



New impacts of the extended transition period for IVDR implementation

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**Mehr Sicherheit.
Mehr Wert.**

**Choose certainty.
Add value.**

Agenda

EU IVDR state of play

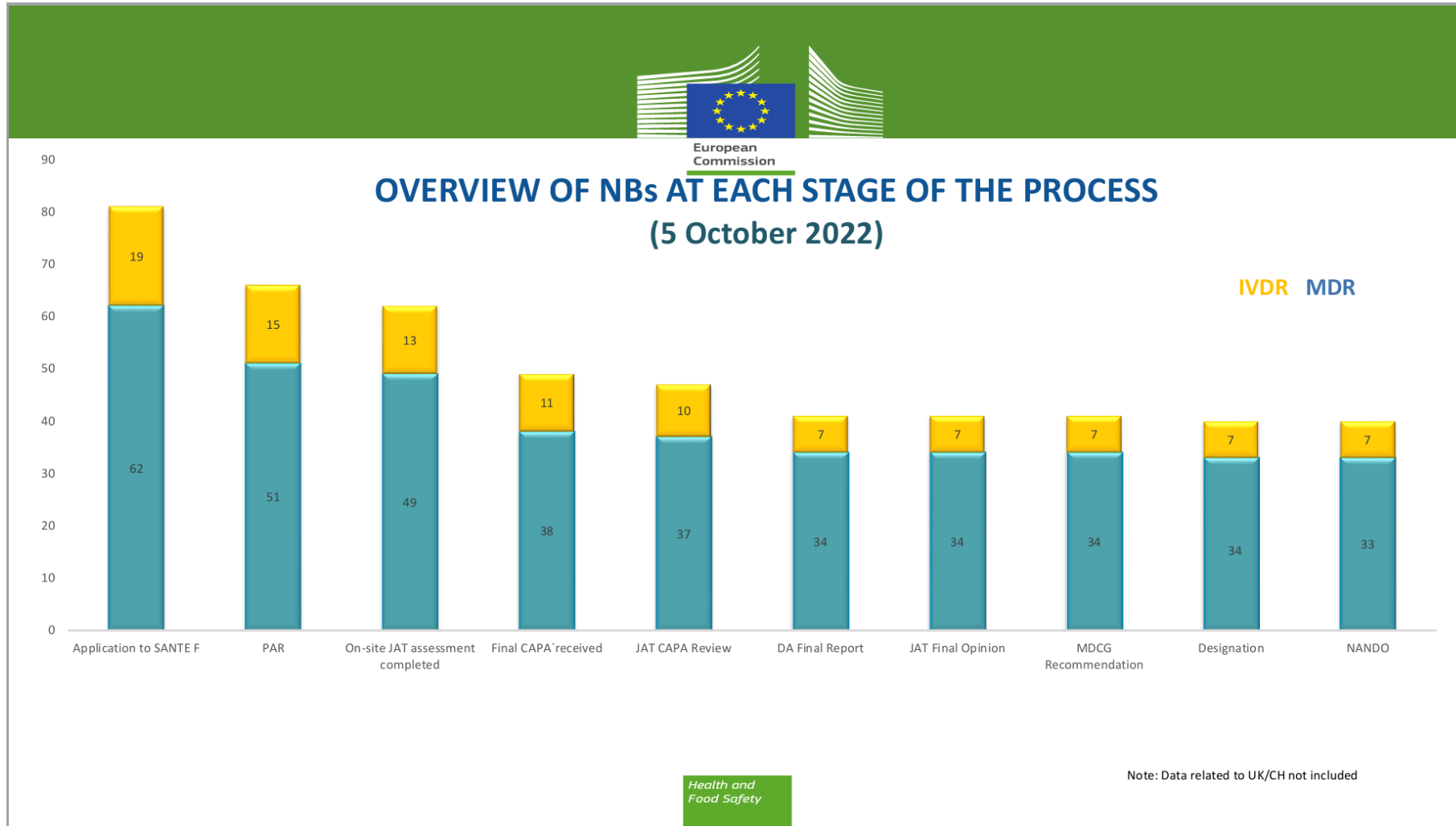
The transition period

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Notified Body capacity



No new NB designation for IVDR since May 2022

- +1 new application
- +1 on-site assessment
- +1 Final CAPA received
- +1 JAT CAPA review

