Medical Device Regulatory Convergence Project (MDRC), Good Regulatory Practices & Technical Competencies

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THE WHO GLOBAL MODEL REGULATORY FRAMEWORK FOR MEDICAL DEVICES INCLUDING IVDs (GMRF)

Presenter's Name: Agnes Sitta Kijo **Title:** Technical Officer, WHO HQ





Why revise and update the GMRF



- ✓ The WHO Global Model Regulatory Framework for Medical Devices including IVDs (GMRF) was published in 2017, developed in 2015-2016.
- Rapidly changing field, technologies are advancing in their nature and complexity e.g., Software as a medical device.
- ✓ Update of guidance such as post-market surveillance and market surveillance, Good Reliance Practice, Good Regulatory Practice.
- ✓ Discussions during integration of medical devices indicators into the Global Benchmarking Tool.
- ✓ Experience with implementation including challenges experienced by regulators during the COVID-19 pandemic which clearly demonstrates the importance of safe, reliable, and appropriate quality medical devices including IVDs.
- Experience in the use of the GMRF teaches that countries would benefit more from a more expanded guidance.

Revised GMRF: Table of contents





Chapter 1. Introduction

Chapter 2. Purpose and scope

Chapter 3. Terminology

Chapter 4. Definition, classification, essential

Chapter 5. Enabling conditions for effective regulation of medical devices including IVDs

Chapter 6. Establishing a stepwise approach to regulating medical devices

Chapter 7. Regulatory pathways -

Chapter 8. Additional topics

Chapter 9. Implementation



<u>WHO Expert Committee on Biological Standardization: seventy-sixth report (WHO</u> Technical Report Series, No. 1045)

Expanded and new topics (I)



Chapter 4 Definition, classification, essential principles, and conformity assessment of medical devices

- Alignment of definitions with updated IMDRF definitions e.g. medical device definition, adverse event.
- Companion diagnostics: expanded and added in section 8.



Expanded and new topics (II)



Chapter 5 Enabling conditions for effective regulation of medical devices including IVDs

- Good regulatory practice: concept more explicit throughout the GMRF
- Good reliance practice: moved from Chapter 4; more explicit throughout the GMRF

Good regulatory practice: Chapter 5.2-5.7





Elements of Good regulatory practice:

Chapter 3 and Chapter 9

World Health Organization

- Gap analysis
- Stakeholder involvement
- Conflict of interest
- Regulatory competencies
- Implementation and monitoring plan

Key concepts of reliance: Chapter 3.9





https://apps.who.int/iris/bitstream/handle/10665/340323/9789240020900-eng.pdf

C)

Performance evaluation

Expanded and new topics (III)



Chapter 6 Establishing a stepwise approach to regulating medical devices

- