

The new EU Medical Devices Regulations

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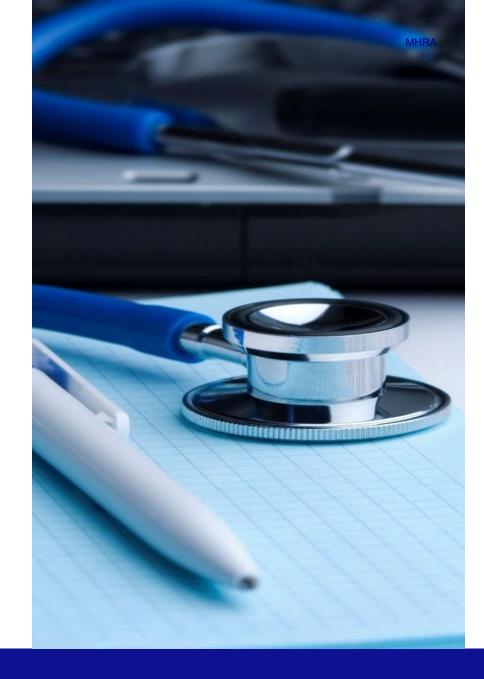


Medicines & Healthcare products Regulatory Agency

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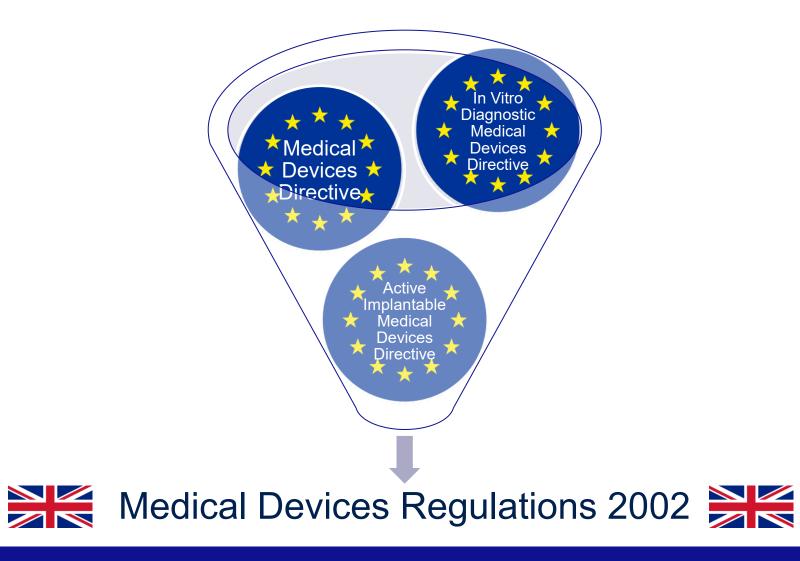
- Introduction to the Legislation
- Key Changes
- Timelines
- European Implementation
- Brexit
- Useful Links



The Legislation – why change it?

