WHO guidance on post-market and market surveillance of medical devices including IVDs

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What does WHO normative guidance cover?

- All medical devices, including IVDs
  - Without prejudice to national legislation
- Describes
  - **Post-market surveillance** activities for manufacturers
  - **Feedback procedure** for users
  - **Market surveillance** activities for regulators
- Specific considerations for WHO-recommended IVDs (PQ, EUL, etc.)
- Will be multilingual (6 UN languages)

https://www.who.int/health-topics/substandard-and-falsified-medical-products#tab=tab_1

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What is new?

- Reflects **new international standards/guidance**
  - ISO/TR 20416:2020
  - IMDRF/AE WG/N43
- Expansion to all medical devices
- Obligations for other economic operators
- Revised criteria and timelines for manufacturers to report to NRAs, without prejudice to national legislation

- Terminology clarity/shifts
  - “Post-market surveillance” for manufacturers
  - “Market surveillance” for NRAs
  - “User feedback” rather than “complaint”

What to report	Time to report to NRA
Serious public health threat	Immediately but no later than 48 hours
Death, serious deterioration in state of health of patient, user or other person occurred	As soon as possible but no later than 10 calendar days
Death, serious deterioration in state of health of patient, user or other person might have occurred	As soon as possible but no later than 30 calendar days

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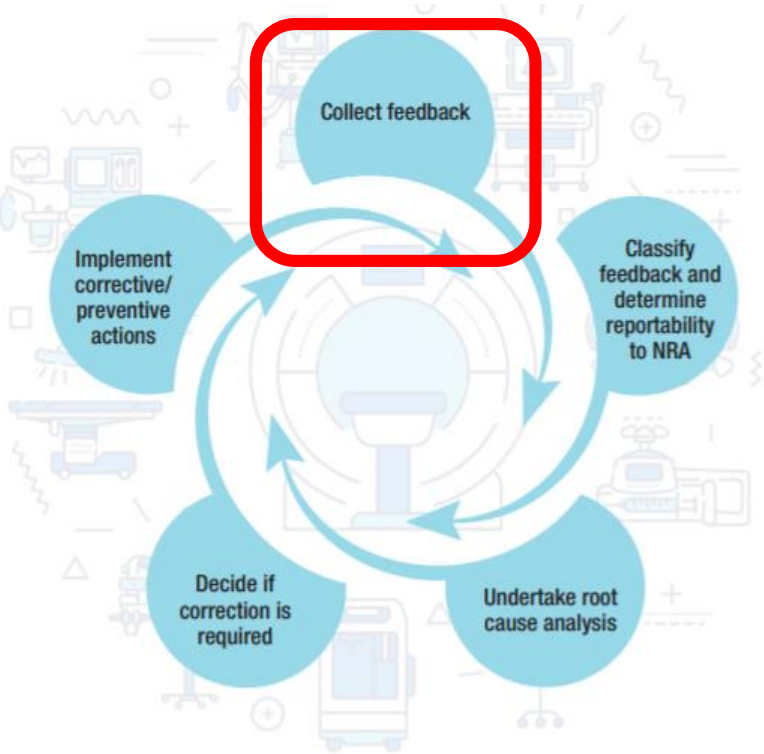
Role of manufacturer – collect feedback

- **Reactively** from users and from economic operators
  - All feedback, positive and negative, should be captured
  - Via email, phone, in-person
  - Ensure contact details (phone and email) are on labelling
  - Encourage use of user feedback forms
  - Consider UDI (unique device identifier)
- **Reactively** from Economic Operators*
  - Ensure supplier contracts are clear

