Title: Evaluation of drug costs in the Brazilian Unified Health System between 2010 and 2016

Introduction: Medicine drugs are important tools for the protection and promotion of health. Annually, in Brazil, millions of reais are spent on the purchase of drugs. To give you an idea, it is estimated that the global pharmaceutical market will reach US $ 1.3 trillion in 2020, with Brazil expected to occupy the fifth position in this ranking. Thus, it is necessary making studies are to analyze public expenditure on drugs **Objectives**: To present and discuss SUS drug expenditures from 2010 to 2016, at the three levels of government, from a budgetary perspective. **Methods**: This is a descriptive study. Data from Siga Brasil and Siops, that are sistems of information, were used, using the stage of settlement of the expense. The data was worked on Excel spreadsheets. **Results**: In total, SUS spending on drugs increased from R$ 14.3 billion in 2010 to R $ 18.6 billion in 2016, a growth of 30%. As for spending by government, there was a drop in the states and the Federal District (-27%) and by municipalities (-23%), as well as an increase in federal government spending (53%) in this period. Spending on the Popular Pharmacy increased by 580% between 2010 and 2016. Within the strategic component, there was an increase in expenses for medicines for STD / AIDS (0.43% in 2016), immunobiological (64, 7%) and blood products (151.9%). There was a decrease in spending on other drugs (-9.6%). Finally, spending on medicines by the Ministry of Health grew, in real terms, 52.9%. **Discussion**: In Brazil, SUS has promoted important advances in guaranteeing access to medicines since the late 1990s. The effort that the country has been making can be seen by the increase in drug costs. In addition to the expansion and greater access to medicines, the increase in expenses can be explained by 3 variables: popular pharmacies, drugs purchased through the courts and incorporation of new and more expensive products. The Popular Pharmacy has been shown to be more expensive alternative than the dispensing in SUS units, causing concern about the rapid growth of spending in the last five years. The lawsuits partly explain the increase in spending on the strategic and specialized components of pharmaceutical care. Among the limitations of this study, the following stand out: the Pharmacy Population expenditure data include the supply of diapers and the non-inclusion of the values related to the supply of chemotherapeutics and other drugs used in the hospitals of the private network complementary to the SUS. **Conclusion**: In order to better understand the extent of this commitment, more research needs to be done to investigate in depth the determinants of expenditure growth, assessing its impact on population access, particularly on coverage, as well as identifying opportunities for resource management.