



# **Existing Pathways for Innovative Devices**

**Erin Cutts** 

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**Center for Devices and Radiological Health** 

**U.S. Food and Drug Administration** 









# The U.S. FDA's Breakthrough Devices Program



## **Breakthrough Devices Program**

- Intended to provide patients and health care providers with timely access to devices that provide for more effective treatment or diagnosis of lifethreatening or irreversibly debilitating diseases or conditions
- Expedites the development, assessment, and review of certain devices that meet the program eligibility criteria





## **Principles and Benefits**

- Interactive and timely communication
- Prioritized review of marketing application
- Enhanced opportunity for pre/post-market balance
- Efficient and flexible clinical study design
- Expedited review of preapproval manufacturing and quality systems compliance
- Preserves the statutory standards for marketing authorization





## **Regulatory Context**

- Program is statutorily mandated under Section 515B of the FD&C Act
- Guidance describes implementation
- Participation is voluntary for sponsors

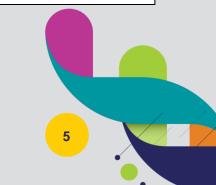
Contains Nonbinding Recommendations

# Breakthrough Devices Program Guidance for Industry and Food and Drug Administration Staff

Document issued on December 18, 2018.

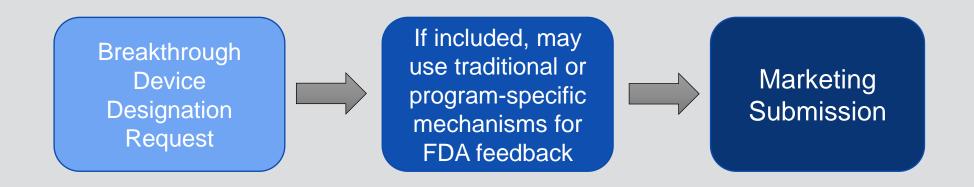
The draft of this document was issued on October 25, 2017.

This document supersedes "Expedited Access for Premarket Approval and De Novo Medical Devices Intended for Unmet Medical Need for Life Threatening or Irreversibly Debilitating Diseases or Conditions," issued on April 13, 2015.





## **Program Overview**



For devices granted Breakthrough Device designation:

- Designation tracks with the device for subsequent submissions
- Prioritized review and other benefits





# **Breakthrough Devices Designation Criteria**





## **Eligibility Considerations**

- Medical devices and device-led combination products
- Subject to future marketing authorization via Premarket Approval (PMA), De Novo, or 510(k)
- Meets the Breakthrough criteria specified in Section 515B(b) of the FD&C Act
  - Must fully meet Breakthrough Device Criterion 1
     AND one of the sub-parts of Breakthrough Device Criterion 2





## **Breakthrough Device Criterion #1**

Criterion 1: provide for more effective treatment or diagnosis of life-threatening or irreversibly debilitating human disease or conditions



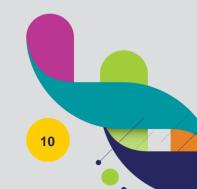
Reference: Section 515B(b)(1) of Food, Drug and Cosmetic Act





### Considerations for "more effective"

- Sponsor should demonstrate a reasonable expectation that the device could provide for more effective treatment or diagnosis of the disease or condition identified in the proposed indications for use
  - Technical success: the device could function as intended
  - Clinical Success: a functioning device could more effectively treat or diagnose the identified disease or condition
- Mechanisms for demonstrating a reasonable expectation of technical and clinical success could include literature or preliminary data (bench, animal, or clinical)





### Considerations for disease/condition

- Life-threatening: a disease or condition for which the likelihood of death is high unless the course of the disease is interrupted in a population or subpopulation
  - Examples: acute stroke, myocardial infarction, cancer
- Irreversibly Debilitating: impact on such factors as survival, day-to-day functioning, and the likelihood that the disease or condition, if left untreated, will progress to a more serious disease or condition.
  - Examples: amyotrophic lateral sclerosis (ALS)



## **Breakthrough Device Criterion #2**

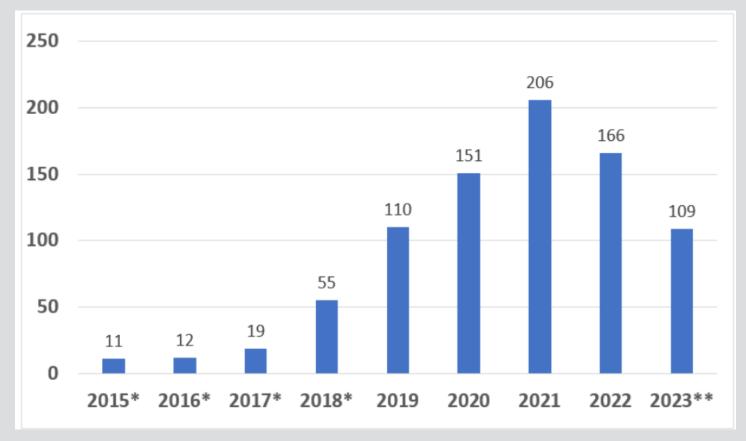
Meets one of the following sub-parts in Criterion 2:

- 2A: that represent breakthrough technologies; or
- 2B: for which no approved or cleared alternatives exist; or
- 2C: that offer significant advantages over existing approved or cleared alternatives; or
- 2D: the availability of which is in the best interest of patients.



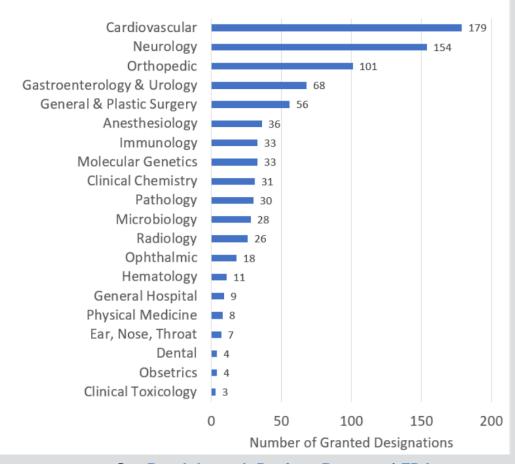


# Number of Granted Breakthrough Designation Requests by Fiscal Year (\*\*through June 30, 2023)





# Number of Granted Breakthrough Designation Requests by Clinical Panel (\*\*through June 30, 2023)



See Breakthrough Devices Program | FDA





# **Breakthrough Devices Program Features**





## **Breakthrough Devices Program Features**

- Data Development Plan
  - Optional map of development process from entry into program until marketing submission & post-market activities as necessary
- Sprint Discussion
  - Highly interactive process to facilitate reaching rapid agreement on a single development issue
- Clinical Protocol Agreement
  - Binding agreement on clinical study design/protocol
- Traditional Pre-submission
- Regular Status Updates
  - In between submissions, no feedback expectations
  - Useful for planning purposes





## **Marketing Submission**

- For devices seeking Breakthrough Device designation, a request must be requested prior to marketing submission
- Program principles and benefits applied to marketing submission
  - Interactive and timely communication
  - Priority review
  - Senior management engagement
  - Pre/post-market balance when appropriate
- Statutory standard for marketing does not change





# As of June 30, 2023, 81 Breakthrough Devices have received marketing authorization.

- 77 in CDRH, 4 in CBER
- List of all devices available here:
   Breakthrough Devices
   Program | FDA

Manufacturer $\Leftrightarrow$	Trade Name	Marketing Submission Number	<b>\$</b>	Marketing Submission Decision Date
RENALYTIX AI, INC.	KIDNEYINTELX.DKD	DEN200052		06/29/2023
ABBOTT MEDICAL	AVEIR DR LEADLESS SYSTEM	P150035/S003		06/29/2023
AVITA MEDICAL AMERICAS, LLC.	RECELL AUTOLOGOUS CELL HARVESTING DEVICE	BP220799		06/16/2023
PREMIA SPINE, LTD.	TOPS SYSTEM	P220002		06/15/2023
AVITA MEDICAL AMERICAS, LLC	RECELL AUTOLOGOUS CELL HARVESTING DEVICE	BP170122/S502		06/07/2023
ENDOLOGIX, LLC.	DETOUR SYSTEM	P220021		06/07/2023
CERIBELL, INC.	CERIBELL STATUS EPILEPTICUS MONITOR	K223504		05/23/2023
BRAHMS GMBH, PART OF THERMO FISHER SCIENTIFIC	B·R·A·H·M·S SFLT-1/ PLGF KRYPTOR TEST SYSTEM	DEN220027		05/18/2023
SWING THERAPEUTICS, INC.	STANZA	DEN220083		05/09/2023
W. L. GORE & ASSOCIATES, INC.	GORE TAG THORACIC BRANCH ENDOPROSTHESIS (TBE DEVICE)	P210032/S007		05/02/2023
NOCTRIX HEALTH, INC.	NTX100 TONIC MOTOR ACTIVATION (NTX100 TOMAC) SYSTEM	DEN220059		04/17/2023
MOXIMED, INC.	MISHA KNEE SYSTEM	DEN220033		04/10/2023
MASIMO CORPORATION	MASIMO SAFETYNET OPIOID SYSTEM	DEN200011		03/31/2023
BIORETEC, LTD.	REMEOS SCREW LAG SOLID	DEN220030		03/29/2023
REWALK ROBOTICS, LTD.	REWALK P6.0	<u>K221696</u>		03/02/2023
ABBOTT LABORATORIES	TBI	<u>K223602</u>		03/02/2023
REFLEXION MEDICAL, INC.	REFLEXION MEDICAL RADIOTHERAPY SYSTEM (RMRS)	DEN220014		02/01/2023



## Summary

- The Breakthrough Devices Program is intended to provide patients and health care providers with timely access to breakthrough devices.
- Devices are designated by meeting the statutory criteria.
- Designated Breakthrough Devices can benefit from program features intended to expedite the development, assessment, and review of these devices.







