AI on Friday

What to Know, Why It Matters

Issue 02, 28 August 2026

Pan American Health Organization
World Health Organization Americas Region
Information Systems and Digital Health Unit
Department of Evidence and Intelligence for Action in Health

This weekly email shares key developments, use cases and practical AI-in-health concepts in plain English, helping us apply AI in our technical cooperation and discuss emerging opportunities with Member States and partners.

DEVELOPMENT TO WATCH

FDA examines how to regulate generative AI-enabled medical devices

What happened: On August 18, the U.S. FDA released a discussion paper and opened a public consultation on regulating medical devices that use generative AI.

What it considers: Risk assessment, testing before market entry, clinical confirmation and continuous monitoring after deployment. The paper also considers foundation models and agentic AI systems.

Read more: FDA announcement • Discussion paper

NHS expands AI tools to more than 500,000 staff

What happened: NHS England announced that 505,000 clinical and administrative staff will receive access to AI tools designed to support tasks such as drafting documents, summarizing information and analyzing data.

Why it matters for health: This represents a major transition from small pilots to system-wide adoption. The next challenge will be measuring whether reported time savings translate into better workflows, quality of care and patient outcomes while protecting sensitive information.

Read more: Official NHS England announcement

AI IN PLAIN ENGLISH

Reinforcement learning

Reinforcement learning is a way of training AI through feedback. The system tries different actions and receives a **reward** when the result is desirable or a **penalty** when it is not. Over many attempts, it learns which actions are more likely to achieve the intended goal.

Health example: An AI system could be trained in a simulated hospital environment to improve appointment scheduling. It might receive rewards for reducing waiting times and maintaining continuity of care, and penalties for unsafe delays or inappropriate prioritization.

PRACTICAL IDEAS

After receiving an AI-generated analysis, add:

"Review your previous response as a critical public health expert. Identify assumptions, missing perspectives, populations or contexts that may not be adequately represented, possible unintended consequences and evidence that could change the conclusion. Do not invent information or sources."

You can also add:

"Clearly identify what would need to be validated locally before this recommendation could be implemented in a country or health system."

Important reminder: AI-generated content may contain errors, outdated information or incorrect references. Always verify original sources, publication dates and links before using or sharing it, particularly for clinical, policy or technical decisions.

FROM THE AMERICAS

Mexico warns that AI does not replace professional mental health care

What happened: Mexico's National Commission on Mental Health and Addictions issued a public notice on the increasing use of AI tools for questions related to anxiety, depression and emotional well-being.

Core message: AI may complement orientation and psychoeducation, but it cannot replace assessment, follow-up or care provided by qualified mental health professionals.

Why it matters: People may interpret an AI response as a diagnosis or delay seeking professional care. AI tools should communicate their limitations clearly and direct users to appropriate support when risks are identified. **Read more here.**

WORTH READING 1

From Breakthrough to Follow-Through: A Public Health Agenda for AI

Published in *JAMA* on August 13, 2026, this Viewpoint moves the discussion from whether AI can identify health risks to whether it can help ensure that people receive interventions already known to be effective. The article offers an important reminder: the value of AI should ultimately be measured through implementation, follow-through and health outcomes, not only through technical accuracy.

Read the article here.

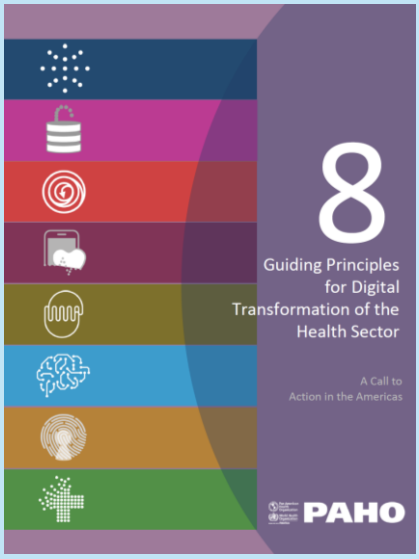
WORTH READING 2

Consumer Perspectives on Trust in and Benefits of Artificial Intelligence in Health Care

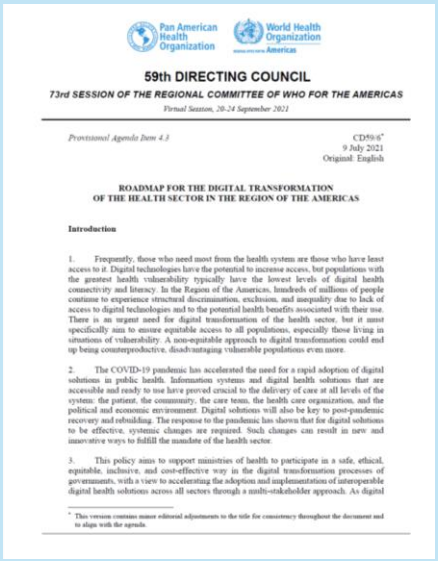
This qualitative study, published in *JAMA Network Open* on August 4, 2026, examines what influences public acceptance of AI in health care.
The study found that trust is conditional and can change over time. It is influenced by how AI systems are governed, how well they perform and whether their use supports personalized, empathetic and responsive care.

Read the article here.

PAHO's resources



Link


Pan American Health Organization
World Health Organization
59th DIRECTING COUNCIL
73rd SESSION OF THE REGIONAL COMMITTEE OF WHO FOR THE AMERICAS
Virtual Session, 20-24 September 2021
Provisional Agenda Item 4.3
CD59/6*
9 July 2021
Original: English
ROADMAP FOR THE DIGITAL TRANSFORMATION OF THE HEALTH SECTOR IN THE REGION OF THE AMERICAS
Introduction

Link



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