*agents, distributors, authorised representatives



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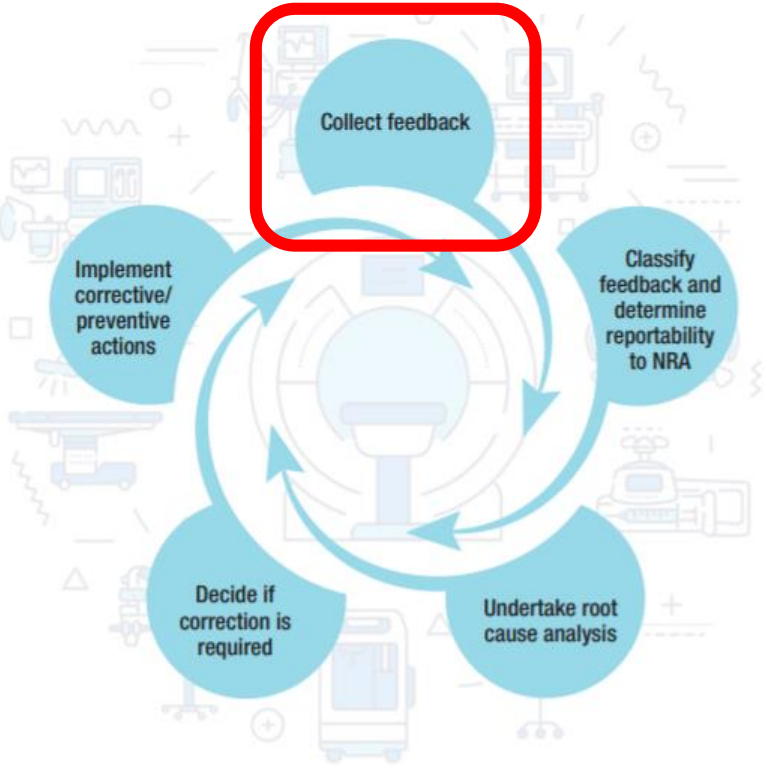
Role of manufacturer – collect feedback

- **Proactively** from other sources
  - Scientific literature and conferences
  - NRA websites (FSNs and market surveillance reports for similar products)
  - Internal audits/external inspections
  - Maintenance, installation, user training
  - Post-market performance follow-up (PMPF)
  - Social media, public media



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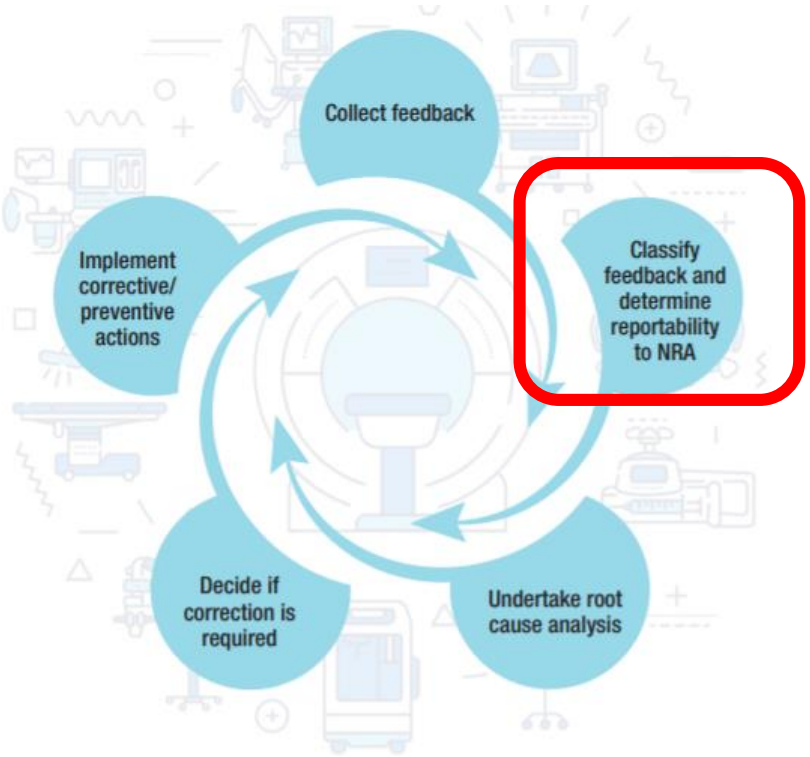
Role of manufacturer – Classify feedback and report

- Receive feedback, log and classify
- Determine reportability to NRA



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Role of manufacturer - classify incident

Use IMDRF N43 terminology

Annex	Useful terms as examples
Annex A - Medical Device Problem	**A090803** (false negative) **A090804** (false positive) **A090805** (non reproducible results)
Annex G - Medical Device Component	**G01006** (test strip) **G0200803** (user interface) **G02011** (device reader)
Annex E - Health Effects - Clinical Signs and Symptoms or Conditions	**E2301** (alteration in body temperature) **E0403** (immunodeficiency) **E1102** (hepatitis)
Annex F - Health Effects - Health Impact	**F13** (misdiagnosis/misclassification) **F04** (delay to diagnosis) **F05** (delay to treatment/therapy)

http://www.imdrf.org/workitems/wi-aet.asp

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Role of manufacturer: determine reportability

