

# ***Trends in IVD Deficiencies – A Compliance Perspective***

***Joshua D. Levin, PhD  
FDA/CDRH/OIR/DIHD***

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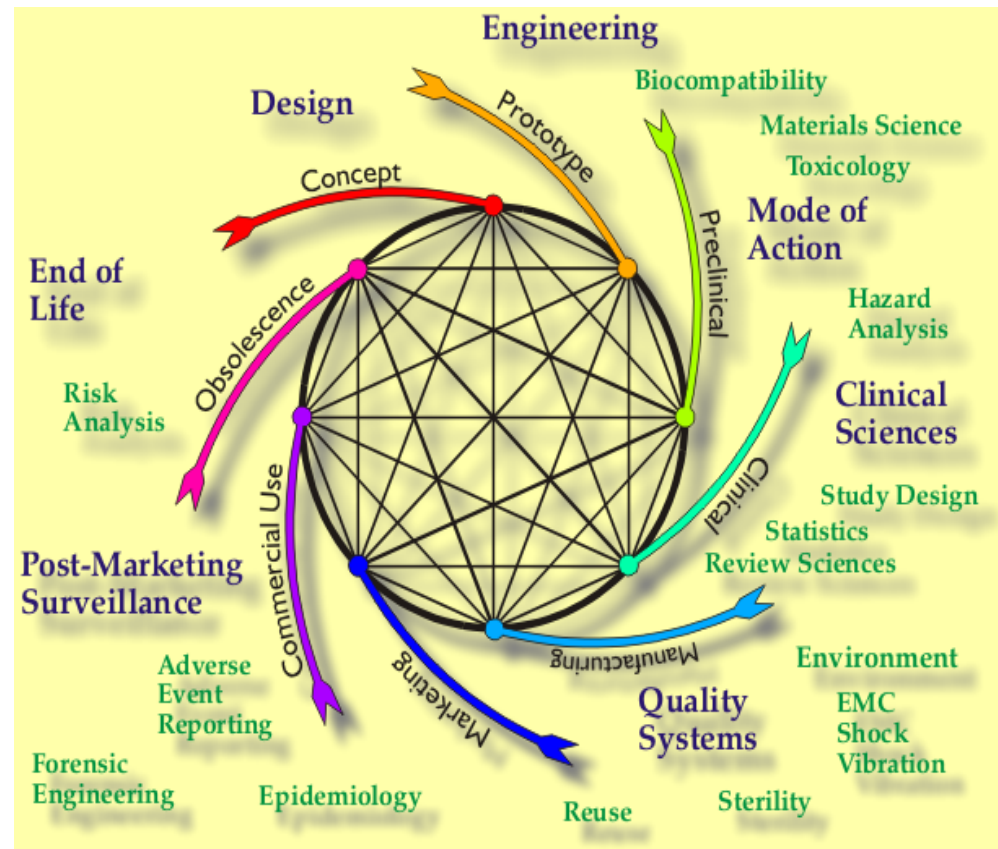
# Outline of Presentation



- *The TPLC program in OIR*
- *Functions of the OIR postmarket group*
- *Postmarket and compliance related deficiencies*
  - *Complaint investigations*
    - *devices requiring a 510(k)*
  - *Manufacturing review deficiencies*
    - *Original PMA manufacturing section*
    - *PMA annual reports*
  - *Recall reporting deficiencies*

