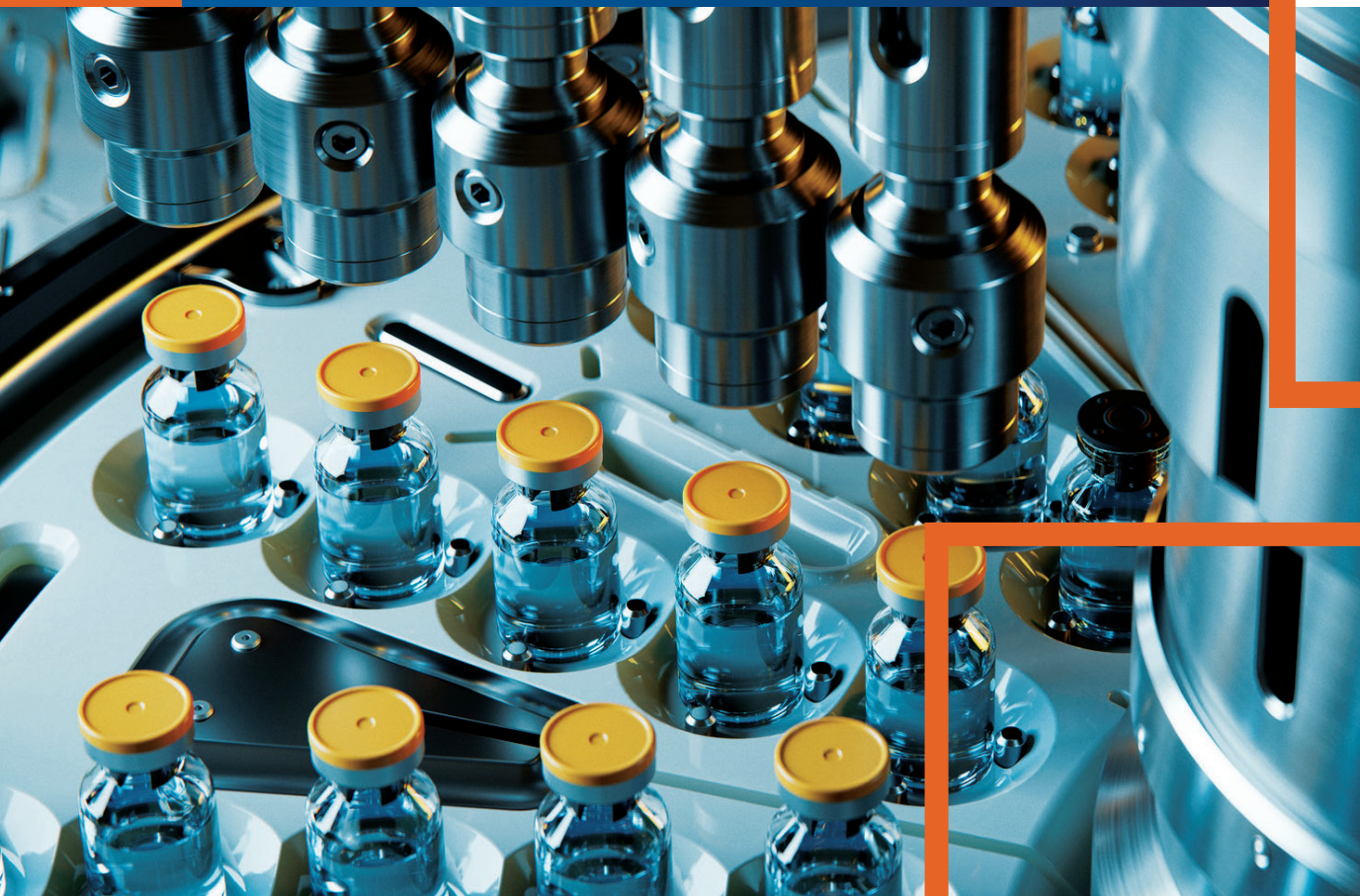
A practical cross-border resource to inform legal minds

Seventh Edition

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Expert Witness Practice in U.S. Drug and Medical Device Litigation

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1 Regulatory Framework

1.1 Please list and describe the principal legislative and regulatory bodies that apply to and/or regulate pharmaceuticals, medical devices, supplements, over-the-counter products, and cosmetics.