Determine reportability to NRA

What to report	Time to report to NRA
Serious public health threat*	Immediately but no later than 48 hours
Death, serious deterioration in state of health of patient, user or other person occurred	ASAP but no later than 10 calendar days
Death, serious deterioration in state of health of patient, user or other person might have occurred	ASAP but no later than 30 calendar days

- **Reports** to
  - All relevant NRAs
  - WHO (if WHO recommended product)
- **How** to report
  - Use relevant NRA report form
  - Default, WHO report form
- **When** to report
  - Follow national timelines
  - Default, WHO timelines

*Any event type or device deficiency which could result in imminent risk of death, serious deterioration in the state of health, serious injury, or serious illness of more than one patient, user or other person that requires prompt remedial action.

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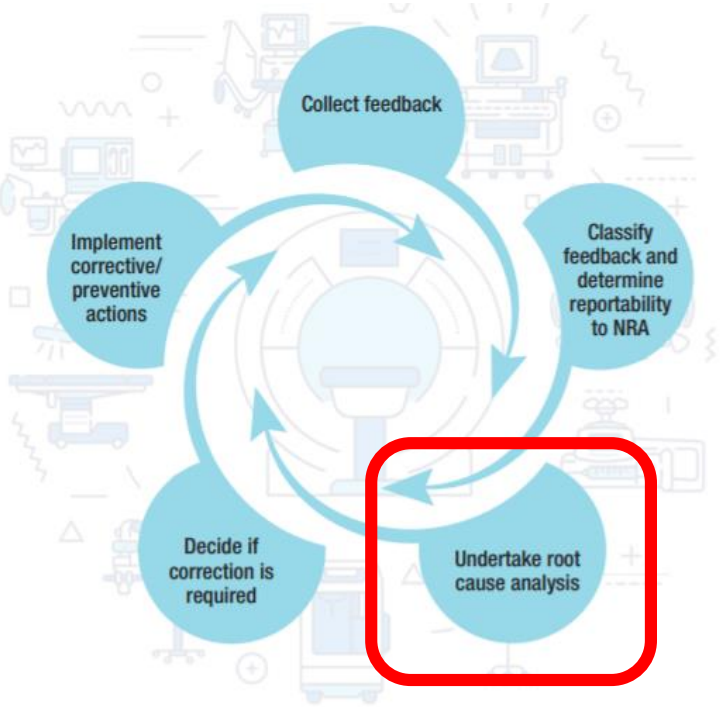
Role of manufacturer – Root cause analysis

- Undertake investigation
  - Root cause cause analysis
    - how/why did this happen
  - Analysis regarding related areas
    - is this same issue impacting/occurring elsewhere
- **Use documented procedures, and tools**
  - Failure mode and effects analysis (FMEA)
  - Fishbone/Ishikawa diagram
  - Etc.



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Classify investigation

- Use IMDRF N43 terminology

Annex	Useful terms as examples
Annex B (Cause Investigation - Type of Investigation)	**B02** (Testing of Device from Same Lot/Batch Retained by Manufacturer) **B14** (Analysis of Production Records)
Annex C (Cause Investigation - Investigation Findings)	**C1403** (Change in Target Marker/Variant/ Mutant) **C1304** (Incorrect Interpretation of Results/Data) **C060201** (Improper Composition/ Concentration) **C0501** (Inadequate Labelling and/or Instructions for Use)
Annex D (Cause Investigation – Investigation Conclusion)	**D13** (Falsified Device) **D1101** (Failure To Follow Instructions) **D0302** (Quality Control Deficiency)