IVDR designated Notified Bodies

Body type ▲	Name ▲	Country ▲
‣ NB 2265	3EC International a.s.	Slovakia
‣ NB 2797	BSI Group The Netherlands B.V.	Netherlands
‣ NB 0344	DEKRA Certification B.V.	Netherlands
‣ NB 0124	DEKRA Certification GmbH	Germany
‣ NB 0459	GMED SAS	France
‣ NB 0197	TÜV Rheinland LGA Products GmbH	Germany
‣ NB 0123	TÜV SÜD Product Service GmbH	Germany

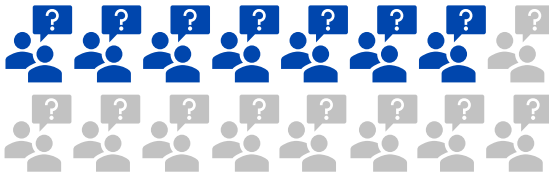
The Numbers

Notified Bodies

IVDD

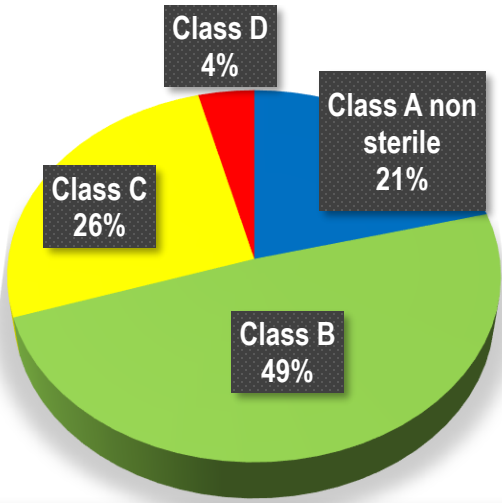
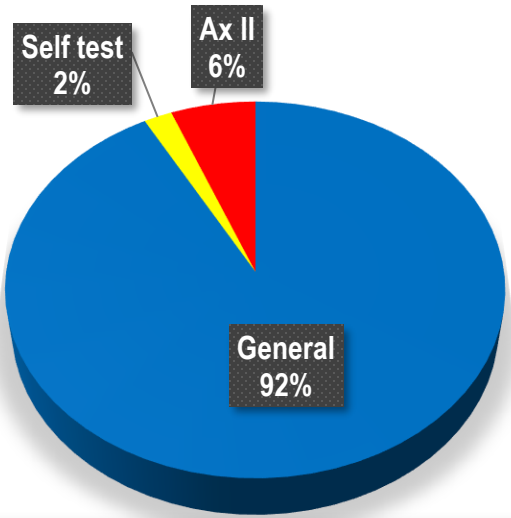


IVDR

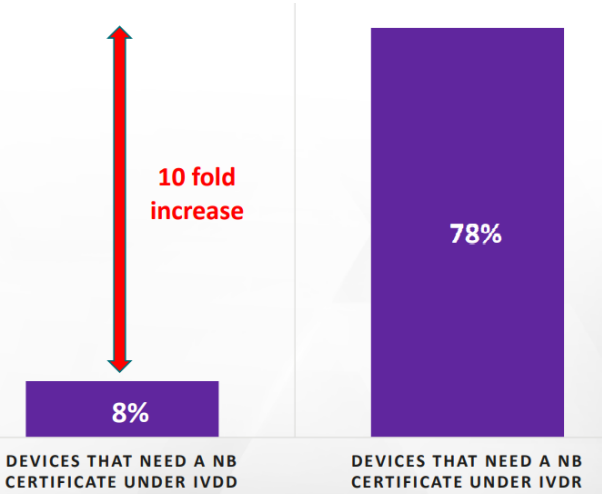


32%

Devices



MedTech Europe
from diagnosis to cure



736%

Preliminary results for 8 – 28 July 2021
Survey Market composition of in vitro diagnostic medical devices (IVDs) EU
Competent Authorities for Medical Devices (CAMD) coordinated by MedTech Europe