## TPLC – Total Product Lifecycle -

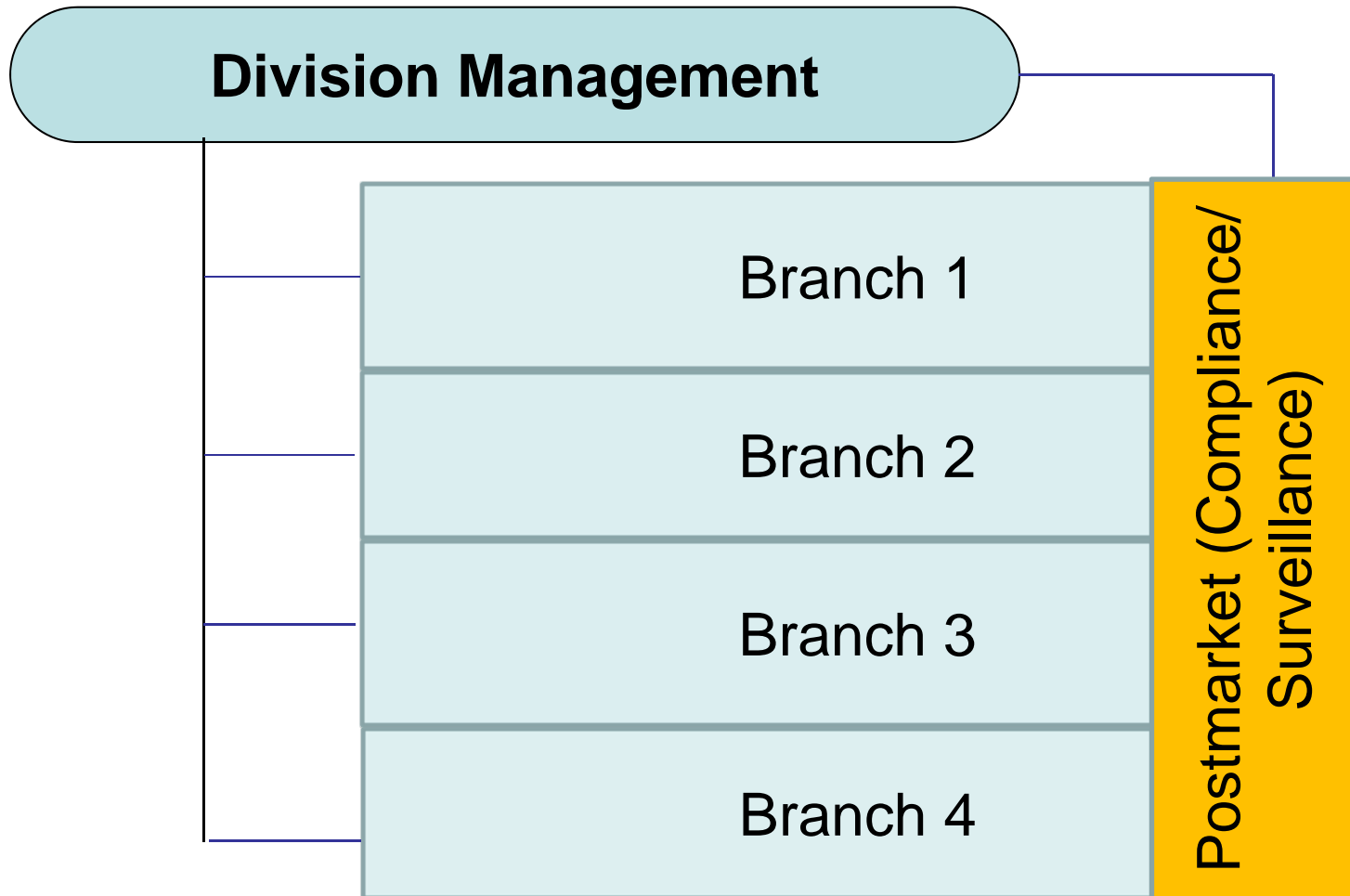
- *Product Design and Development*
- *Manufacturing/Quality Systems*
- *Postmarket surveillance*



## *The TPLC process is unique to OIR*

	IVDs and Rad Health products	Other Medical Devices
Premarket (Design/Development)	<b>OIR</b>	ODE
Compliance (Manufacturing/QS, Recalls)	<b>OIR</b>	OC
Surveillance (MDR Review)	<b>OIR</b>	OSB

# ***Matrix Management of Compliance and Postmarket in OIR***



# ***What type of assignments do OIR Postmarket reviewers handle?***

- *Manufacturing reviews*
  - *Original PMAs*
  - *30-Day Notices*
  - *PMA Annual Report Manufacturing Consults*
- *Review of Inspection Reports and drafting of Warning Letters*
- *Investigation of complaints*
- *Classification of recalls*
- *Review of adverse event reports*

## *Investigation of Complaints*

- *Sources: industry, professional groups, concerned individuals*
- *Sometimes identified internally*
- *FDA cannot update the source on the status of the action*
- *FDA cannot share the source of the information with the target of the investigation*

## ***Processing of Complaints***

- *Acknowledgment letter sent to source*
- *FDA investigates & verifies information*
- *FDA initiates discussions with target firm*
  - *Email, phone, or “It Has Come to Our Attention” letter*
- *Frequently observed deficiencies:*
  - *Changes requiring a new 510(k)*
  - *Limitations on exemption for Class I devices*
- *Various modes of resolution depending on case*

## *When is a new 510(k) required?*

- 21 CFR 807.81(b)(3)(i): A new 510(k) is required when:

*“A change or modification in the device that **could significantly affect** the safety or effectiveness of the device, e.g., a significant change or modification in design, material, chemical composition, energy source, or manufacturing process.”*

## ***Examples of “significant change”***

- *New antibody*
- *Change in antigen composition*
- *New primers or probes*
- *Change in cut-off*
- *Change in assay range*
- *Change in reference standard*
- *Change in software diagnostic algorithm*