http://www.imdrf.org/workitems/wi-aet.asp

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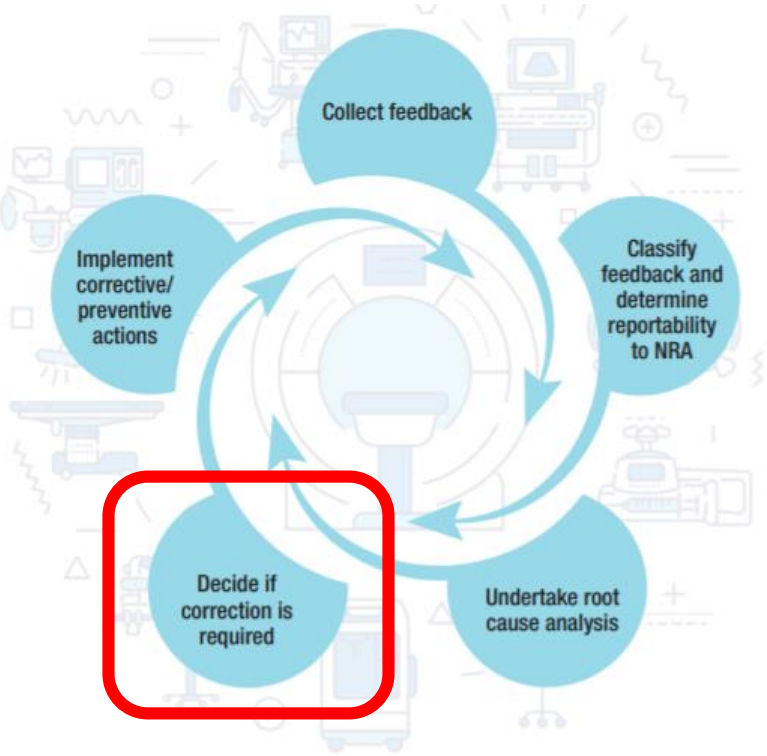
Deciding on correction

▪**Correction**: repair, modification, adjustment, relabelling, destruction or inspection (including patient monitoring) of a product without its physical removal to some other location.

▪Other corrections:

- additional surveillance of the device in use
- retraining
- additional clinical review of patients/clients or retesting, IVD



FSCA

FSN format

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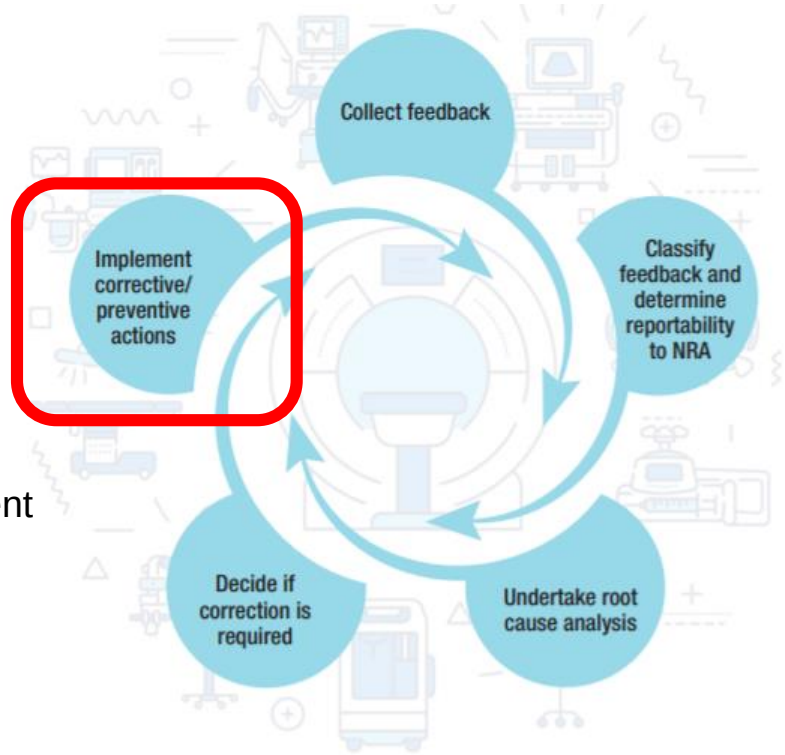
Role of manufacturer - Implementing CAPA

- **Corrective action**
  - Reactive process to eliminate the cause of detected nonconformity or undesirable situation
  - E.g. increased quality control stringency, manufacturing process modification
- **Preventive action**
  - Proactive process to identify opportunities for improvement before a problem is identified
- Detected through:
  - reviews of contracts (with key suppliers), purchasing, processes, design
  - supplier surveillance
  - management review of QMS
  - user training programmes, job aids
  - benchmarking