Enhancing Notified Body capacities – MDCG 2022-14

MDCG suggested actions for NBs:

- Make use of **hybrid audits**, for timely and efficient conformity assessment
- **Leverage evidence from previous assessments** under the IVDD when appropriate
- Make use of flexibility according to MDCG 2022-15 on **appropriate surveillance of legacy devices**
- **Eliminate administrative workload or undue limitations**, based on forthcoming guidance from MDCG
- Foster **capacity-building** of existing and potentially new NBs
- **Rationalise & streamline internal administrative procedures** to ensure timely and efficient conformity assessment
- Organise **structured dialogues with manufacturers** on regulatory aspects, before and during the conformity assessment process
- Work on **common guidelines to assist manufacturers** (e.g. TD preparation and content guideline)

Infrastructure status

- **No European reference laboratories (EURL)** designated yet
 - Applications accepted until DEC 2022
 - First designation expected 2023 Q3
- **Eudamed not fully functional** for IVDR
 - MDCG 2022-12 describes harmonized administrative practices and alternative solutions

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The transition period (Regulation 2022/112 IVDR)

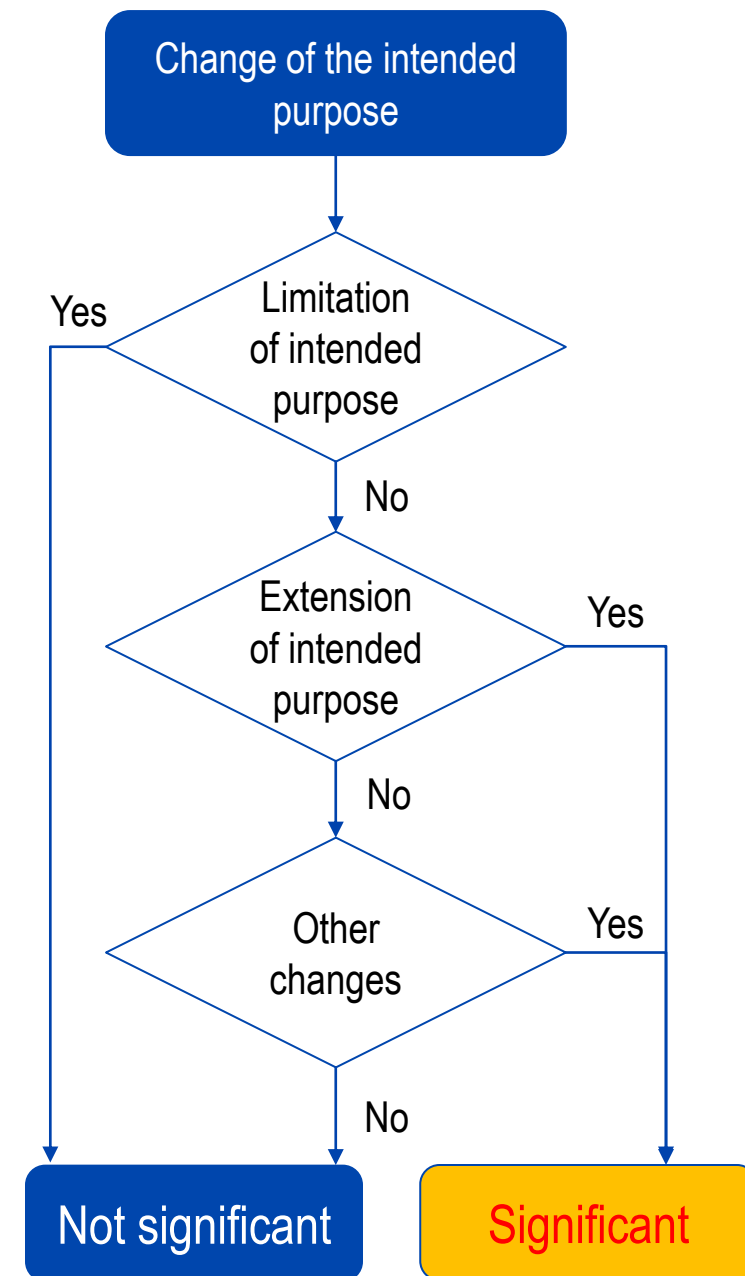


Dealing with changes to products under IVDD – MDCG 2022-6

Pre-Conditions	<ul style="list-style-type: none">▪ Valid IVDD certificate, or▪ DoC issued before IVDR DoA
Change considerations	<ul style="list-style-type: none">▪ No significant changes (design, intended purpose) permitted▪ New devices need to be certified under IVDR
Manufacturer responsibility	<ul style="list-style-type: none">▪ Must have process to evaluate changes▪ Must report changes to NB for evaluation
Notified Bodies	<ul style="list-style-type: none">▪ Verify changes▪ Cannot amend IVDD certificate, BUT may confirm changes in writing for correction or complementation of certificate information