## THANK YOU / QUESTIONS

**Erin Cutts** 

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# EXISTING PATHWAYS FOR INNOVATIVE MEDICAL DEVICES

Sally Prawdzik

A/Director, Bureau of Policy and International Programs

Medical Devices Directorate, Health Canada







### **OVERVIEW**

Regulation of medical devices in Canada

Tools to support innovative medical devices

**Enabling Advanced Therapeutic Products** 

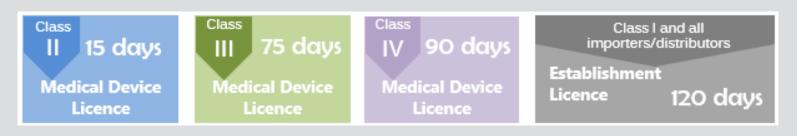




### REGULATION OF MEDICAL DEVICES IN CANADA



#### SERVICE STANDARDS & LICENCE TYPES







### TOOLS TO SUPPORT INNOVATIVE MEDICAL DEVICES

#### INNOVATION MEETINGS

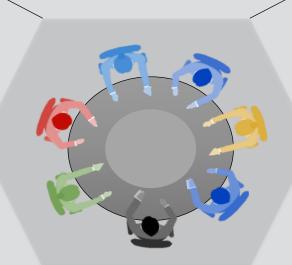
Opportunity to engage with manufacturers of innovative devices well in advance of the application process (investigational testing or licensing)

#### PRE-CLINICAL MEETINGS

Opportunity to discuss concerns and issues regarding the clinical protocol or device development strategy

#### PRE-SUBMISSION MEETINGS

Opportunity to present relevant data and discuss the information and evidence manufacturers intend to use to support a medical device licence application



#### PRIORITY REVIEW

Can be granted for certain Class III and IV medical devices intended for diagnosis or treatment of a serious disease or condition (with supporting clinical evidence)

#### AGILE LICENSING

Proposal to expand the scope of Terms & Conditions to support the life cycle approach for regulating medical devices

#### **DEVICE LICENCING INQUIRIES**

<u>devicelicensing-</u> <u>homologationinstruments@hc-sc.gc.ca</u>





### **ENABLING ADVANCED THERAPEUTIC PRODUCTS**



**Advanced Therapeutic Products (ATPs) are** drugs and/or devices that are so unique, complex and/or distinct that existing regulatory frameworks and enforcement tools are not equipped to handle them.

- Some innovative products, developed at a rapid pace in the health and biosciences sector, are anticipated to challenge Health Canada's current regulatory frameworks
- Changes to the Food and Drugs Act enabled Health Canada to create a new legislative pathway to authorize Advanced Therapeutic Products (ATPs)
- If a drug or device cannot fit within existing regulatory frameworks, the ATP Framework could be leveraged
- Tailored requirements, as part of an ATP Pathway, would be developed to address a product's specific characteristics, while maintaining Health Canada's high standards for patient safety







## THANK YOU / QUESTIONS

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Wong Woei Jiuang, Health Sciences Authority







## **Pre-Market Consultation (PMC) Scheme**

Channel for stakeholders to seek regulatory advice during medical device development phase to align with regulatory requirements.

# Medical Device Development Consultation

DISCOVERY +
IDEATION

DEVELOP + CLINICAL CLINICAL

REGULATORY SUBMISSION PRODUCT LAUNCH

Post –
Market
Monitoring

## Medical Device Pre-submission Consultation

Channel for stakeholders to seek feedback on their device dossier, prior to pre-market submission in terms of completeness and appropriateness of supporting documents.





## **Pre-Market Development Consultation**

Channel for stakeholders to seek regulatory advice during medical device development phase to align with regulatory requirements.

# Medical Device Development Consultation

**SCOPE:** Clarification on regulatory requirements applicable to the device in development, which may include

Regulatory strategy

Regulatory requirements

- Device claims
- Safety / Performance studies
- Sterility
- Biocompatibility
- Risk management
- Clinical trials

DISCOVERY +

PRE-CLINICAL

CLINICAL

REGULATORY SUBMISSION PRODUCT LAUNCH

POST – MARKET MONITORING





### **Medical Device Pre-Submission Consultation**

**SCOPE:** Seek feedback on the device dossier, in accordance to prescribed Common Submission Dossier Template (CSDT) guidance template, which may include

**Risk Classification** 

**Registration Route** 

Grouping

Technical & administrative documents

# Medical Device Pre-submission Consultation

Channel for stakeholders to seek feedback on their device dossier, prior to pre-market submission in terms of completeness and appropriateness of supporting documents.

DISCOVERY + IDEATION

DEVELOP +
PRECLINICAL

CLINICA

REGULATORY SUBMISSION PRODUCT LAUNCH

POST – MARKET MONITORING





### **Process & Timeline**

#### **5 Months before**

# 1. Appointment booking

Slots are available for booking on the online Appointment Booking System **5 months before** the appointment date.

E.g. on 1 August 2017, applicants will be able to book appointments till 31 December 2017.

#### ≥ 30 Days before

## 2. Document Submission

ALL required documents30 days before appointment date.

Failure to submit required documents by the due date may result in rescheduling or cancellation of the appointment.

#### •••

# Date

**Appointment** 

## Request for Information

Upon submission, HSA will review the documents and may request for further information or clarification via email before the appointment, where necessary.

Failure to respond or address deficiencies by the stipulated period may result in rescheduling or cancellation of the appointment.

No extension of due date is permitted.

Only ONE rescheduling is allowed per booking reference.

Fees paid are non-refundable.





#### **Priority Review Scheme**

#### Qualification criteria

#### Medical devices\* to be registered via FULL Evaluation Route



- Cancer
- Diabetes
- Ophthalmic diseases
- Cardiovascular diseases
- Infectious diseases



# Designed & validated to meet unmet clinical needs

Intended for a medical purpose with **no existing alternative** treatment or means of diagnosis

OR

Represents a breakthrough technology that provides a **clinically meaningful advantage** over existing legally marketed technology





#### **Supporting Innovation**

The developer of a gastric cancer test based on miRNA approached HSA as early as 2015 during the early phase of development of the test. HSA provided scientific and regulatory advice throughout the development of this test from 2015 to 2018

- Scientific advice on the design of the test kit
- Designing the analytical validation studies for the test
- Clinical study design and protocols
- Regulatory advice on the appropriate intended purpose and developing the instructions for use for the test including precautions, contraindications etc.

In Jan 2019, the GASTROClear test was submitted for evaluation and registration by MirXes under Priority Review.