In Chile, the regulation of pharmaceuticals, medical devices, supplements, and cosmetics is guided by a strong legal structure based on the Sanitary Code. Oversight is primarily carried out by the Ministry of Health (MINSAL), the Institute of Public Health (ISP), and the Regional Ministerial Secretariat of Health (SEREMI), with SEREMI responsible for regional enforcement.

The main regulation that complements the Sanitary Code are the following:

- (i) Decree N° 3, from 2010, issued by MINSAL, which approves the regulation of the national system of human-use pharmaceutical products control.
- (ii) Decree N° 239, from 2002, issued by MINSAL, which approves the regulation of the national system of cosmetics control.
- (iii) Decree N° 466, from 1984, issued by MINSAL, which approves the regulation of pharmacies, drugstores, pharmaceutical stores, and authorised warehouses.
- (iv) Decree N° 977, from 1996, issued by MINSAL, which approves the sanitary regulation of food.
- (v) Decree N° 825, from 1998, issued by MINSAL, which approves regulation regarding medical devices control.

1.2 How do regulations/legislation impact liability for injuries suffered as a result of product use, or other liability arising out of the marketing and sale of the product? Does approval of a product by the regulators provide any protection from liability?

In Chile, the legal framework establishes a rigorous system of liability for damages arising from the use, marketing, and sale of pharmaceutical products, medical devices, and cosmetics. This system is primarily governed by the Sanitary Code, the Consumer Protection Law (Ley 19.496), and the Civil Code.

According to the Sanitary Code, a defective product is any sanitary item – including drugs and sanitary devices – that fails to provide adequate safety when considering all relevant circumstances, such as how it is presented and its expected use. Additionally, a product is deemed defective if it does not offer the level of safety typically provided by comparable products.

Any damage caused using a defective product shall give rise to civil or criminal liability, depending on the kind of damage. The titleholder of the registry or authorisation, the manufacturer, and the importers of such defective products will be jointly responsible for these damages.

Nevertheless, in accordance with Decree N° 3, the titleholder of the pharmaceutical product's registry is the final party responsible for its safety and efficacy.

In Chile, obtaining a sanitary registration from the ISP is a mandatory requirement for legal commercialisation, but it does not function as a “regulatory compliance defence” to exempt a company from civil liability.

The Consumer Protection Law adds extra liabilities for commercial activities, such as Duty of Information and harms caused by negligence in product quality.

1.3 What other general impact does the regulation of life sciences products have on litigation involving such products?

Regulation of life sciences products is primarily governed by MINSAL decrees, with disputes usually handled through administrative proceedings before the ISP. Most cases involve fines for regulatory breaches, following a regulated administrative process. However, parties can appeal to courts either after the administrative procedure or, in some instances, bypass it entirely.

Civil litigation may arise if a defective product causes harm, allowing affected individuals to seek damages directly in court without prior administrative action. Additionally, disputes over life sciences products may be addressed by the Public Procurement Court.

1.4 Are there any self-regulatory bodies that govern drugs, medical devices, supplements, OTC products, or cosmetics in the jurisdiction? How do their codes of conduct or other guidelines affect litigation and liability?

In Chile, several self-regulatory bodies play a significant role in the life sciences sector, particularly regarding ethical promotion, interactions with healthcare professionals (HCPs), and advertising. While their codes are not laws, they significantly influence the “standard of care”, and the interpretation of legal duties in litigation, but they are not mandatory.

1.5 Are life sciences companies required to provide warnings of the risks of their products directly to the consumer, or to the prescribing physician (i.e., learned intermediary), and how do such requirements affect litigation concerning the product?

Chile's regulatory framework for pharmaceutical information imposes a dual duty of warning: manufacturers must provide detailed, technical information to HCPs and accessible, clear instructions to patients through two separate leaflets.

Failure to provide adequate warnings (whether to professionals or consumers) can result in strict liability for manufacturers, especially in cases involving labelling errors or omissions. In litigation, courts closely examine whether all relevant risks were properly disclosed, and manufacturers remain liable if consumer-directed warnings are insufficient, regardless of information provided to HCPs.

2 Manufacturing

2.1 What are the local licensing requirements for life sciences manufacturers?

The licensing and operation of life sciences manufacturers in Chile are governed by the Sanitary Code and specific regulations for each product category. The ISP is the primary authority responsible for granting these licences and supervising compliance.