# ***Failure to submit a 510(k) – limitations of exemption***

*21 CFR 862.9, 864.9, 866.9 – Limitations of exemption on Class I IVD devices:*

- *Different intended use*
- *Different fundamental scientific technology*
- *Other limitations (next slide)*

## ***Limitations of exemption on Class I IVD devices\****

- *diagnosis, monitoring, or screening of*
  - *neoplastic diseases*
  - *familial or acquired genetic disorders*
  - *life-threatening diseases , e.g. AIDS, hepatitis, tuberculosis, or myocardial infarction;*
- *assessing the risk of cardiovascular diseases;*
- *diabetes management;*
- *identifying a microorganism directly from clinical material;*
- *for detection of antibodies to microorganisms*
- *point of care (includes OTC)*
  
- *\*21 CFR 862.9, 864.9, 866.9*

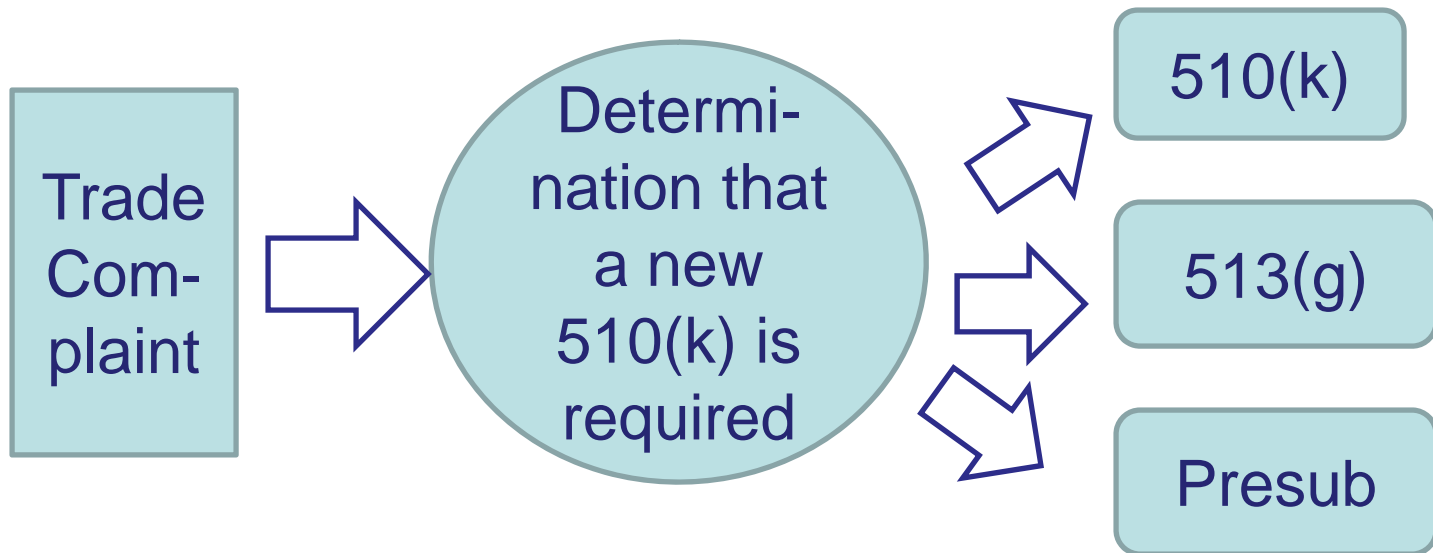
## ***Examples: limitations of exemption***

- *Class I cholesterol test system (21 CFR 862.1175) when used in as an aid in the diagnosis of cardiovascular disease: → Class II*
- *Class I microscope (21 CFR 864.3600) with associated software that is used to assist with identification abnormal cells on a slide: → May be Class II or Class III depending on the analyte*

## ***Device must be cleared for each sample type and IU***

	<b>Sample Type A</b>	<b>Sample Type B</b>
Intended Use X	Cleared	Cleared
Intended Use Y	Cleared	Not cleared – can't be marketed for this IU

## ***Compliance work feeds into premarket***



## ***Original PMA Manufacturing Review – Examples of Deficiencies***

- *Failure to provide device-specific Design Control documentation (DDP, design inputs, transfer, verification, validation)*
- *Failure to provide device-specific acceptance procedures*
- *Inadequate process validation information (need specific protocols)*
- *Failure to adequately tie CAPA system to NCR, complaint handling systems*

# ***Original PMA Manufacturing Reviews – Suggestions for Improvement***

- *Utilize guidance document\* as a checklist*
- *For companion diagnostics, timing is critical*
  - *Co-approval constraints (must pass inspection prior to drug approval)*
  - *Use of modular PMA highly recommended*
  - *Interactive review*

*\*Quality System Information for Certain Premarket Application Reviews;  
Guidance for Industry and FDA Staff*

## *PMA Annual Reports*

21 CFR 864.39(b): An applicant may make a change in a device after FDA's approval of a PMA for the device without submitting a PMA supplement **if the change does not affect** the device's safety or effectiveness and the change is reported to FDA in postapproval periodic reports required as a condition to approval of the device, e.g., an editorial change in labeling which does not affect the safety or effectiveness of the device.

## *Changes requiring PMA Supplements – stricter standard than changes requiring a new 510(k)*

### **New 510(k) required when:**

*A change or modification in the device **could significantly affect** the safety or effectiveness of the device*

### **PMA supplement required when:**

*A change **affects** the device's safety or effectiveness*

## *Examples of PMA Annual Report deficiencies*

- *Failure to provide sufficient information for OIR evaluation*
- *Use of firm-specific jargon in the presentation of annual reportable changes*
- *Note: if FDA needs to review data to ensure the change does not affect safety and effectiveness, the change typically requires a supplement.*

## *Examples of changes requiring a PMA supplement*

- *Changing from manual to automated vialing or assembly*
- *Changes to a reagent vial, where the changed region **contacts the solution***
- *New supplier for a critical component*
- *Changes to incoming or final QC procedures*
- *Software changes that can impact S&E*

## *Types of PMA Supplements*

Type of PMA Supplement	Design Changes	Manufacturing Changes	FDA review clock	User Fee?
Panel-Track Supplement	Significant (or new IU), needs clinical data		180 days	Yes
180-Day Supplement	Significant change, needs analytical data		180 days	Yes
Real-Time Supplement	Minor change		90 days	Yes
Site Change Supplement		Change in mfg facility	180 days	No
30-Day Notice		Changes affecting S&E	30 days*	Yes
Special PMA Supplement – CBE		Changes enhancing safety	30 days	No

## ***Submission of correction and removal reports to FDA***

- *Per 21 CFR 806.10, a report must be submitted to FDA if the correction/removal (i.e. a recall)*
  - *Reduces a risk to health posed by the device*
  - *Remedy a violation of the Act*

## ***Classification of recalls – goes in the opposite direction from device classification!***

<b><i>Class</i></b>	<b><i>Risk level</i></b>	<b><i>Risk to health</i></b>	<b><i>Probability</i></b>
<b><i>I</i></b>	<b><i>High</i></b>	<b><i>Serious adverse consequences or death</i></b>	<b><i>Reasonable probability</i></b>
<b><i>II</i></b>	<b><i>Medium</i></b>	<b><i>Serious adverse consequences or death</i></b>	<b><i>Remote</i></b>
		<b><i>Temporary/ medically reversible conditions</i></b>	<b><i>May cause</i></b>
<b><i>III</i></b>	<b><i>Low</i></b>	<b><i>Any health consequences</i></b>	<b><i>Not likely</i></b>

## *How does OIR classify recalls?*

- *By precedent*
- *By Health Hazard Evaluation*
- *By policy*
  - *Marketed without a 510(k) – Class II*
  - *Others under development in OIR*
- *Requires Medical Officer sign-off*

## ***Challenges for firms in reporting recalls***

- *Class III recalls = no risk to health -> do not need to be reported*
- ***Note that FDA considers delay of results a potential risk to health in some instances (e.g. coag, troponin)***
- *Firm should be conservative in preparing their HHE*
- ***When in doubt, report it!***

## ***Guidance documents – 510(k) related***

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

<http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm080235.htm>

*Guidance for Industry and FDA Staff; Replacement Reagent and Instrument Family Policy*

<http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm079185.htm>

*Class II Special Controls Guidance Document: Instrumentation for Clinical Multiplex Test Systems - Guidance for Industry and FDA Staff*

<http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm077819.htm>

## ***Guidance documents – PMA Manufacturing Reviews***

*Quality System Information for Certain Premarket Application Reviews;  
Guidance for Industry and FDA Staff*

<http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm070897.htm>

*Guidance for Industry and FDA Staff: Modifications to Devices Subject to  
Premarket Approval (PMA) - The PMA Supplement Decision-Making Process*

<http://www.fda.gov/downloads/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/UCM089360.pdf>

*Guidance for Industry and FDA Staff - 30-Day Notices, 135-Day Premarket  
Approval (PMA) Supplements and 75-Day Humanitarian Device Exemption  
(HDE) Supplements for Manufacturing Method or Process Changes*

<http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm080192.htm>



# *Questions?*

[Joshua.levin@fda.hhs.gov](mailto:Joshua.levin@fda.hhs.gov)

301-796-6695