Registered in May 2019





#### **Supporting Digital Health Product Innovation**

#### 1. Immediate Registration Pathway for Standalone Software and Mobile Applications

This pathway was implemented in 2018 by leveraging the regulatory review and approval from our reference regulatory agencies in Australia, Canada, the European Union, Japan and the United States. This pathway allows immediate market access upon successful submission of a product registration application, while we perform a backend review to verify the qualification criteria are met and that these devices are safe and effective for use on our patients. More information on the various product registration pathways can be accessed in our Guidance on medical device product registration. [Click <a href="here">here</a>]

#### 2. Regulatory Guidelines for Telehealth Product

To help manufacturers, developers or importers of a digital health device to (i) determine if their device, software or app are regulated medical devices under HSA and (ii) understand the relevant regulatory requirements. [Click here]

#### 3. Device Development Consultation Scheme

The purpose of the consultation is to provide medical device developers and/ or researchers with a platform to seek regulatory advice during various stages of the medical device development (e.g. device validation, clinical trial), in preparation for regulatory submission. [Click here]

#### 4. Regulatory Guidelines for Software Medical Devices

This serves as a one stop reference on the regulatory requirements for management of software in medical devices throughout its entire life cycle. [Click here]

#### 5. Artificial Intelligence (AI) in Healthcare Guidelines

Co-developed by MOH, HAS and Synapxe (previously known as IHiS) to provide a set of recommendations to encourage the safe development and implementation of Al-Medical Devices. [Click <a href="here">here</a>]





#### Pandemic Special Access Route (PSAR)

#### Key features

- Designation of an emergency therapeutic product (ETP) or emergency medical device (EMD) by Minister contingent on the following criteria:
  - The need for the ETP or EMD to be used for the treatment, prevention or diagnosis of any potentially serious or lifethreatening medical condition resulting from a civil defence emergency or infectious disease outbreak; and
  - HSA's (scientific) determination that the benefits of using the ETP or EMD outweigh the risks, both at the outset and on an ongoing basis. There is continued exercise of regulatory oversight through ongoing iterative review of safety and efficacy data which are made available over time

"civil defence emergency"
means any fire, explosion,
earthquake, oil spill, eruption,
flood, storm, hazardous
materials incident or other
happening (whether or not
attributable to an attack by an
enemy or to any warlike act)
that causes or may cause
destruction of or damage to
property or loss of life or injury
or distress to persons or that in
any way endangers the safety
of the public in Singapore or in
any part thereof;







## THANK YOU / QUESTIONS

**Contact information** 

Email: wong\_woei\_jiuang@hsa.gov.sg

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João Martins - Abbott









**João Martins** 

**Abbott** 

25 September 2023





## **OVERVIEW**

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## **General Objectives and Device Scope**

- Provide patients and health care providers with timely access to medical devices.
- Provide innovators and manufacturers with a support service that brings new products to patients sooner.
- Device eligibility for innovative pathways depends on a serious of criteria:
- Provides treatment or diagnostic of Life-threatening or seriously debilitating disease/condition
- Unmet need/significant improvement to existing alternatives
- Breakthrough Technology





## **Pathways for Innovative Medical Devices**

Country/Jurisdiction	Program/Pathway name	Responsible entity	Details
Australia	Priority Review designation	TGA	Priority application guidelines and application forms are available.
Canada	Pathway for advanced therapeutic products	Health Canada	Consultation period closed on March, 2023. Innovation information meetings take place.
China	Innovation Green Pathway	NMPA	Applicant's ownership of legal patent rights of the product's core technology in China.
European Union (EU)	Expert Panels	Experts appointed by the European Commission	Several opinions have been provided and are available <u>here</u> .
Japan	Fast Track Review Process	PMDA	Fast-track review and conditional fast-track review pathways.
United Kingdom (UK)	Innovative Devices Access Pathway (IDAP)	MHRA, NICE and other partners	Launched September 2023.
United States of America (USA)	Breakthrough Devices Program	U.S. FDA	As of June 30, 2023, 81 Breakthrough Devices received marketing authorization.



## Messages

 Stakeholders' collaboration is key to ensure safe and effective medical devices reach patients in need in a timely manner.

 "The future of medical products regulation is in convergence/harmonization, collaborating, and networking based on reliance and trust"







## THANK YOU / QUESTIONS

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#### **Abbott**

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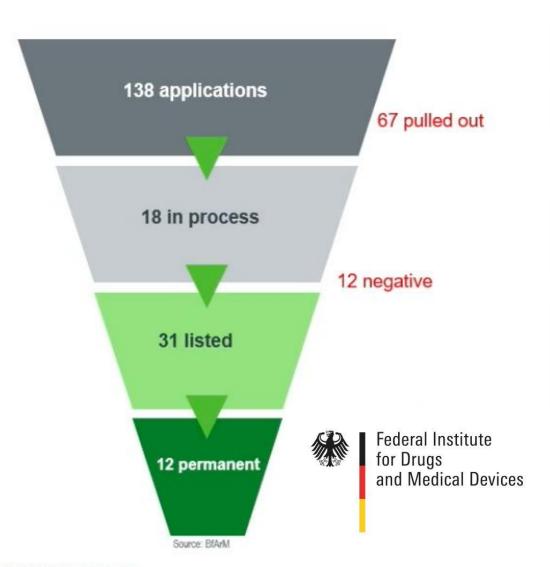
# Korea Regulatory Achievements and Future of Digital Therapeutics: Industry Perspective

Yujin Lee, MD, WELT corp



### The German market is opening for digital therapies

31 apps are now listed as DiGA (as of 22nd June)





# France to enable rapid market access for digital therapeutics

Emmanuel Macron announced plans to replicate Germany's DiGA Fast Track process.

By Tammy Lovell | October 20, 2021 | 06:45 AM









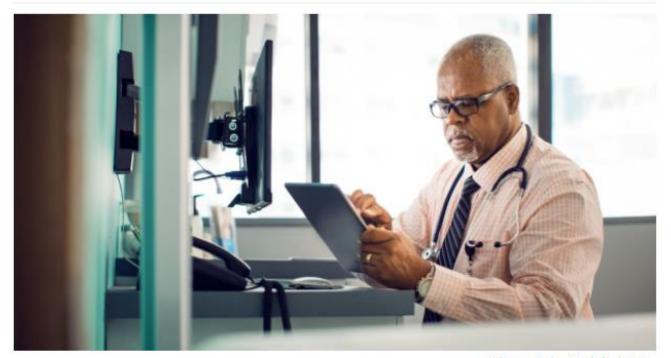


Photo: John Fedele/Getty

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	France		-	
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	Spain			
	Austria			
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	Italy			
	Ireland			
0	Portugal			





#### Korea Regulatory achievements for DTx



21st Century Cures Act (2016) Enactment of legislation for technological innovation and advancement aimed at improving patient access and efficiency of medical care

Digital Health Innovation Action Plan (2017) FDA policies and procedures for active adoption of digital health

Digital Health Pre-Cert Program (pilot: 2017-2020)

Development of a concise and efficient regulatory model for software as medical devices (SaMD)

#### MFDS of Korean government

#### 2020, 02, 21

Revision of safety management guidelines for mobile medical apps 디지털 치료제를 의료기기로 분류하여 포함

#### 2020. 03. 06

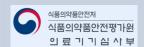
Expert Council for Digital Therapeutics Guideline



WELT corp
Participate as committee

#### 2020.08.27

Disclosure of digital therapeutics approval guidelines 제조·수입 허가·인증, 기술문서 등 심사, 임상시험계승인 등

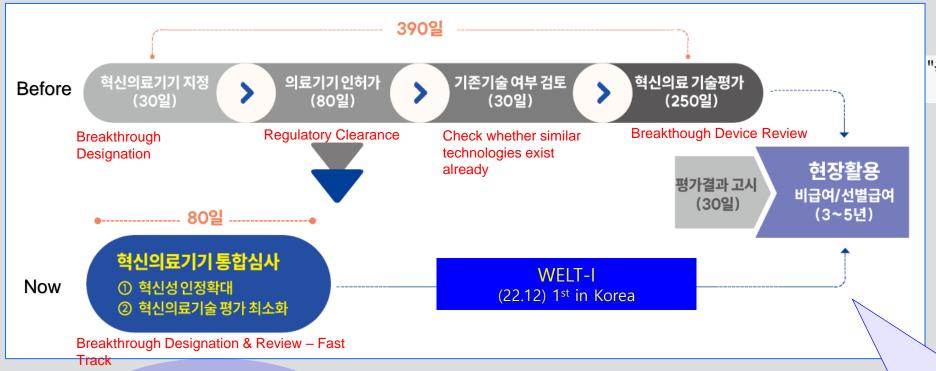




WELT product used as Guideline example



#### 'Fast Track Case #1'



"국내 AI 의료기기, 130개 허가 품목 중 보험등재 두 건뿐"

> Only 2 out of 130 approved AI medical devices are covered under insurance







**Faster Market Entry &** Reimbursement



# IMDRF International Medical Device Regulators Forum EU2:::23 EUROPEAN UNION Chaur

#### WELT-I ver 1.0









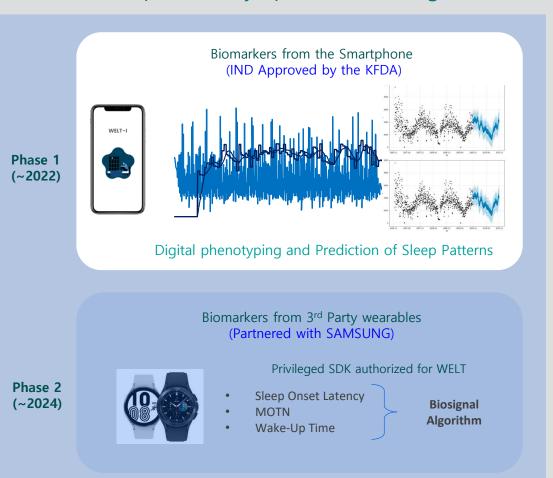


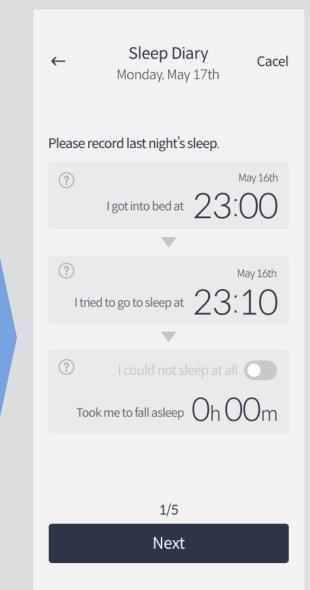


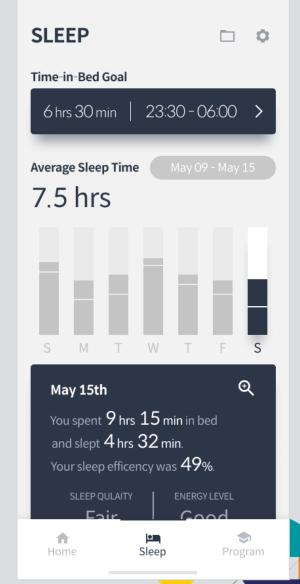
**[**]

#### WELT-I ver 2.0

#### Al-powered symptom monitoring







#### WELT-I ver 3.0

## **Safety**

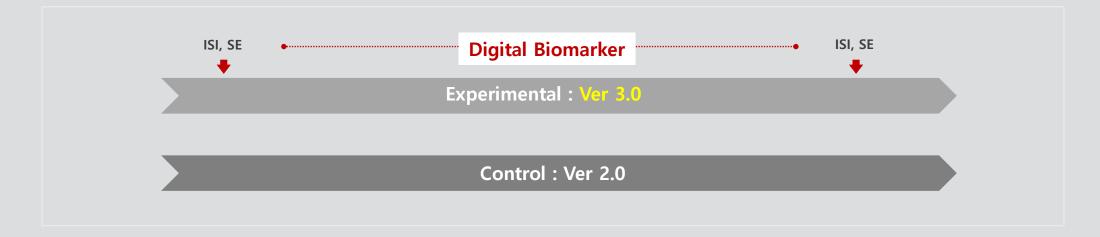
## **Efficacy**

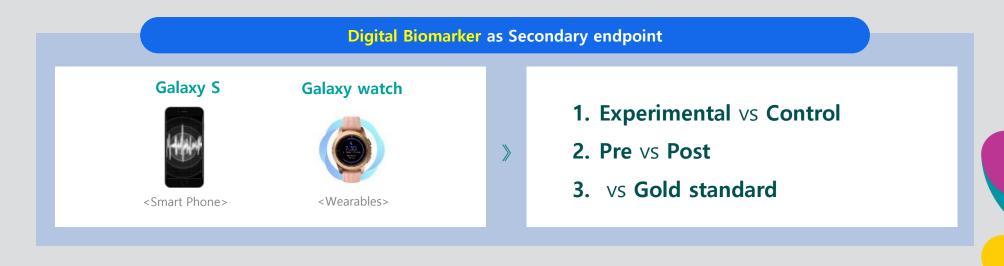


Based on your lifelog data, the



### **Decentralized Clinical Trial** (DCT= RWE = eQMS)





# IMDRF International Medical Device Regulators Forum EU2:::23 EUROPEAN UNION Phaur

## **Korea = Best place for evolution**



#### SAMSUNG

Now, all you need is your Galaxy Watch3 to measure blood pressure

















#### 의료기기의 실사용증거(RWE) 적용에

대한 가( (민원인

Contains Nonbinding Recommendations

Use of Real-World Evidence to Support Regulatory Decision-Making for Medical Devices

## Guidance for Industry and Food and Drug Administration Staff

2019.

Document issued on August 31, 2017.

The draft of this document was issued on July 27, 2016

For questions about this document regarding CDRH-regulated devices, contact the Office of Surveillance and Biometrics (OSB) at 301-796-5997 or <u>CDRHClinicalEvidence@fda.hhs.gov.</u> For questions about this document regarding CBER-regulated devices, contact the Office of Communication, Outreach, and Development (OCOD) at 1-800-835-4709 or 240-402-8010.







Center for Devices and Radiological Health

Center for Biologics Evaluation and Research

#### 의료기기 소프트웨어 경미한 변경사항 관련 주요 질의응답 사례



Contains Nonbinding Recommendations

## Deciding When to Submit a 510(k) for a Change to an Existing Device

## Guidance for Industry and Food and Drug Administration Staff

2023.

Document issued on October 25, 2017.

The draft of this document was issued on August 8, 2016.

This document supersedes Deciding When to Submit a 510(k) for a Change to an Existing Device, dated January 10, 1997.

For questions about this document regarding CDRH-regulated devices, contact the 510(k) Staff at 301.796.5640

For questions about this document regarding CBER-regulated devices, contact the Office of Communication, Outreach, and Development (OCOD) at 1-800-835-4709 or 240-402-8010.



U.S. Department of Health and Human Services Food and Drug Administration



Center for Devices and Radiological Health Center for Biologics Evaluation and Research

## **Future of Digital Therapeutics**

INDRIInternational Medical Device
Regulators Forum

EU2:::23
EUROPEAN UNION Displace

Precision and predictive medicine

**Safety** 

**Efficacy** 







# Existing Pathways for Innovative Medical Devices

Nataliya Deych – Edwards Lifesciences







# What Does it Take to Innovate? High Risk Cardiovascular Implants

**Nataliya Deych** 

**Edwards Lifesciences** 

25 September 2023





## **OVERVIEW**

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## **Cardiovascular Implants**

Cardiovascular Diseases (CVDs) are the leading cause of death in many GEOs and an important factor in the number of chronic conditions and disabilities. Only in EU CVDs costed 282BN€ in 2021

Complex high risk cardiovascular implants are a small part of medical device portfolio with significant contribution to advancing health.

- FDA: ~ 10% of medical devices are Class III devices
- ESC: "More than 50% of high-risk implantable medical devices in Europe are used in cardiology and orthopaedics such as heart valves and hip replacements"
- Cardiovascular treatments become highly specialized (sub- specialties)







## Stages of innovation development – SAPIEN 3 Ultra

- 100+ cross-functional team members
- ~4 yrs. developing and gathering evidence
- >100's of tests
- >1000's components utilized





#### **Build on proven design of SAPIEN 3**

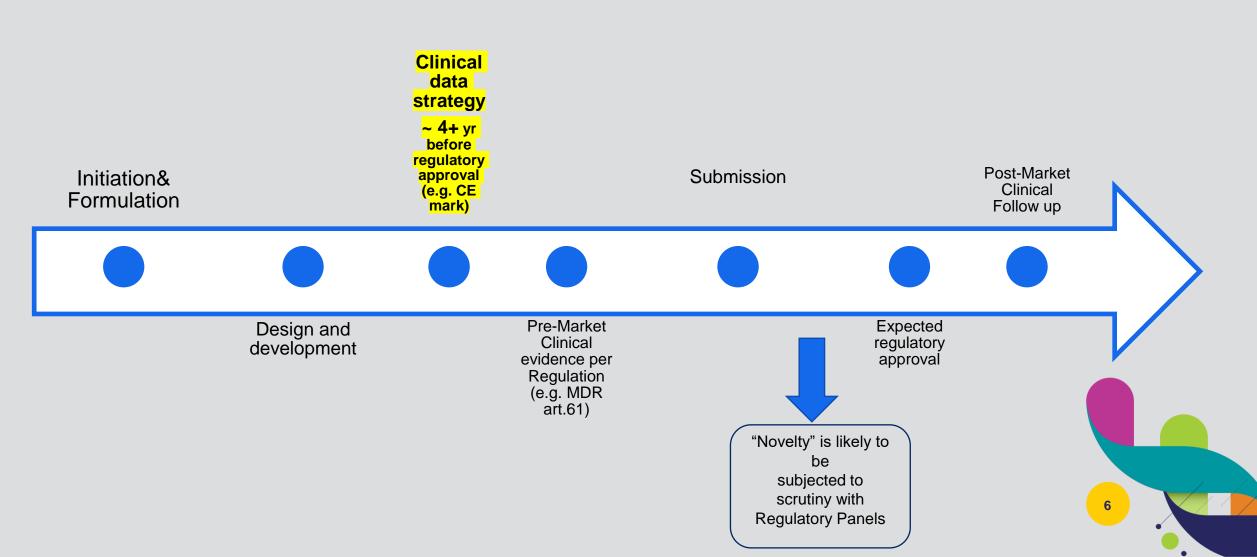
- Outerskirt increased by 40%
- Same biocompatible outerskirt material
- ~50% additional skirt to anatomy contact area







## Why Interactive Approach is Important?





## Incentives that help attracting innovation

- Secure predictable regulatory environment to attracts investment
- •Innovator and Regulators interaction should start from early clinical development
- •Interactive scientific discussion and timely communications throughout the regulatory process
- •Incentives that improve ROI, such as: harmonised EFS, priority review, grants for e.g. early clinical development







## THANK YOU / QUESTIONS

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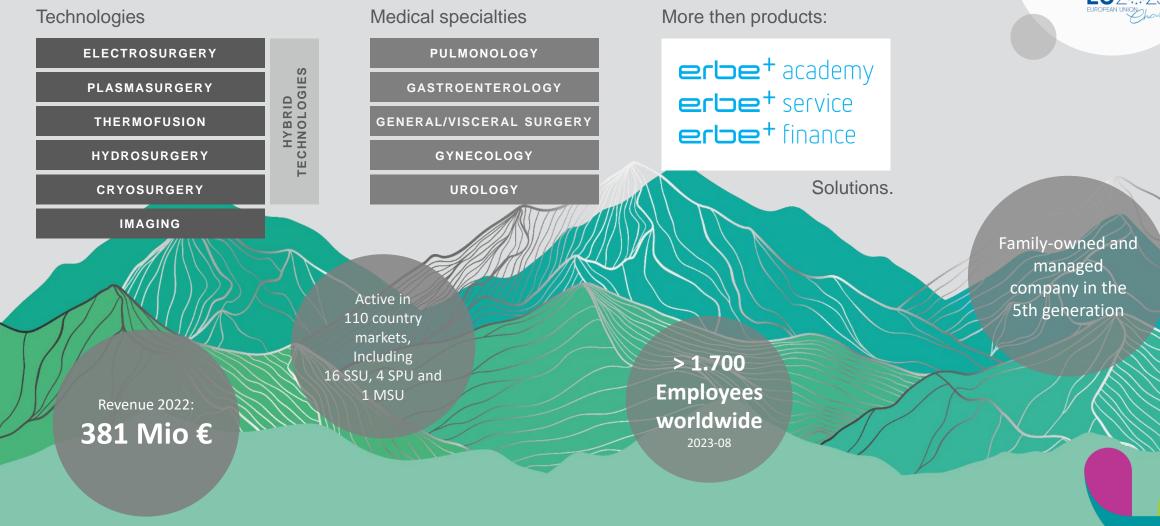
# Innovative medical devices Existing pathways for innovative medical devices

**Erbe Elektromedizin | Dr Helmut Scherer, CTO** 















## Registration strategies

Analyze the intended use of your new product very detailed and compare with your existing products AND competition!

Analyze your existing technologies also in parts and try to create synergies between them and your new product

Analyze the literature in detail (again also include parts of the technology from competitors)

Performance Route: Show the outcome with numbers to

Show the outcome with numbers to your authority (separated by region but show all)

Show a summary of the risk analysis with the remaining risks

Create a
PMS plan –
in most
cases a
PMCF plan
where you
really collect
data that
you need
anyway to
improve
your
product.



#### Intended use





The VIOsect is intended for bipolar separation and ligation of vessels and tissue bundles as well as for gripping, dissecting, cutting and coagulating tissue.

It is also intended for soft tissue incisions to be made with bleeding control and minimal low thermal injury.



## **Technology Experience**

Year of introduction of technology for sealing of vessel larger than 3 mm / cutting	Brand name	Manufacturer	Technology
1998 (US patent US005827271A, "Energy Delivery System for Vessel Sealing") 1998 (US: FDA Zulassung, 510(k) K981916)	LigaSure	Covidien (today: Medtronic)	Bipolar coagulation/sealing
2005 (CE)	BiClamp	Erbe Elektromedizin GmbH	Bipolar coagulation/sealing
2007 (US: FDA Zulassung, 510(k) K070165)	Enseal	SurgRx, Inc. (today: Johnson & Johnson, Ethicon)	Bipolar coagulation/sealing, Mechanical cutting
2008 (US: FDA Zulassung, 510(k) K024286)	Trisector (today: PKS Omni)	Gyrus ACMI (today: Olympus)	Bipolar coagulation/sealing, Bipolar cutting
2011 (CE)	BiCision	Erbe Elektromedizin GmbH	Bipolar coagulation/sealing, Mechanical cutting
2011 (CE)	BiSect	Erbe Elektromedizin GmbH	Bipolar cutting
2012 (US: FDA Zulassung, 510(k) K111202)	Thunderbeat	Olympus	Bipolar coagulation/sealing Ultrasonic cutting
2012 (US: FDA Zulassung, 510(k) K121550)	Harmonic	Johnson & Johnson, Ethicon	Ultrasonic coagulation/sealing Ultrasonic cutting



### **Evidence**

#### Performance

Laboratory tests (30 tests in 2018/2019) prove the efficiency.

- To date: burst pressure, function and stability, tissue
- Planned: Live animal, further burst pressure, 21-day survivor animal test.

#### Safety

- Usability tests (65 surgeons, some of them interviewed several times) were conducted and prove safe use
- Standard tests prove the technical safety of the prototypes

#### Benefits

Reference data demonstrates less frequent and less significant complications compared to conventional technologies; in addition:

- Handling
- Reduced instrument changes



## Results usability test

#### Formative usability test with functional 3D printing samples (52 users)

Function	Evaluation mark	Mean value at maximum response 5 (number of responses)
In general	Safety after use	4,6 ± 0,6 (37)
	Suitability	$4.6 \pm 0.6 (39)$
Preperation	Safety	4,8 ± 0,3 (29)
	Suitability, Simplicity	4,8 ± 0,3 (29)
	Ergonomics	4,8 ± 0,3 (29)
Dissection	Safety	4,5 ± 0,8 (33)
	Suitability, Simplicity	4,9 ± 0,2 (30)
Coagulation	Safety	$5.0 \pm 0.0 (29)$
	Suitability, Simplicity	4,7 ± 0,5 (30)
	Ergonomics	4,9 ± 0,3 (27)







### Performed standard tests

### **Applied Standards**

- EN 60601-1 Third Edition from October 2006 + A1 October 2013 (General Requ.)
- IEC 60601-2-2 Ed. 6.0 from March 2017 (HF Equipment)
- EN 60601-1-2 Fourth Edition from September 2015 (EM Disturbances)
- EN 60601-1-6 Edition from April 2010 + A1 May 2015 (Usability)
- EN ISO 14971 Edition from July 2012 (Risk Management)
- EN 62366-1 April 2015 + AC December 2015 (Usability)
- EN 556-1 Edition from October 2001 + AC November 2016 (Sterilization)
- EN ISO 11135 Edition from July 2014 (Sterilization EO)

- EN ISO 11607-1 Edition from July 2017 (Packaging, Materials)
- EN ISO 11607-1 Edition from July 2017 (Packaging, Validation)
- EN ISO 11737-1 Edition from April 2006 + AC from April 2009 (Packaging, Microbiology)
- EN ISO 11737-2 Edition from November 2009 (Packaging, Microbiological Tests)
- EN ISO 10993-1 Edition from October 2009 + AC June 2010 (Biololgical Evaluation)
- EN 1041 Edition from August 2008 + A1:2013 (supplied Information)
- EN ISO 15223-1 Edition from November 2016 (Symbols)



### **Basic research**

### From 1991 literature sources 592 were identified & analyzed

## Livivo and PubMed query for the following search terms (any time until 04.06.2018 (date of search)):

- BiClamp: PubMed 37 hits, Livivo 61 hits
- BiCision: PubMed 4 hits, Livivo 28 hits
- BiSect: PubMed 2 hits, Livivo 15 hits
- bipolar vessel sealing: PubMed 260 hits, Livivo 349 hits
- thermofusion: PubMed 22 hits, Livivo 495 hits
- laparoscopic, bipolar, tissue dissection: PubMed 124 hits, Livivo 51 hits

- laparoscopic scissors: PubMed 367 hits, Livivo 393 hits
- Vessel sealing, injury: PubMed 52 hits, Livivo 47 hits
- ENSEAL: PubMed 35 hits, Livivo 39 hits
- LigaSure: PubMed 606 hits, Livivo 782 hits
- Harmonic ACE: PubMed 73 hits, Livivo 88 hits
- Thunderbeat: PubMed 22 hits, Livivo 21 hits
- Sonicision, Medtronic: PubMed 8 hits, Livivo 0 hits

### **Evaluation**

The use of thermofusion instruments is known in the market, safe and effective.

All mentioned risks have been balanced in with risk analysis.





## Vigilance data

Instrument name	Year	Reclamation rate	Number of approved incidents	Number of approved complaints	Number of sales
BiCision	2014-2018	0.3 %	5	77	25458
BiClamp	2014-2018	1.6 %	22	756	47284
BiClamp MF-2	2018	1.25 %	0	3	240
BiSect	2014-2018	0.51 %	0	34	6650



## Vigilance data

### **Competitors and own products**

#### Review

A review of adverse events for "advanced" bipolar thermofusion devices was performed within the data bases of BfArM and MAUDE

#### Search terms

- time range from 2014/01/31 to 2019/01/31
- BiCision, BiClamp, BiSect, EnSeal, Ligasure, Harmonic
- Death, injury, malfunction
- Because of >500 number of entries, the search terms for "injury" and "malfunction" for the brand name "Ligasure" was narrowed to the devices "Ligasure Maryland" and "Ligasure Blunt"
- Because of >500 number of entries, the search terms for "malfunction" for the brand name "Enseal" was narrowed to "Enseal G2"
- Because of >500 number of entries, the search terms for "malfunction" for the brand name "Harmonic" was narrowed to "HAR36" and "HAR23", respectively.

### Action

Vigilance data across some thermofusion products, have been incorporated and assessed in the risk analysis.









## We'll see you in the future.

## erbe

power your performance.









## **THANK YOU / QUESTIONS**



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# Innovative medical devices Opportunities for convergence and reliance

**Augusto Geyer – ANVISA** 







## ORIGIN OF LICENSED MD IN BRAZIL

Position	Country	Authorizations	Percentage
0	Brazil	26546	30,11%
1	USA	15613	18,40%
2	China	12462	13,99%
3	Germany	8484	10,02%
4	Italy	2284	2,64%
5	France	2197	2,60%
6	UK	1605	2,40%
7	Switzerland	1588	1,91%
8	South Korea	1433	1,75%
9	Japan	1384	1,53%
10	India	1282	1,49%
11	Spain	1030	1,16%
12	Argentina	809	0,96%
13	Ireland	710	0,85%
14	Taiwan	706	0,79%
15	Pakistan	672	0,79%
16	Sweden	612	0,73%
17	Denmark	576	0,68%
18	Israel	483	0,56%
19	Turkey	478	0,55%
20	Malaysia	474	0,55%



National Imported

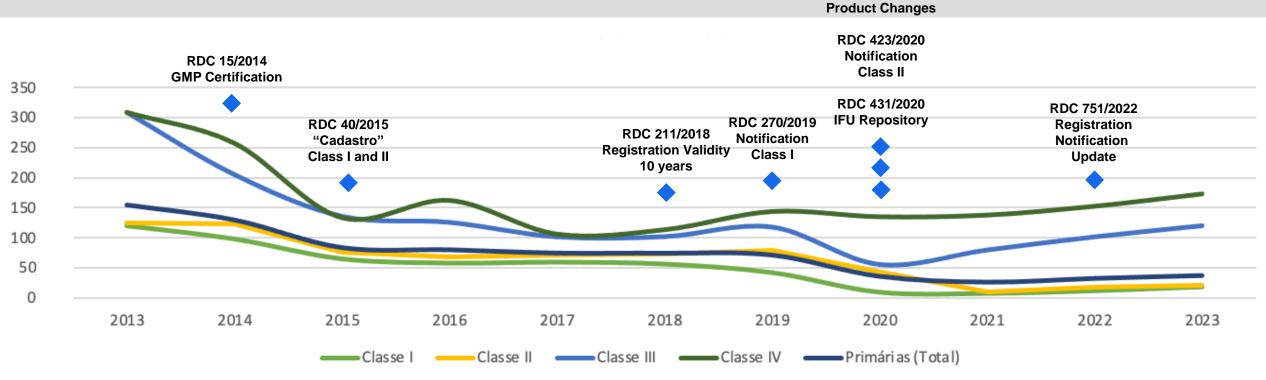
31,6% 68,4% (Mar 2023)





RDC 340/2020

### MEDICAL DEVICE MARKET AUTHORIZATION



Average Time to Final Decision from ANVISA per Risk Class (days)







### REGULATORY CONVERGENCE

### **Key Factors and Motivations**

- Complexity of the MD sector
- Predictability
- Capacity and confidence building
- Avoid duplication of efforts for Regulators and Industry
- Globalization of supply chains
- Accelerate patient access to new technologies
- Patient safety and public health





















reliance. The act whereby a regulatory authority in one jurisdiction takes into account and gives significant weight to assessments performed by another regulatory authority or trusted institution, or to any other authoritative information, in reaching its own decision. The relying authority remains independent, responsible, and accountable for the decisions taken, even when it relies on the decisions, assessments, and information of others.

(WHO Global Model Regulatory Framework)





abridged pathways. Regulatory procedures facilitated by reliance, whereby a regulatory decision is solely or widely based on the application of reliance. This usually involves some degree of work by the relying agency.

(WHO Global Model Regulatory Framework)





### **Structured regulation on reliance – RDC 741/2022**

Pathway for abridged review process

Normative Instruction for MD and IVD MD under public consultation

- Public Consultation 1200/2023
- http://antigo.anvisa.gov.br/consultas-publicas#/visualizar/509352
- Open for contributions until 25 October 2023

Product registration certificates from Equivalent Foreign Regulatory Authorities will be used as a trigger for expedited review

Initially from the same founding members authorities of MDSAP







### **Conditions that will apply**

Agreement on the exchange of confidential information with the Foreign Equivalent Regulatory Authorities

Classes III and IV – Registration submissions

Product should be essentially the same

- Same intended use (and indications for use)
- Same manufacturing sites and legal manufacturer
- Same "regulatory version"







### **Conditions that will apply**

Brazilian labelling and specific certification requirements must be fulfilled

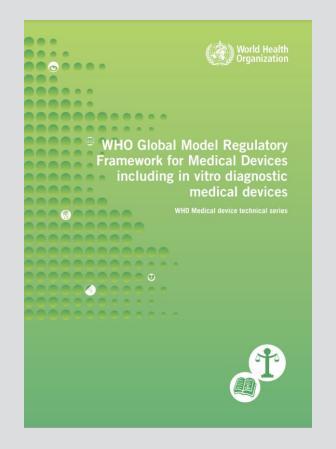
Anvisa may choose to perform the full assessment of the Technical Dossier

Anvisa may request clarification regarding the documents submitted for review





Implementation of Reliance as a Measure of Regulatory Maturity









Augusto Geyer – Medical Devices Office – ANVISA augusto.geyer@anvisa.gov.br

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# Opportunites for Reliance & Convergence - an APAC Snapshot

Yasha Huang, Head Regulatory Policy APAC, Roche Diagnostics/APACMed RA Committee Vice Chair







## The Interplay between Convergence and Reliance

### Convergence

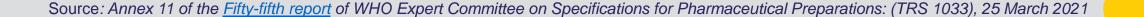
A voluntary process whereby the regulatory requirements in different countries or regions become more similar or "aligned" over time.

Convergence results from gradual adoption of internationally recognized technical guideline documents, standards and scientific principles, common or similar practices and procedures or the establishment of appropriate domestic regulatory mechanisms that align with shared principles to achieve a common public health goal.



#### Reliance

The act whereby a regulatory authority in one jurisdiction takes into account and gives significant weight to assessments by another regulatory authority or trusted institution or to any other authoritative information in reaching its own decision. The relying authority remains independent, responsible and accountable for the decisions taken, even when it relies on the decisions, assessments and information of others.





## How does the interplay work

- Reliance represents a "smarter" form of regulatory oversight, based on constructive regional and international collaboration, that will facilitate and promote convergence and the use of common international standards and guidelines, resulting in more predictable, faster approval to improve access to quality-assured medical products for patients worldwide.
- <u>Convergence</u> and harmonization of requirements, standards and guidelines are important <u>enablers</u> of regulatory cooperation and <u>reliance</u>.
- However, differences in standards and practices, do not prevent one authority from relying on another, particularly when the relying authority has limited capacity and expertise.



### Reliance in a glance for APAC

(Data source: Roche internal analysis of 14 markets for IVD products only)

	Formal reliance existing (based on current effective regulations)	Informal or no reliance existing (based on current effective regulations)
Markets (in alphabetical order)	AU IN JP MY  SG TH VN	CN ID KR MM

#### Notes:

- Even for markets with formal reliance models, there is still huge potential for further improvement on efficiency and/or expansion to the total product lifecycle.
- Markets were categorized as informal reliance due to different reasons; markets with no official regulation in place will be categorized as no reliance existing.





# WHO recommends, "the concept of reliance for regulation of medical products should be applied throughout the life cycle of medical products and in all regulatory functions."

(Data source: Roche internal analysis for IVD products only)

	Markets with formal reliance mechanism		
Pre-market registration	AU IN MY SG TH VN		
QMS	AU IN JP MY SG TH VN		
Clinical	AU IN JP MY SG TH VN		
Post-approval changes	AU		
Vigilance			

- In APAC, reliance is mostly practiced in the QMS, clinical and pre-market registration, indicating big potential for future expansion into other phases (post-approval changes & vigilance).
- Most of these markets rely on GHTF countries.



## **Opportunities for Convergence**

There is better convergence among markets with formal reliance mechanism

Convergence status

Yes	Partial	No

Formal reliance existing

No

formal

reliance



Data source: Roche internal analysis of 14 markets for IVD products. Country K is N/A because there is no enforced regulation for MD/IVD yet.



## Benefits of implementing global convergence and reliance

- Conserve and optimize the use of limited regulatory resources, elevate regulation to one high standard and accelerate access to safe, high-quality, effective, and innovative medical technologies to benefit patients, caregivers, and healthcare providers.
- Facilitate an environment conducive to the growth of the medical technology sector, enhancing innovation and providing knowledge-based jobs.
- Enhance global health equity through the acceleration of global access to safe, effective and innovative medical technologies.

"The future of medical products regulation is in convergence/ harmonization, collaboration, and networking based on reliance and trust."







## **THANK YOU**

### **Yasha Huang**

Head of Regulatory Policy APAC, Roche Diagnostics/Vice Chair, APACMed Regulatory Affairs Committee <u>yasha.huang@roche.com</u>

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Pre- and Post-Market Clinical Evidence Strategies for Innovative Medical Devices
Opportunities for Convergence and Reliance

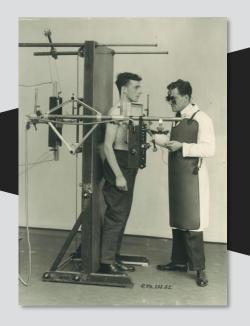
Latifa Lakehal, Philips / Dr. Johanna Sorsa, Siemens Healthineers



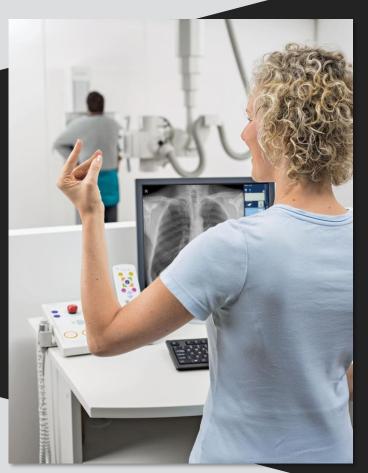


# IMDRF International Medical Device Regulators Forum EU2:::23 EUROPEAN UNION Character EUROPEAN

### THE INNOVATION AS DRIVER







## IMDRF International Medical Device Regulators Forum EU2:::23 EUROPEAN UNION That



### **BALANCE BETWEEN INNOVATION AND REGULATORY CONTROLS**

Patient populations are evolving

The importance of patient experience is growing

Qualified clinical staff are in short supply

The cost of providing care is rising overall

Opportunities and challenges of digitalization















### REGULATORY CONVERGENCE FOR THE BENEFIT OF THE PATIENT

"Regulatory convergence," on the other hand, represents a process whereby the regulatory requirements across countries or regions become more similar or "aligned" over time as a result of the gradual adoption of internationally recognized technical guidance documents, standards and scientific principles, common or similar practices and procedures, or adoption of regulatory mechanisms that might be specific to a local legal context but that align with shared principles to achieve a common public health goal. It does not necessarily represent the harmonization of laws and regulations, which is not a prerequisite for allowing the alignment of technical requirements and greater regulatory cooperation.

Source: U.S. FDA Regulatory Harmonization and Convergence, 08/07/2019

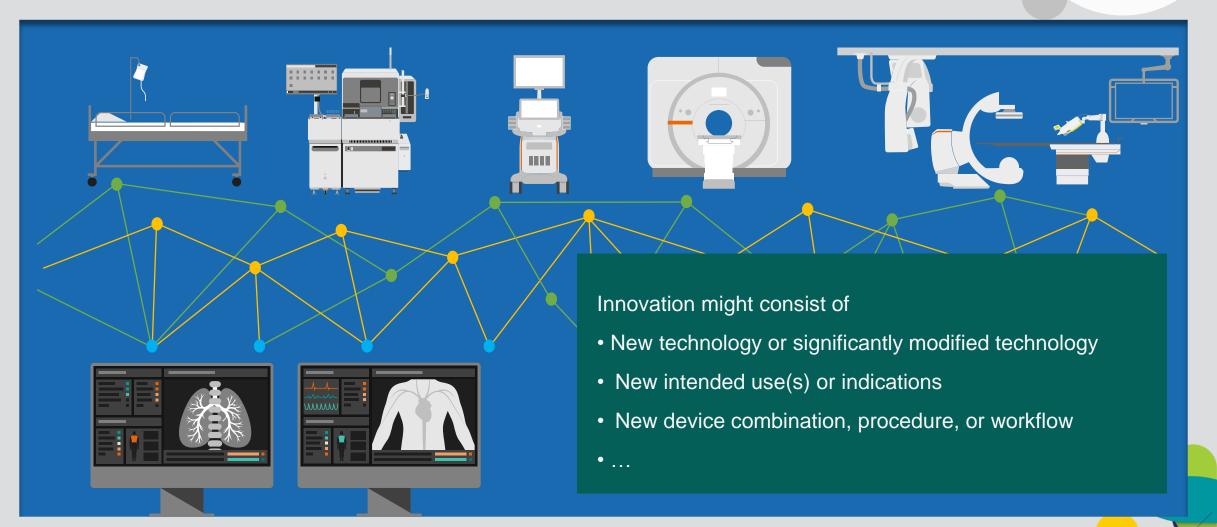
# THE HEART OF THE REGULATORY FRAMEWORK IS THE PATIENT – UNDER TWO MAIN PILLARS: SAFETY AND INNOVATION





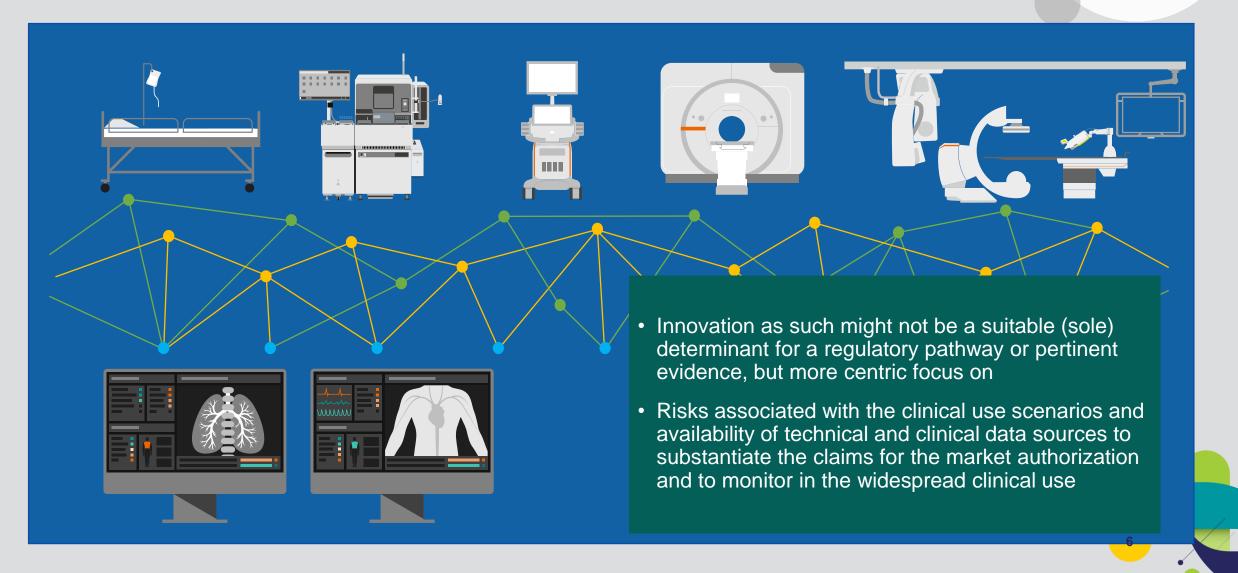


### **INNOVATION IN MEDICAL TECHNOLOGIES**



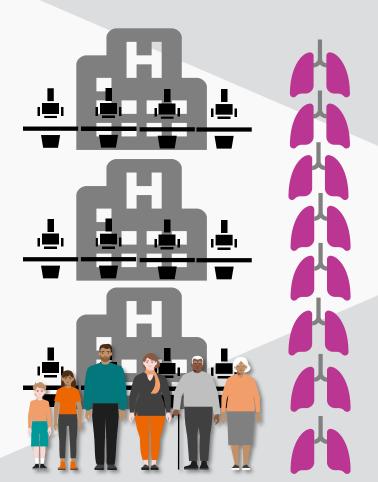


### **INNOVATION IN MEDICAL TECHNOLOGIES**



# IMDRF International Medical Device Regulators Forum EU2:::23 EUROPEAN UNION CHARM

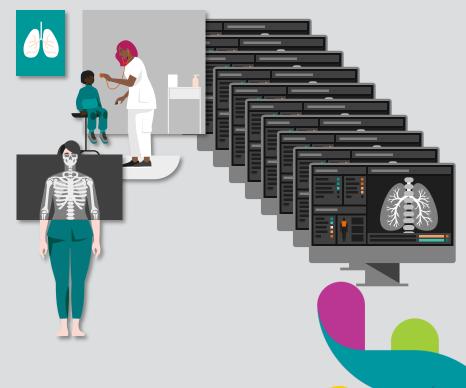
### **DATA - DRIVEN DEVELOPMENT**



**Training** 



**Clinical validation** 



Real-world evidence generation



### VARIABLE REAL-LIFE USE SCENARIOS

#### Pre-market assessment:

- technical testing scenarios
- clinical use scenarios, including prospective and retrospective studies
- state-of-the-art
- risk management
- .....

Simulating and predicting real-life use in a controlled environment

Variations in the **real-life use** scenarios:

- patient populations
- clinical routine procedures
- user interfaces and workflows
- use environments
- staff knowledge levels
- . . . . .

**Unexpected** is expected

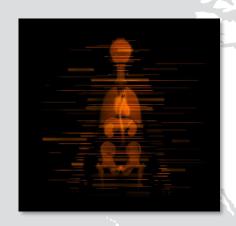




### HOLISTIC CLINICAL LIFECYCLE MANAGEMENT SYSTEM

**Clinical evaluation** 

**Confirmation** and monitoring



Design and

development

Technical performance Clinical performance

Generalisability Usability Post-market surveillance: complaint handling and trending, field (safety) actions, vigilance data

Post-market clinical follow-up (PMCF)/Real-World-Evidence (RWE): prospective studies, retrospective data analysis, reference site follow-up, automated customer input modules, installed base and stationary use analytics, published data screening....

**Product risk management:** 

assessment of new and known clinical risks, right assignment of the intended purpose and correctness of the information provided to the user



### **CLINICAL EVALUATION: STANDARD FRAMEWORK**

### **Target:**

- Global guiding principles on the scientific assessment of the device's clinical performance, benefits, and safety
- Do not contradict the regulatory frameworks of the major legislations (EU, GHTF, USA, Japan, China)
- Minimal consensus on the clinical evaluation independently of the device type, risk classification, clinical application, and maturity of the technology
- Cross-process alignment and harmonization with the other applicable ISO standards to the medical devices and manufacturers (esp. ISO 14971, ISO 13485)

### **Basis framework:**

- IMDRF/SaMD WG/N41FINAL:2017 Software as a Medical Device (SaMD): Clinical Evaluation
- IMDRF MDCE WG/N56FINAL:2019 (formerly GHTF/SG5/N2R8:2007) Clinical evaluation
- EU Medical Device Regulations 2017/745 (MDR)
- European Commission guidelines on clinical evaluation (MDCG 2020-1, -5, -6, -7, -8, -13, MEDDEV 2.7/1 rev. 4)
- National Medical Device Authority (NMPA) of P.R. China
   Technical Guidelines of Clinical Evaluation of Medical Devices
- Therapeutic Goods Administration (TGA) of Australia Clinical evidence guidelines for medical devices
- Health Canada Guidance on clinical evidence requirements for medical devices: Overview
- ISO 14971 Medical devices Application of risk management to medical devices
- ISO 13485 Medical devices Quality management systems Requirements for regulatory purposes
- IEC 62366-1 Medical devices Part 1: Application of usability engineering to medical devices
- ISO 10993-1 Biological evaluation of medical devices Part 1: Evaluation and testing with a risk management process
  - Etc.





# Normative global consensus

[main document]

Clinical evaluation

# Legislation -dependent adaptations

[normative/informative annexes]

Plan and report template

Literature search and appraisal

Demonstration of equivalency

[horizontal standard]

Clinical evaluation

Clinical evaluation in the post-market phase

Pre-clinical evaluation /Early phase clinical evaluation

Etc.

# Product –specific requirements

[vertical/particular standards]

Software as a medical device

Clinical evaluation based on the performance data

Active implantable devices

Low-risk devices

Diagnostic imaging

Etc.





### **CLINICAL EVALUATION: GLOBAL MINIMAL CONSENSUS**

Conto	Purpose of the clinical evaluation1	Purpose
2. 2.1. 2.2. 2.3. 2.4.	General requirements	Management responsibility for process, conduct, and provision of qualitied resources
3. 4. 4.1. 4.2. 5.	Clinical evaluation inputs	Objectives and planning
5.1. 5.2. 5.3. 5.4. 5.5. 5.6. 5.7.	General	Minimal requirements for a scientifically valid, systematic, and methodologically sound procedure appropriate for the device
6. 7. 7.1. 7.2. 8.	Clinical evaluation outputs	When required under the respective jurisdiction: processing of the output, implementation of an ongoing process and post-market monitoring system throughout the device's lifecycle



### **KEY TAKE AWAYS**

- Medical device technologies and applications are highly variable and rapidly evolving field driven by data
- Innovation may not be the purposeful determinant for a regulatory pathway, but the strategy must be adapted on case-to-case basis in alignment with the regulatory bodies
- Pre-market assessment of the expected clinical performance and safety is essential, but the variables in the long-term clinical use can only be anticipated
- Post-market monitoring system is necessary to assure patient and user safety among real-life conditions, but it can also effectively be utilized to collect factual evidence on the efficiency in the clinical use
- Regulatory convergence can be achieved by aligning on the minimal consensus on the global clinical evidence strategy and existing standard framework applicable for the medical device manufacturers







## THANK YOU / QUESTIONS

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# Regulatory Convergence & Reliance

**Diane Wurzburger, GE HealthCare for GMTA** 







## What we can agree on

- Regulators and manufacturers are committed to timely patient access to safe, effective, and quality medical technologies
- ✓ Small differences in regulations, standards, and guidance can result in major differences in the regulatory path for the same medical device (e.g., MD/IVD classification)
- ✓ These differences are amplified during a pandemic
- ✓ The rapid advancement of medical device innovations is challenging traditional regulatory frameworks







## Foundational Principles\*

- Implement convergent regulatory frameworks based on internationally recognized best practices and standards.
- Implement regulatory reliance, including recognition
- Implement core tenets of medical device regulations

<sup>3</sup> 

<sup>\*</sup>The Need to Advance Global Convergence and Regulatory Reliance to Accelerate Access to Medical Technology, May 2023 http://www.globalmedicaltechnologyalliance.org/papers.html



## Core Tenets

- Ensure predictability and adequate resources
- Support innovation and apply equal regulation to both domestic and international companies
- Adopt Good Regulatory Practices (GRP)
- Avoid requirements that lack a patient safety benefit
- Accept global clinical trial data and leverage Real World Evidence





## Core Tenets

- Implement a risk-based approach to product changes
- Avoid unnecessary barriers to access based on product country of origin
- Implement a single dossier
- Adopt electronic instructions for use
- Accept digital labels





# Opportunity for convergence & reliance\*

- Predictability of decision-making
- Transparency
- Capacity building
- Decrease in workload, duplicative efforts
- Strategic use of resources

- Increased efficiencies
- Collaboration & trust
- Increase timely patient access to innovation
- Increase health system preparedness & response during PHE

<sup>\*</sup>National Regulatory Authority retains independence, sovereignty and accountability for decision-making





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