Requirements are outlined in Decree N° 3 for drug laboratories, Decree N° 239 for cosmetics, Decree N° 977 for supplements, and Decree N° 825 for medical devices, with permits issued by the ISP or SEREMI.

The specific process varies according to the type of product. Beyond ISP permits, companies may be required to obtain additional administrative and non-health-related authorisations; therefore, it is recommended that organisations consult with the appropriate regulatory authorities.

2.2 What agreements do local regulators have with foreign regulators (e.g., with the U.S. Food and Drug Administration or the European Medicines Agency) that relate to the inspection and approval of manufacturing facilities?

Chile's ISP, through its National Medicines Agency (ANAMED), maintains a cooperation agreement with the U.S. Food and Drug Administration (FDA) that grants the ISP confidential access to FDA regulatory information regarding the status of pharmaceutical manufacturing plants in the United States and other jurisdictions where the FDA conducts inspections. In addition, the ISP participates in bilateral and multilateral arrangements with Latin American regulators, specifically: INVIMA (Colombia); COFEPRIS (Mexico); ANMAT (Argentina); and ANVISA (Brazil), which allow the exchange of inspection reports to support the regulatory evaluation of manufacturing facilities.

2.3 What is the impact of manufacturing requirements or violations thereof on liability and litigation?

Ensuring manufacturing compliance is critical for obtaining administrative authorisation of life sciences products. Any failure to meet manufacturing requirements constitutes a

direct violation of legal regulations – primarily established in the Sanitary Code and related rules – which may result in an administrative investigation and, depending on the severity of damages caused, potentially judicial proceedings.

In Chile, violations of manufacturing standards have significant implications for liability. The legal system regards Good Manufacturing Practices (GMP/BPM) not just as technical protocols, but as binding legal standards for product safety. Breaching these standards often leads to a shift from negligence-based liability to strict liability or guarantee responsibility.

3 Transactions

3.1 Please identify and describe any approvals required from local regulators for life sciences mergers/acquisitions.

There are no specific regulations for life sciences merger or acquisition (M&A) deals. However, several regulatory issues remain relevant to this sector. If an M&A involves medical supplies or pharmaceutical products, the ISP will play a role in transferring ownership to the buyer; due to the complexity of this process, expert guidance is recommended. Additionally, approval from antitrust authorities may be crucial in life sciences M&A transactions.

3.2 What, if any, restrictions does the jurisdiction place on foreign ownership of life sciences companies or manufacturing facilities? How do such restrictions affect liability for injuries caused by use of a life sciences product?

Foreign investors can freely own life sciences companies and manufacturing facilities without any restrictions. The only limitation applies to property located in border areas, which foreign individuals or companies are not allowed to own.

4 Advertising, Promotion and Sales

4.1 Please identify and describe the principal legislation and regulations, and any regulatory bodies, that govern the advertising, promotion and sale of drugs and medical devices, and other life sciences products.

Drug advertising and promotion are tightly controlled by the Sanitary Code and its Decree N° 3. Only over-the-counter drugs can be advertised or promoted; all other medicines are strictly prohibited from advertising. All drug advertisements require prior approval from the ISP. Regarding drugs e-commerce, it is regulated under Decree N° 466. There are currently no specific rules for advertising medical devices or other life sciences products. Food advertising and labelling follow Decree N° 977. Chile uses a "High In" label system: foods that exceed set limits for energy, sodium, sugar, or saturated fat must feature a warning label on their packaging stating "Higher In energy/sodium/sugar/saturated fat". Moreover, advertisements for foods with these warnings cannot be directed at children under 14 years old. Cosmetics' promotion is regulated by Decree N° 239.

4.2 What restrictions are there on the promotion of drugs and medical devices for indications or uses that have not been approved by the governing regulatory authority (“off-label promotion”)?

Off-label promotion of drugs is strictly prohibited in Chile, with limited exceptions for HCPs. The regulatory framework creates a clear distinction between what can be promoted and what constitutes an illegal violation.

4.3 What is the impact of the regulation of the advertising, promotion and sale of drugs and medical devices on litigation concerning life sciences products?