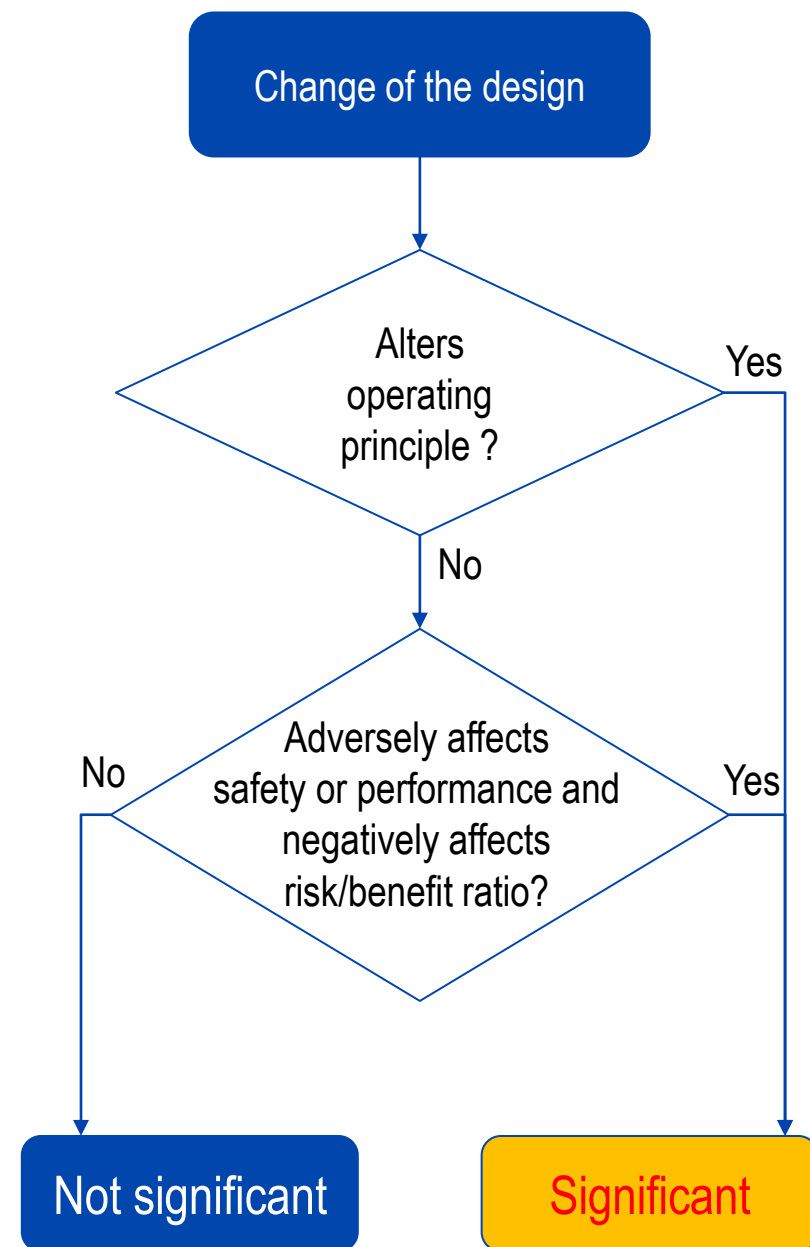
Changes to the intended purpose

- Limitation of intended purpose, such as restricting the target population, specimen type, specimen location → **Not significant**
- Extension of intended purpose → **Significant**
 - Addition regarding what is detected or measured
 - Additional functions of the device (screening, monitoring, diagnosis)
 - Addition of specimen type(s)
 - For CDx: extension of associated medicinal product, of target population, or of the tissue type
- Other major changes of the intended purpose → **Significant**
 - Change in assay type (e.g. qualitative to quantitative assay)
 - Change of the intended user (e.g. professional to lay user)
 - Change of operation (e.g. automatic to manual)
 - Change of specimen type(s)



Changes in the design

- Changes that alter the device's operating principle: → **Significant**
 - *Change from immunofluorescence to enzyme-linked immunoabsorbent assay*
- Changes that adversely affect the safety or performance and negatively affect the risk/benefit ratio of the device → **Significant**
 - *Change of IFU to refer to reduced sensitivity of the device (based on PMS)*
- Changes of the design that **DO NOT** alter the device operating principle, that **DO NOT** adversely affect the safety or performance and that **DO NOT** negatively affect the risk/benefit ratio of the device: → **Not Significant**
 - *Use of a new PCR cyclers*
 - *Change of IFU to refer to better precision or addition of a new interfering substances (based on post-market surveillance)*



Appropriate surveillance – MDCG 2022-15

Manufacturer of “legacy devices” certified under IVDD	Audit under Directive 98/79/EC	IVDR requirements for legacy devices (<u>MDCG 2022-8</u>)	Audit under Regulation EU 2017/746
Did not apply for certification under IVDR	✓	✓	
Already implemented IVDR requirements & certification application in process			✓
Already certified by same NB under IVDR			✓