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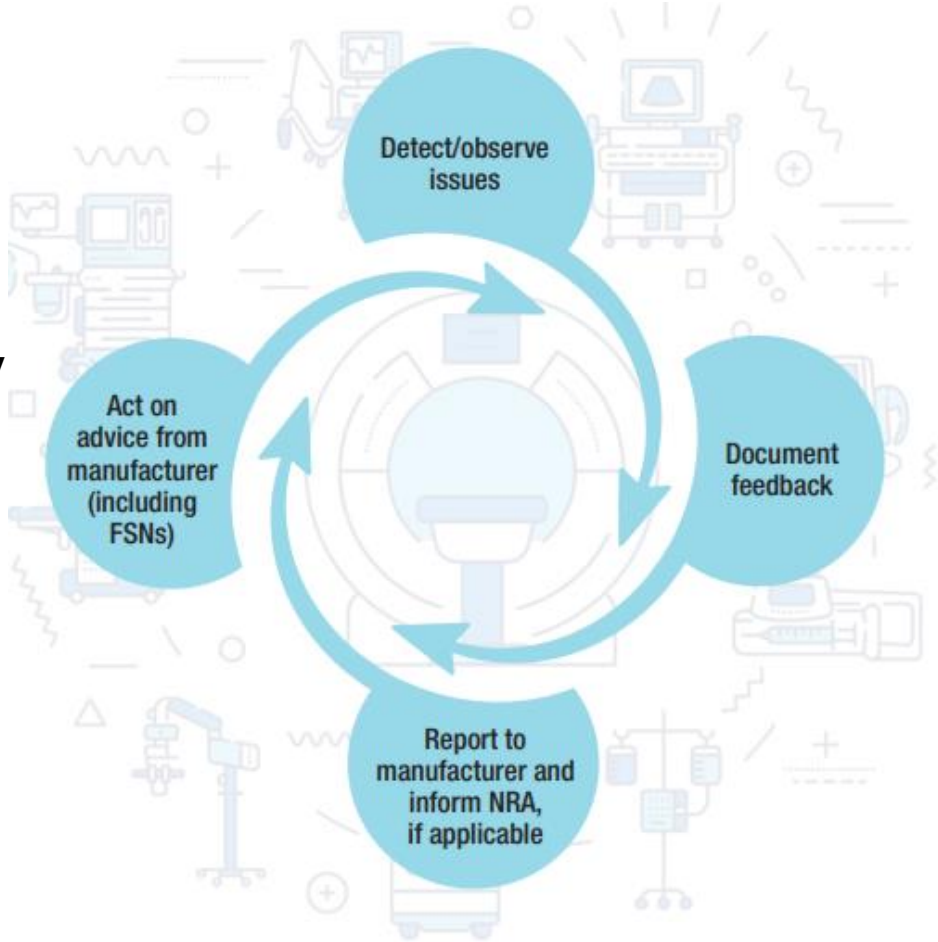
Role of device users (hospitals, labs, point-of-care)

- **Detects** issues related to devices
- **Documents** feedback
- **Reports** feedback to manufacturer **immediately**
- **Acts** on advice of manufacturer



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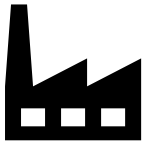
Role of economic operators

Forward feedback to manufacturer

- Other economic operators (authorized representatives, distributors, importers)
- Supplier agreements between manufacturers and their respective EOs are necessary:
  - EOs may receive feedback from users, but EOs should forward immediately to the manufacturer in a timely manner.
    - Translation of feedback
  - EOs may conduct investigation on feedback, at the request of and/or in agreement with manufacturer.
  - Depending on the jurisdiction, EOs may report to NRAs.