Regulatory violations in advertising, promotion, and sale of drugs and medical devices have profound and multifaceted impacts on civil litigation. The regulatory framework creates a system where administrative violations often serve as evidence of negligence or breach of duty, significantly strengthening plaintiffs’ claims in product liability cases.

5 Data Privacy

5.1 How do life sciences companies that distribute their products globally comply with data privacy standards such as GDPR and other similar standards?

In Chile, as a non-Member State of the European Union, the EU’s General Data Protection Regulation (GDPR) does not have a direct effect on local companies. However, if, in the context of the business, the company requires to process personal information of subjects in the European Union, such processing must comply with the GDPR standards, in accordance with article 3 of the GDPR (territorial scope).

It should be noted that locally, data protection has had constitutional rank since 2018, given that the current article 19 N° 4 states that: “The Constitution ensures to all persons the respect and protection of the private life and honor of the person and his family, and also, the protection of their personal data. The treatment and protection of such data shall be carried out in the manner and under the conditions determined by law.”

This constitutional right is mainly regulated by Law N° 19.628 of 1999 on the Protection of Privacy. Some important elements of Law N° 19.628 are that: it applies not only to individuals, but also to public agencies that manage databases; the processing of personal data must be carried out whenever a law authorises it, or the data subject expressly provides that it consents; it distinguishes between personal and sensitive data; it establishes the principle of lawfulness, purpose and information; it establishes certain obligations of the data controller such as secrecy and care of the data-bases; and it establishes the data subject’s rights (access, rectification, blocking, deletion, or cancellation, among others).

However, in December 2024, Law N° 21.719 was published, which substantially modified the current Law N° 19.628 of 1999. This new law will come into force on December 1, 2026, introducing higher protection standards like those set forth by the GDPR. Among the novelties of the amendments to Law N° 19,628, it expands the scope of the law (including extraterritorial application), regulates international transfer of data, introduces a tiered sanctions regime with high fines that can scale up to percentages of annual revenue for large companies

in case of repeated serious or very serious offences, plus accessory sanctions like suspension of processing, and creates a new Data Protection Agency with supervisory, regulatory and sanctioning powers.

Additionally, the new law updates the legal bases (consent, legitimate interest, contractual necessity, legal obligation, among others), distinguishes between personal and sensitive data, and introduces new regulated data categories such as geolocation data, children’s data and data for investigation or scientific purposes. It also strengthens data subjects’ rights and includes principles such as accountability, purpose limitation, proportionality, security, and transparency. Controllers will have specific obligations, such as being responsible for “privacy by design and by default”, mandatory breach notifications, enabling real and operational data subject rights, including objection to automated decision making and data portability.

Accordingly, local life sciences companies should already be undertaking a comprehensive assessment of their personal data processing activities to ensure compliance with the new data protection regime effective December 2026.

5.2 What rules govern the confidentiality of documents produced in litigation? What, if any, restrictions are there on a company’s ability to maintain the confidentiality of documents and information produced in litigation?

Pursuant to the Constitution, the Chilean Civil Procedure Code, and the Organic Code of Courts, all documents, general information, and resolutions generated in the course of litigation are public, reflecting the Judiciary’s commitment to transparency. These materials are incorporated into the electronic case record, being added sequentially as they are filed. The electronic processing system of the Judiciary assigns an automatic number to each item in the record, using both numerals and words.

Exceptionally, parties may petition the court to treat certain documents or information as confidential, based on their nature or for justified reasons that must be approved by the presiding judge. When such confidentiality is granted, the relevant documents are set aside from the principal electronic record, with access limited exclusively to the parties involved.

In arbitration, a distinction is drawn between institutional arbitration (such as CAM Santiago or the National Arbitration Centre), where statutes and operational rules generally establish confidentiality as a guiding principle – limiting access to the parties – and non-institutional arbitration, which typically adheres to similar confidentiality restrictions for practical reasons, as arbitrators do not grant access to third parties. However, if an arbitral decision is challenged before the ordinary courts (generally the final judgment), the Court of Appeal becomes the competent body. At this stage, the principle of publicity applies once more, permitting any individual to access the arbitration proceedings before the Court of Appeal, regardless of the prior confidential nature of the arbitration.

5.3 What are the key regulatory considerations and developments in Digital Health and their impact, if any, on litigation?