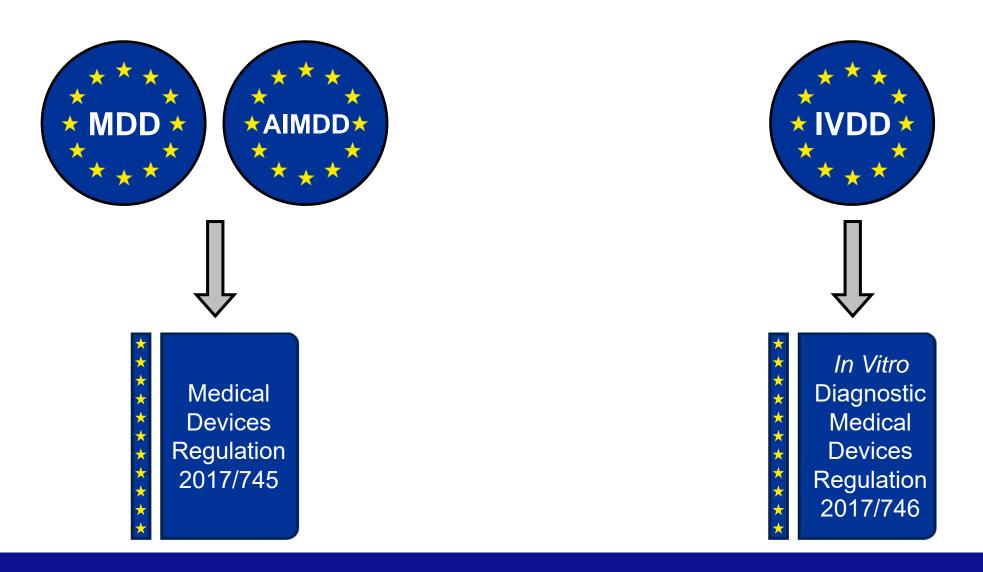


The Legislation – The Directives

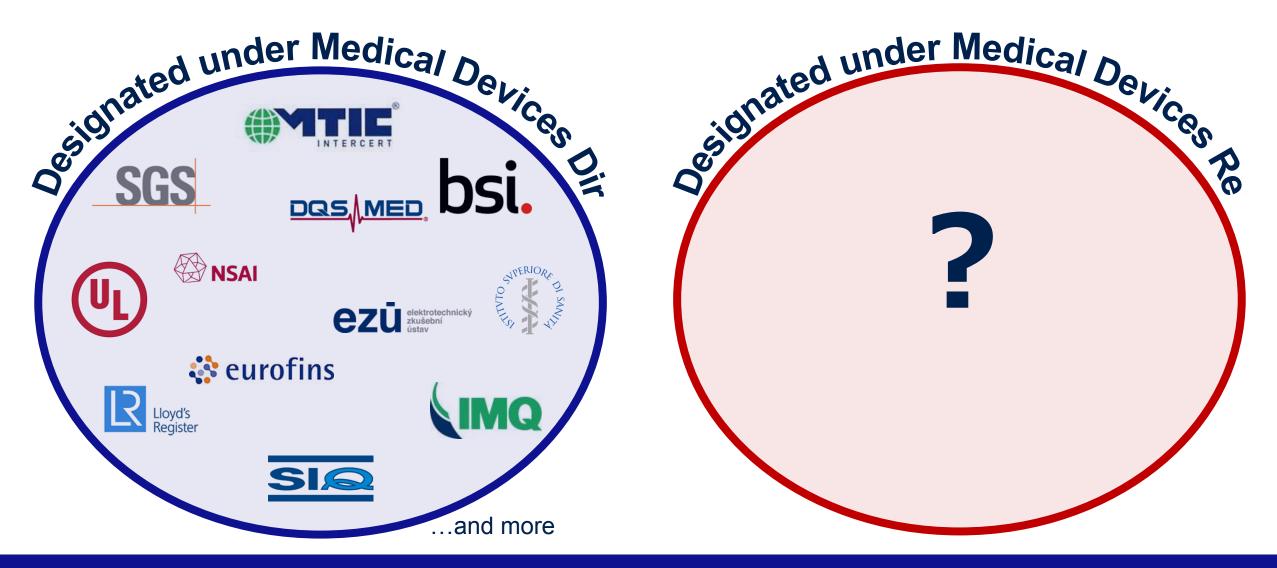


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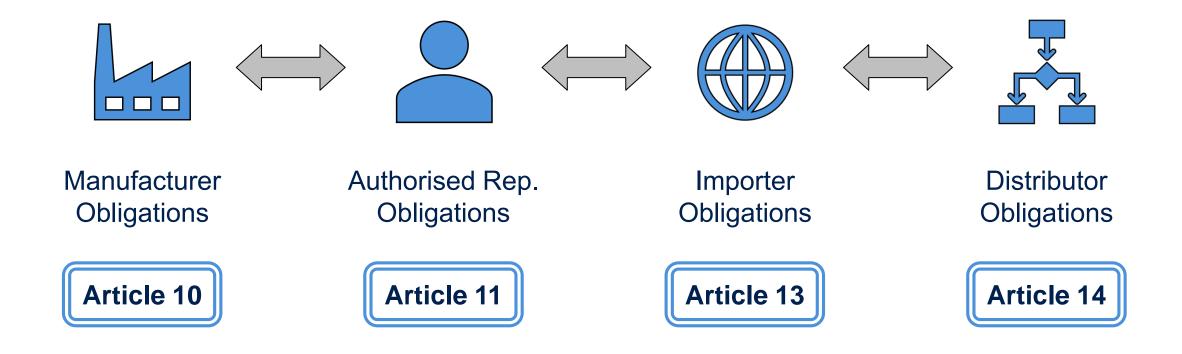
The Legislation – The Regulations