Already certified by another NB under IVDR	✓ (If NB _{IVDD} is NOT designated under IVDR)	✓	✓ (If NB _{IVDD} designated under IVDR)

IVDR requirements applicable to legacy devices – MDCG 2022-8

IVDR requirement	Applicable?	Specifics
Post-market surveillance & Vigilance	✓	<ul style="list-style-type: none"> • PMS system & plan (Articles 78 & 79) • Serious incidents, FSCAs, trend reporting (Articles 82-84) • PMS report (Article 80), OR or Class C & D 'equivalent' – PSUR (Article 81) instead [voluntary]
Economic operator obligations	✓	<ul style="list-style-type: none"> • Manufacturers: Article 10(9), (11) to (14) • Authorised representatives: Article 11(3)(c) to (g) • Importers: Article 13(2), 2nd subparagraph, (4), (6) to (8), (10) • Distributors: Article 14(2), last subparagraph, (4) to (6)
Person responsible for regulatory compliance	✗	<ul style="list-style-type: none"> • Article 15
Manufacturer obligations for importers & distributors	✗	<ul style="list-style-type: none"> • Article 16(3) and (4)
Identification & traceability	✗	<ul style="list-style-type: none"> • Identification with supply chain (Article 22) • UDI system (Article 24) • Summary of safety and performance, SSP (Article 29)

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Other MDCG guidances

MDCG 2021-22 rev.1

{ EN | ... }

Clarification on “first certification for that type of device” and corresponding procedures to be followed by notified bodies, in context of the **consultation of the expert panel** referred to in Article 48(6) of Regulation (EU) 2017/746

September 2022

MDCG 2022-10

{ EN | ... }

Q&A on the interface between Regulation (EU) 536/2014 on clinical trials for medicinal products for human use (CTR) and Regulation (EU) 2017/746 on in vitro diagnostic medical devices (IVDR)

May 2022

MDCG 2022-9

{ EN | ... }

Summary of safety and performance template

May 2022

Borderline and classification manual

Manual on
Borderline

[Manual on borderline and classification under Regulations \(EU\) 2017/745 and 2017/746 v1](#) EN | ...