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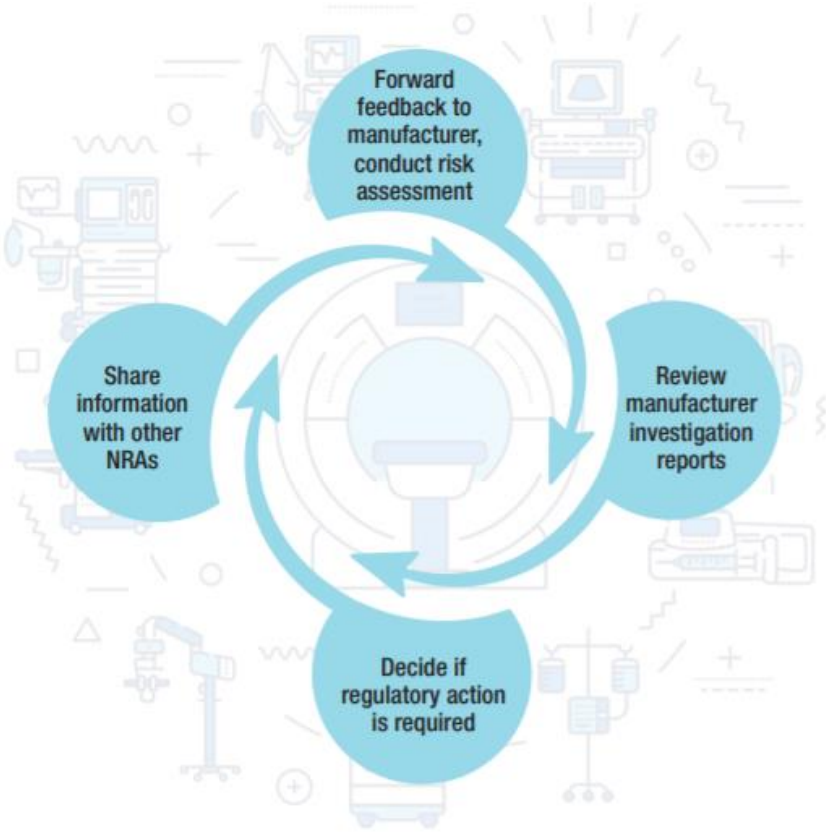
Role of regulators

- **Forwards** user feedback to manufacturer
- **Reviews** manufacturer investigation reports
- **Reviews** manufacturer field safety corrective actions
- **Oversees** testing
- **Decides** if regulatory action is needed
- **Shares** information with other NRAs
  - Public repository of field safety notices



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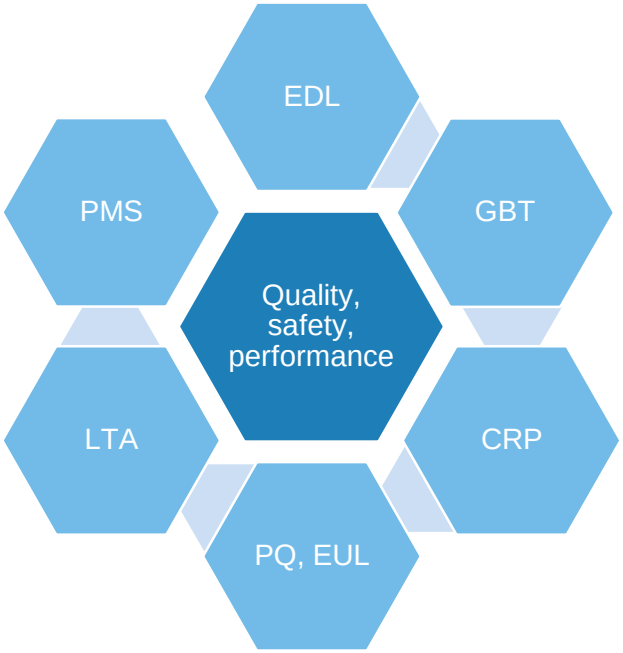
Role of WHO

▪WHO accepts any user feedback and forwards to manufacturer

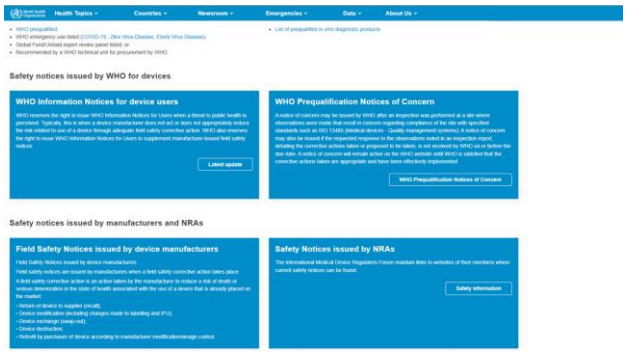
▪Manufacturers of any WHO-listed IVDs (PQ, EUL) must fulfill certain reporting requirements, outlined in Part IV

- WHO receives and reviews
  - manufacturer investigation reports
  - field safety corrective action reports
- Follow-up reports expected no later than 15 calendar days after the initial investigation report is sent or after the previous follow-up report
- Periodic summary reports each year reviewed annually



WHO Information notice for users and field safety notices

Click here



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