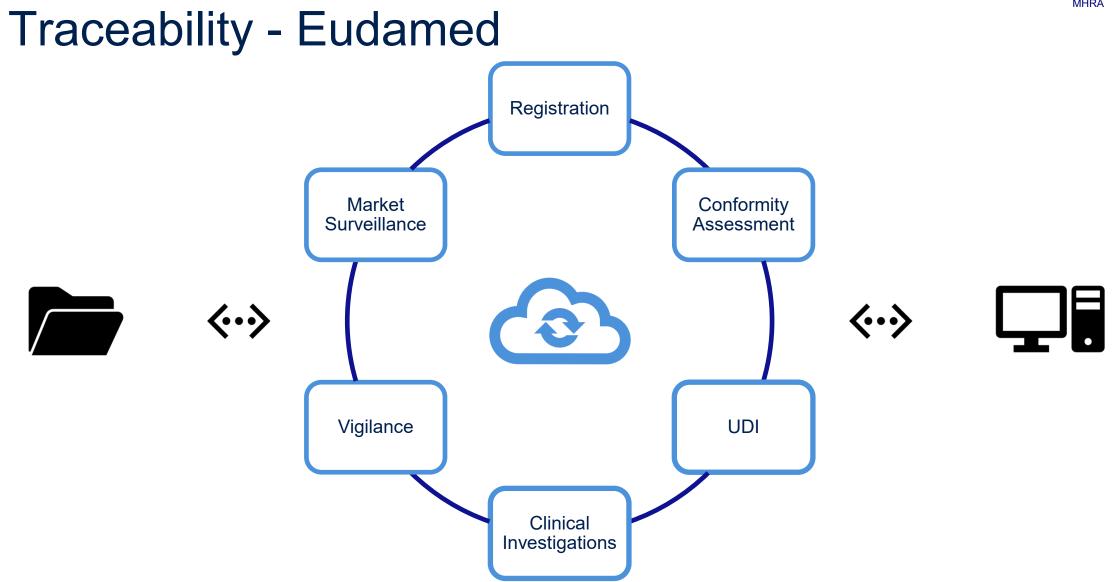


Notified Bodies



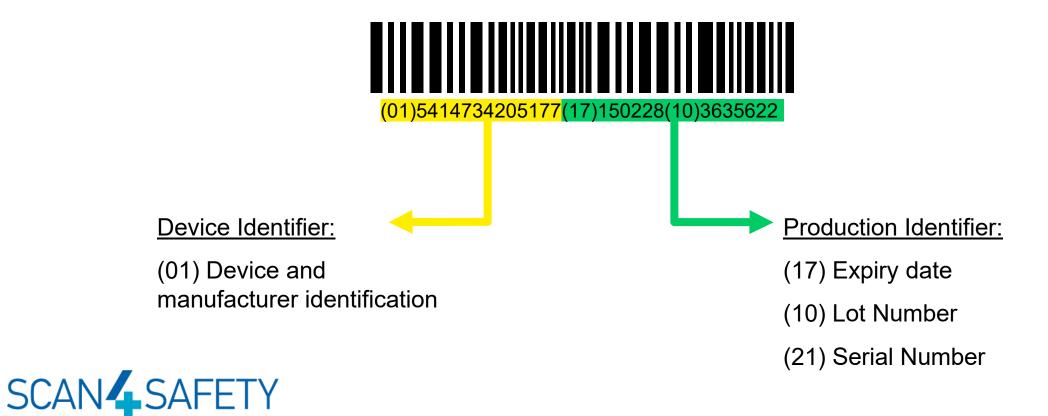
The Supply Chain





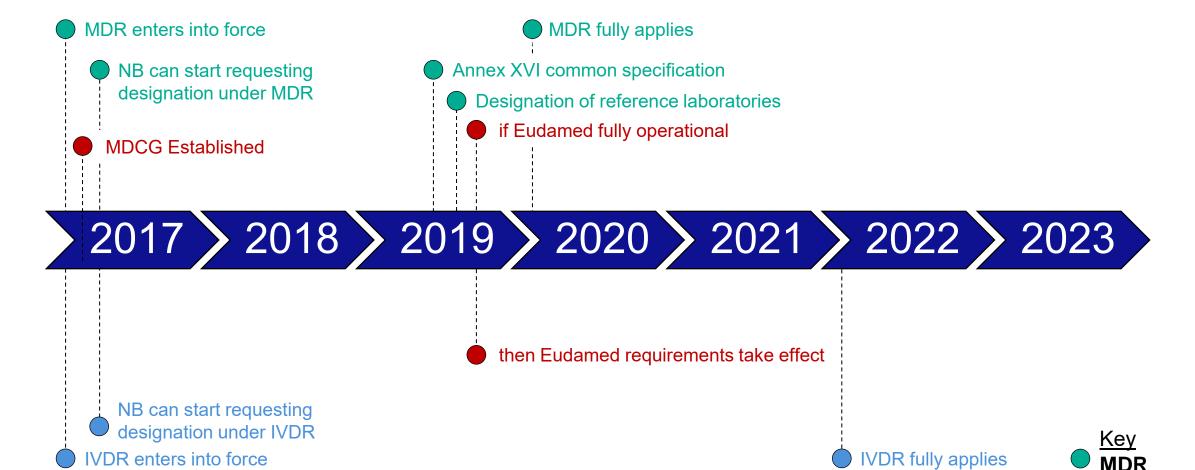
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Traceability – UDI



Patient. Product. Place. Process.

Timelines

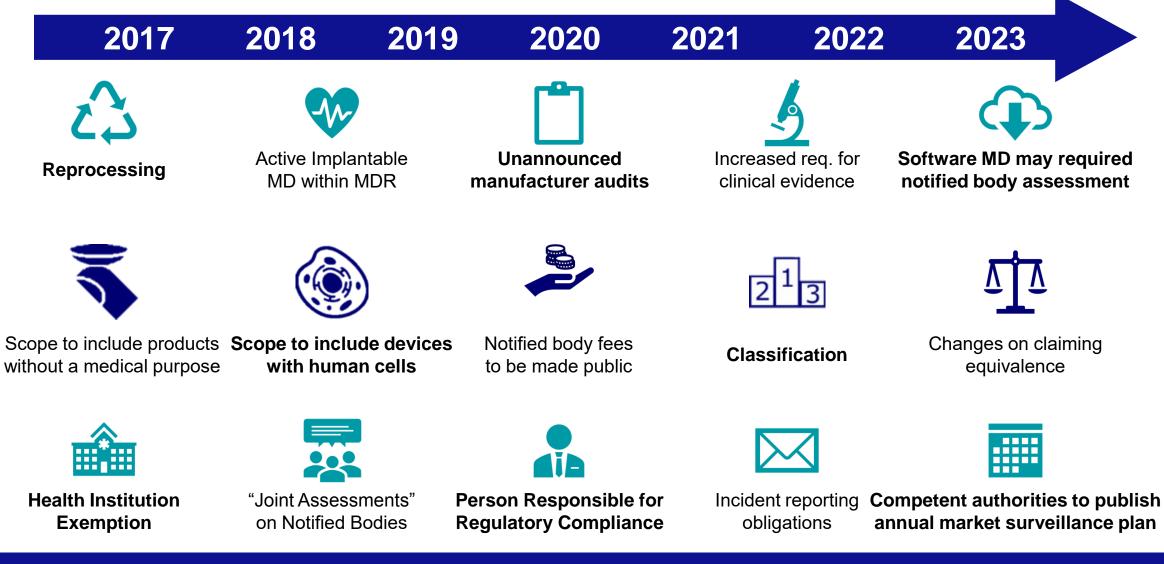


MDR IVDR

MDR & IVDR

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MDR Key Changes



Health Institutions and the New Regulations

Background

The new Medical Device Regulation (MDR) and the In Vitro Diagnostic Medical Device Regulation (IVDR) entered into force on 25 May 2017. Once fully applied, they will replace the medical device, in vitro diagnostic medical device and active implantable medical device Directives.

The new regulations include obligations that health institutions will need to meet by 26 May 2020 for medical devices and 26 May 2022 for in vitro diagnostic devices. Health institutions are defined as "an organisation the primary purpose of which is the care or treatment of patients or the promotion of public health" (Article 2(36) of the MDR). The key requirements are listed below, with more details included in Articles referenced.

Timeline

25/05 - MDR formal publication and adoption 25/05 – IVDR formal publication and adoption					
2017	2018	2019	2020	2021	2022
26/05 – MDR date of application					
26/05 – IVDR date of application					

Current situation

The current EU medical device and in vitro diagnostic medical device Directives (MDD and IVDD) do not apply to devices manufactured and used only within the same health institution and on the premises of their manufacture or used on premises in the immediate vicinity without having been transferred to another legal entity (in-house use).

Therefore, under the Directives, devices manufactured and used within health institutions are not considered as having been put into service and health institutions are exempt from the obligations set out in the Directives.

Key changes set out in the MDR and IVDR



Health institution exemption (Article 5 of MDR / IVDR)

Devices that are manufactured or modified and used within health institutions shall be considered as having been put into service.

The requirements in the MDR/IVDR shall not apply to these devices provided that the certain conditions are met, including:

- Health institutions ensure that manufacturers follow the relevant general safety and performance requirements (Annex I);
- An appropriate quality management system is established;
- The health institution justifies that the target group's specific needs cannot be met by an equivalent device on the market;
- · Information is made available to competent authorities on request;
- A declaration with certain details is made publicly available;
- Reviews experience gained from clinical use of the devices and takes all necessary corrective actions.



Implant cards (Article 18 of MDR)

Health institutions will need to provide patients with implantable devices with an implant card, which shall bear the patient's identity, as well as rapid access to certain information, including:

- The identification of the device, including the device name, serial number, lot number, the UDI, the device model, and the name, address and website of the manufacturer;
- Warnings, precautions or measures to be taken by the patient or a healthcare professional;
- The expected lifetime of the device and any necessary follow-up.



The UDI system will allow for things like safety alerts, potential recalls, as well as surveillance tasks more generally.

For Class III implantable medical devices, health institutions will need to store and keep preferably by electronic means the UDI of the devices which they have supplied or with which they have been supplied. Health institutions may be required to do this for other devices also.

The UDI system will have a longer phase-in time (e.g. the requirement applies for class III and implantable devices in May 2021 and class A IVDs in May 2027).

Other changes

Clinical trial / performance studies – Article 73 of MDR / Article 69 of IVDR: significant alignment with the CTR, for example introducing damage compensation and a 'Sponsor'.

Single-use devices and their reprocessing – Article 17 of MDR: may only take place where permitted by national law, but must meet certain conditions. The MHRA will consult on its current position on reprocessing.

3D printed devices – a case-by case assessment will be required to determine a product's status and classification.

Software – classification rules will change with more software requiring notified body input.

MHRA

Health Institution Exemption

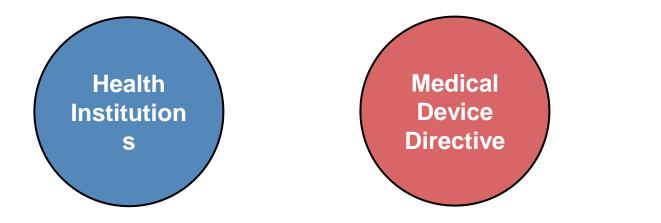
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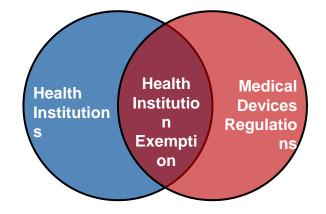
Medical devices manufactured within a health institution and used on patients within that same health institution are exempt from complying to the Medical Devices Regulations 2002.

Currently, health institutions are not within the scope of the Medical Devices Directive and the Active Implantable Devices Directive.

MDR/IVDR

Medical devices manufactured or modified and used within a health institution will need to comply with specific requirements set out in Article 5.5 of the Medical Devices Regulation 2017/745 and the In Vitro Medical Devices Regulation 2017/746. In the new regulations, health institutions will now fall within the scope of the regulation.





Annex XVI

- Do not have a medical purpose
- Are usually cosmetic/aesthetic products that would be regulated as medical devices under the MDR
- Will be required to comply with safety and performance requirements based on Common Specifications
- Not automatically class I devices notified body involvement may be required









Annex XVI in more detail

- Contact lenses or other items intended to be introduced into or onto the eye.
- Products intended to be totally or partially introduced into the human body through surgically invasive means for the purpose of modifying the anatomy or fixation of body parts with the exception of tattooing products and piercings.
- 3. Substances, combinations of substances, or items intended to be used for facial or other dermal or mucous membrane filling by subcutaneous, submucous or intradermal injection or other introduction, excluding those for tattooing.

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Annex XVI in more detail

- 4. Equipment intended to be used to reduce, remove or destroy adipose tissue, such as equipment for liposuction, lipolysis or lipoplasty.
- 5. High intensity electromagnetic radiation (e.g. infra-red, visible light and ultra-violet) emitting equipment intended for use on the human body, including coherent and non-coherent sources, monochromatic and broad spectrum, such as lasers and intense pulsed light equipment, for skin resurfacing, tattoo or hair removal or other skin treatment.
- 6. Equipment intended for brain stimulation that apply electrical currents or magnetic or electromagnetic fields that penetrate the cranium to modify neuronal activity in the brain.

Implementation Progress



<u>COEN</u>

- Bringing 'PRRC' paper to group
- Contributing to market surveillance strategy

<u>NBOG</u>

- Training sessions on CAPA and process for designation
- Resource and IVDR requirements

IVD WG

 Creation of an operational implementation plan: classification, performance evaluation and companion diagnostics

Vigilance WG

Development of PSUR guidance



Communications

- Introductory guide
- Stakeholder-specific leaflets

Health institutions

 New guidance being drafted based on consultation

Notified Bodies

 BSI designated under MDR Jan 2019

BCWG

- Reviewing key definitions
- Updating MEDDEV guidance
- Off-label use of medicinal products (Rule 13)
- Level 3 requirements for brain stimulation products under Annex XVI

IMDRF International Medical Device Regulators Forum Custom-made devices

* MDSAP

 Good regulatory review practices

Registries WG

Market surveillance

Coordination Committee

Reprocessing SUDs

Registrations

Updating internal databases

Drafting consultation

for new Regulations

Now accepting class 1

under MDR/IVDR

✤ BEIS Market Surveillance

Software WG

 Consensus around Rule 11 up-classification

<u>CIE WG</u>

 Developing equivalence guidance

<u>TSG</u>

Transition FAQ documents

CAMD

 Members of Executive Group

<u>ITF</u>

- Implementation roadmap
- Stakeholder enquiry form

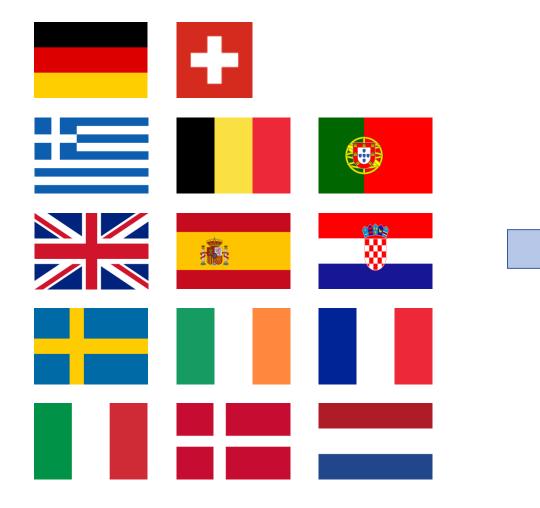
Eudamed

- Cross-cutting Eudamed subgroups
 - Medical Device Adverse Event Terminology

Competent Authorities for Medical Devices (CAMD) Implementation Roadmap



Transition Subgroup



Frequently Asked Questions Documents for MDR/IVDR Transitional Provisions

- ✤ Addressing 10 issues
- Answering 42 questions

Key messages



MDR will apply by <u>25 May 2020</u>



IVDR will apply by 25 May 2022



Check it is CE marked under MDR/IVDR



Assign UDI as per transition provisions



Provide implant cards



MHRA's Yellow Card Scheme

Brexit



Useful links

CAMD Implementation Roadmap: <u>https://www.camd-europe.eu/regulatory/medical-devices-regulation-vitro-diagnostics-regulation-mdr-ivdr-roadmap/</u>

Transition FAQs: <u>https://www.camd-europe.eu/regulatory/available-now-mdr-ivdr-transitional-faqs/</u>

MHRA's introductory guide to the EUDR:

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/640404/MDR_IVDR_guidance_Print_13.pdf

MHRA's EUDR guidance page: <u>www.gov.uk/guidance/medical-devices-eu-regulations-for-mdr-and-ivdr</u>

MHRA's consultation on health institution guidance: <u>https://www.gov.uk/government/consultations/health-institution-exemption-for-ivdrmdr</u>

NHS Confederation Briefing: <u>http://www.nhsconfed.org/-/media/Confederation/Files/public-access/European-Office/EU-briefing-24-Medical-devices_2018_Final.pdf?la=en&hash=795CCABA01EAAE1F463D7F0474331E01E50A89FE</u>

Yellow Card Scheme: <u>https://yellowcard.mhra.gov.uk/</u>

Brexit: https://www.gov.uk/government/collections/mhra-guidance-and-publications-on-a-possible-no-deal-scenario



Thank You

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Medicines & Healthcare products Regulatory Agency