In Chile, the regulatory landscape for Digital Health has undergone significant transformation, particularly with the enactment of Law N° 21,541 (2023), which formalises telemedicine and digital health services. These developments have a direct

impact on litigation, specifically regarding medical liability, data privacy, and the evidentiary value of digital records.

Digital Health in Chile is primarily regulated by Law N° 21,541, which integrates telemedicine into the framework of patient rights (Law N° 20,584), mandating strict security standards and the interoperability of electronic medical records. In litigation, health data is treated as “sensitive data” under Law N° 19,628, leading courts to impose high indemnity for unauthorised disclosures, even in response to judicial orders if the disclosure is excessive.

6 Clinical Trials and Compassionate Use Programmes

6.1 Please identify and describe the regulatory standards, guidelines, or rules that govern how clinical testing is conducted in the jurisdiction, and their impact on litigation involving injuries associated with the use of the product.

Clinical trials are regulated by the Sanitary Code, Law N° 20.120 on human research and genome, and Decree N° 114 (2010) from MINSAL. Law N° 20.120 outlines the protocol for trial approval and the provisional use of pharmaceuticals or devices under study. The authorised party conducting the trial is liable for all damages related to the investigation, even if unforeseeable. Conducting a clinical trial without proper authorisation can result in a three-year suspension or permanent prohibition of professional practice for repeat offenders.

6.2 Does the jurisdiction recognise liability for failure to test in certain patient populations (e.g., can a company be found negligent for failure to test in a particular patient population)?

There is no acknowledgment of liability for companies that choose not to conduct testing in specific populations. Organisations retain the discretion to undertake clinical trials within their selected demographics, provided they adhere to ethics committee standards and comply with relevant legal regulations.

6.3 Does the jurisdiction permit the compassionate use of unapproved drugs or medical devices, and what requirements or regulations govern compassionate use programmes?

The compassionate use of unapproved drugs or medical devices is allowed within Chile. Compassionate use constitutes an exception in the regulations governing the importation of drugs or medical devices not registered in the country. Authorisation for such cases is granted on a personal basis exclusively to the importer and must be substantiated by appropriate medical evidence. The ISP serves as the competent authority for granting these permits. In the context of clinical trials, if a drug or device proves beneficial for an individual’s treatment, the sponsoring company is required to provide continued access to the product for the beneficiary’s lifetime. In recent years, there has been a notable rise in litigation aimed at securing government funding for certain drugs that, due to their specific characteristics, are not covered under public programmes or by either public or private health financing systems. This trend has intensified over the past decade, with courts increasingly ruling that health systems are obligated to finance such medications on the grounds of the right to life.

6.4 Are waivers of liability typically utilised with physicians and/or patients and enforced?

Liability waivers are not allowed. The Sanitary Code specifies that those authorised to conduct clinical trials with certain medicines are responsible for any harm related to the investigation, even if such harm was unforeseeable. There is a legal presumption of liability – if damage occurs, it is presumed to result from the clinical trial. Claims for damages must be made within 10 years from when the harm occurred, regardless of when the trial took place. An exception exists in article 111E of the Sanitary Code: if a clinical trial concerns an epidemic or pandemic declared by MINSAL and involves relevant medicines or devices, the 10-year period begins after the trial ends.

6.5 Is there any regulatory or other guidance companies can follow to insulate or protect themselves from liability when proceeding with such programmes?

There are no formal guidelines beyond compliance with Law N° 20.120, its regulations, and those for compassionate use programmes. Companies have no options for protection from potential liabilities.

7 Product Recalls

7.1 Please identify and describe the regulatory framework for product recalls, the standards for recall, and the involvement of any regulatory body.

The ISP is the national authority responsible for sanitary control of pharmaceutical products and enforcement of health regulations. Manufacturers and importers of pharmaceutical products must immediately notify the ISP of any product withdrawal from the market due to quality deviations or defects representing health risks. The ISP may order product withdrawal when there is imminent risk to public health, and manufacturers must complete recovery.

7.2 What, if any, differences are there between drugs and medical devices or other life sciences products in the regulatory scheme for product recalls?

Medical devices are regulated under the Medical Device Control Regulation (Decree N° 825), which requires health institutions and manufacturers to report to the ISP any defective behaviour, failure, or deterioration of devices that could cause death or health deterioration. Pharmaceutical products are subject to specific notification requirements and withdrawal timelines. Medical devices require traceability systems to facilitate rapid identification and removal when immobilised, quarantined, or withdrawn. The regulatory framework distinguishes between these categories with specific procedures for each.