[Background note](#) EN | ... on the use of the Manual on borderline and classification for medical devices under the Directives.

September
2022

Recent legislation

COMMISSION IMPLEMENTING REGULATION (EU) 2022/1107

of 4 July 2022

laying down common specifications for certain class D *in vitro* diagnostic medical devices in accordance with Regulation (EU) 2017/746 of the European Parliament and of the Council

COMMISSION IMPLEMENTING REGULATION (EU) 2022/944

of 17 June 2022

laying down rules for the application of Regulation (EU) 2017/746 of the European Parliament and of the Council as regards the tasks of and criteria for European Union reference laboratories in the field of *in vitro* diagnostic medical devices

COMMISSION NOTICE

The 'Blue Guide' on the implementation of EU product rules 2022

(Text with EEA relevance)

(2022/C 247/01)

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LDT - The “US perspective” – What, Who and How?

- FDA definition: *A laboratory developed test (LDT) is a type of **in vitro diagnostic test** that is designed, manufactured and used within a **single laboratory**.*
- A **single laboratory** – Development and performance of the test. The use of the LDT cannot be extended to multiple laboratories
- The **laboratory must be certified under the CLIA program** to perform high-complexity testing. (A single laboratory for test development refers to single **CLIA certification**).
- Test must be performed under the **instruction of an authorized physician or healthcare professional**. The physician ordering the test must be **independent from the laboratory** offering the LDT. **LDT cannot be offered direct-to-consumer.**
- **CLIA certification** (performed by the Centers for Medicare and Medicaid Services – CMS) **focuses on procedure and personnel but not on products**, which are the focus for the FDA. Analytical validity is required and reviewed by two-yearly survey. There are no CLIA requirements for clinical validity.

US LDTs under EU ruling

- Article 5(5): *With the exception of the **relevant general safety and performance requirements** set out in Annex I, the requirements of this Regulation shall not apply to devices manufactured and used only within health institutions **established in the Union**.*

- Article 6: Distance sales
 - 1. *A device offered by means of information society services, as defined in **point (b) of Article 1(1) of Directive (EU) 2015/1535**, to a natural or legal person established in the Union **shall comply with this Regulation**.*

 - 2. *Without prejudice to national law regarding the exercise of the medical profession, a device that is not placed on the market but used in the context of a commercial activity, whether in return for payment or free of charge, for the provision of a diagnostic or therapeutic service offered by means of information society services, as defined in **point (b) of Article 1(1) of Directive (EU) 2015/1535**, or by other means of communication, directly or through intermediaries, to a natural or legal person established in the Union **shall comply with this Regulation**.*

US LDTs under EU ruling

Directive (EU) 2015/1535, Article 1(1) point (b)

- ‘service’ means any Information Society service, that is to say, any service normally provided for remuneration, *at a distance, by electronic means* and at the *individual request of a recipient of services*.
- For the purposes of this definition:
 - (i) ‘*at a distance*’ means that the service is provided **without the parties being simultaneously present**;
 - (ii) ‘*by electronic means*’ means that the **service is sent initially and received at its destination by means of electronic equipment** for the processing (including digital compression) and storage of data, and entirely transmitted, conveyed and received by wire, by radio, by optical means or by other electromagnetic means;
 - (iii) ‘*at the individual request of a recipient of services*’ means that the service is provided through the **transmission of data on individual request**.

US LDTs under EU ruling

- Additional requirements applicable to LDT developers
 - Certification of Quality management system
 - Develop Technical Documentation
 - Obtain Clinical Performance data
 - Implement adverse event reporting system
 - Labeling requirements
- Article 5(4): *Devices that are manufactured and used within health institutions, **with the exception of devices for performance studies**, shall be considered as having been put into service.*
- Open question: Is it possible to share testing protocol with health institutions?