7.3 How do product recalls affect litigation and government action concerning the product?

A product declared dangerous or toxic by judicial determination or competent authority triggers joint and several liability of the producer, importer, and first distributor. The manufacturer must replace the dangerous product with a harmless one of similar utility and equivalent value or refund the purchase

price. Failure to comply with recall obligations subjects the responsible party to contravention sanctions and obligates payment of damages and losses. Jurisprudence shows that illegal or arbitrary recalls can generate state liability for damages, and courts have annulled recalls found to be disproportionate or lacking adequate justification.

7.4 To what extent do recalls in the United States or Europe have an impact on recall decisions and/or litigation in the jurisdiction?

International recalls can influence regulatory decisions in Chile, as the ISP expressly reviews safety actions taken by foreign regulators. The ISP states that information issued by agencies abroad may lead it to adopt regulatory measures or issue communications to HCPs and marketing authorisation holders.

7.5 What protections does the jurisdiction have for internal investigations or risk assessments?

The ISP has free access to information related to research. Members of the Expert Committee for Sanitary Control Regime Determination must maintain confidentiality of information classified as secret or reserved under the Public Information Access Law. However, SERNAC officials are obligated to maintain confidentiality of information obtained during their functions, though such information may be used for SERNAC functions and judicial proceedings. The research does not reveal comprehensive protections for internal company investigations or risk assessments from disclosure.

7.6 Are there steps companies should take when conducting a product recall to protect themselves from litigation and liability?

The ISP has issued guidance on product recalls, making it essential for companies to comply. The process involves several key steps:

- Companies must complete a notification form, available on the ISP website, and formally submit it to the ISP. This form should explain the reasons for the recall and include all relevant information.
- An efficient recall strategy is required, including written procedures and sufficient personnel to carry out and supervise the recall.
- A separate area must be designated for storing recalled products.
- Distribution records must be maintained and accessible both to the company and the authorities.
- The recall process should be tracked and documented, with a final report submitted to the authorities.
- All recalled products must be destroyed and rendered unusable, and these actions should also be recorded.

8 Litigation and Dispute Resolution

8.1 Please describe any forms of aggregate litigation that are permitted (i.e., mass tort, class actions) and the standards for such aggregate litigation.

Chile recognises collective lawsuits for protection of collective or diffuse consumer interests under Law 19.496. The

procedure requires that the lawsuit be filed by authorised plaintiffs (SERNAC, consumer associations, municipalities) and contain a clear statement of facts reasonably justifying the impact on collective interest. Once declared admissible, notice is published in national media for affected consumers to join or reserve rights, with effect of non-enforceability if they do not appear. There is no U.S.-style class action system, but rather a special procedure with mandatory publication and the possibility for third-party affected consumers to join.

8.2 Are personal injury/product liability claims brought as individual plaintiff lawsuits, as class actions or otherwise?

Claims are filed both individually and collectively. Regarding defective health products, the Consumer Rights Protection Law permits individual and collective actions, with civil courts having jurisdiction. The collective procedure requires publication of notice for other affected consumers to join, allowing extension of judgment effects to third parties meeting requirements.

8.3 What are the standards for claims seeking to recover for injuries as a result of use of a life sciences product? (a) Does the jurisdiction permit product liability claims? (b) Are strict liability claims recognised?

Chile recognises civil liability claims for defective health products. A product is defective if it does not offer sufficient safety considering its presentation and reasonably foreseeable use. Holders of registrations, manufacturers, and importers are jointly and severally liable. The injured party must prove the defect, damage, and causal relationship. Strict liability is recognised for health products without need to prove manufacturer fault.

8.4 Are there any restrictions on lawyer solicitation of plaintiffs for litigation?

No, there are not. Lawyers' solicitation of plaintiffs is not limited.

8.5 What forms of litigation funding are permitted/ utilised? What, if any, regulation of litigation funding exists?

Litigation funding is not specialised; parties typically cover their own legal costs. However, the court may order one party to pay the other's expenses in its judgment.

8.6 What is the preclusive effect on subsequent cases of a finding of liability in one case? If a company is found liable in one case, is that finding considered *res judicata* in subsequent cases?

Judicial sentences have binding force only with respect to the cases in which they are pronounced. However, in collective lawsuits, judgment results extend to affected consumers who joined or appear during execution stage, generating a limited expansive effect. *Res judicata* requires triple identity (parties, object, and cause).

8.7 What are the evidentiary requirements for admissibility of steps a company takes to improve their product or correct product deficiency (subsequent remedial measures)? How is evidence of such measures utilised in litigation?

There are no special admissibility requisites for a company to improve their product or correct product deficiency. Subsequential remedial measures will have no impact on trials that are based on damages produced before them. In fact, remedial measures can be used as proof against the companies to confirm that the product had deficiencies that had to be corrected.

8.8 What are the evidentiary requirements for admissibility of adverse events allegedly experienced by product users other than the plaintiff? Are such events discoverable in civil litigation?

The adverse event should be proven using any of the available means of proof within the Chilean system. Nevertheless, expert evidence will be the preferred method. This expert evidence will most likely be produced by an expert physician.

8.9 Depositions: What are the rules for conducting depositions of company witnesses located in the jurisdiction for use in litigation pending outside the jurisdiction? For example, are there “blocking” statutes that would prevent the deposition from being conducted in or out of the jurisdiction? Can the company produce witnesses for deposition voluntarily, and what are the strategic considerations for asking an employee to appear for deposition? Are parties required to go through the Hague Convention to obtain testimony?

Depositions in Chile are governed by the Civil Procedure Code and must comply with these rules to be considered valid evidence in court. Depositions taken abroad may also be accepted if they fully satisfy the legal requirements necessary for validity in Chile. While companies can choose to submit depositions from their own witnesses, opposing parties may challenge these depositions – especially if the witnesses are company employees – and if such a challenge is made, those depositions are typically disregarded in the final judgment. Depositions must be given verbally in court. The parties do not need to follow the Hague Convention procedures to collect testimony.

8.10 How does the jurisdiction recognise and apply the attorney-client privilege in the context of litigation, and with respect to in-house counsel?

Attorney-client privilege in the context of litigation is the same regardless of whether the counsel is an external or in-house counsel.

8.11 Are there steps companies can take to best protect the confidentiality of communications with counsel in the jurisdiction and communications with counsel outside the jurisdiction for purposes of litigation?

Pursuant to attorney-client privilege, legal counsel are obligated by confidentiality to safeguard all communications with their clients, ensuring that any information disclosed remains protected regardless of the jurisdiction in which such communication occurs. Additionally, non-disclosure agreements may be executed to further specify the ramifications of any breach of confidentiality.

8.12 What limitations does the jurisdiction recognise on suits against foreign defendants?

There are no restrictions on suing foreign defendants. However, Chilean courts require a contractual clause specifying their jurisdiction and the application of Chilean law for competence. Foreign defendants without a presence in Chile must be notified abroad through “*exhortos*”, the legal process for out-of-jurisdiction notifications. After notification, the defendant must appoint an attorney in Chile to represent them.

8.13 What is the impact of U.S. litigation on “follow-on” litigation in your jurisdiction?

Litigation in the United States does not directly affect cases in our jurisdiction, as the legal systems of both countries are different. In Chile, even local precedent is not binding for judges, so foreign decisions are even less likely to be considered. Nevertheless, if a company with operations in Chile faces an adverse ruling abroad, a party may attempt to use that outcome locally as grounds for a lawsuit, provided the facts of both cases are similar.

8.14 What is the likelihood of litigation evolving in your jurisdiction as a result of U.S. litigation?

It is unlikely. Litigation in Chile relies on statutory law rather than precedent, as binding force precedent does not apply within the Chilean legal system. Given this distinction, litigation outcomes in the United States are not expected to directly influence cases in Chile. Moreover, initiating a case in Chile requires meeting specific legal criteria, which may differ significantly from U.S. quality standards, for example.

8.15 For EU jurisdictions, please describe the status and anticipated impact of the Collective Redress Directive and Product Liability Directive on drug and medical device litigation in your jurisdiction.

This does not apply in Chile.



Andrea Abascal has dedicated her career to administrative law, regulatory and corporate/M&A, focusing on regulated markets such as life sciences, healthcare, food, medical devices and cosmetics, among others.

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