CONCLUSION: LDT developers will have become IVD manufacturers to provide services to the EU market

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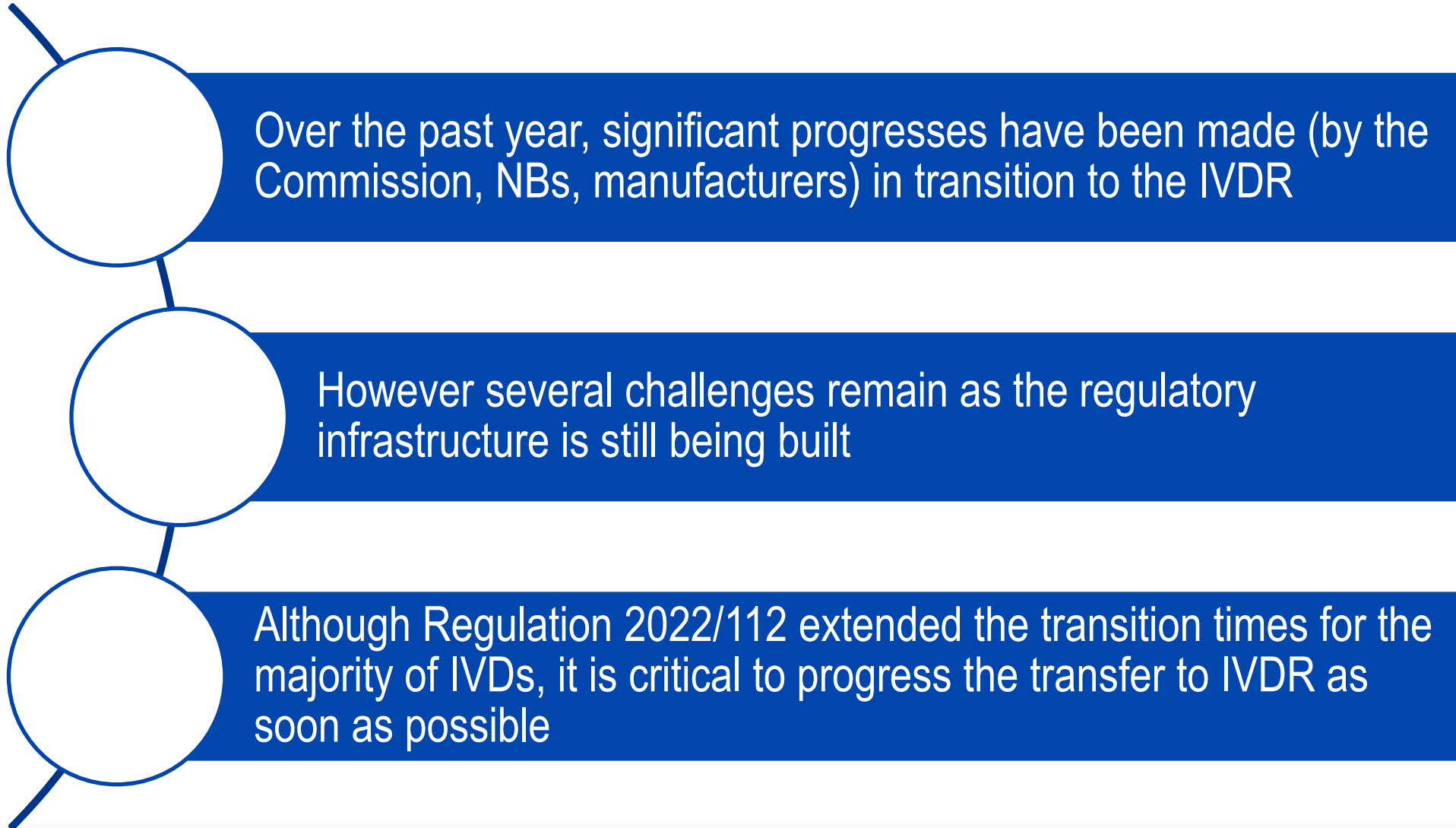
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? QUESTIONS ?

спасибо 谢谢
GRACIAS

THANK YOU

ありがとうございました MERCI

DANKE धन्यवाद

شُكراً **OBRIGADO**

Gracie

감사합니다

Stay informed and Updated



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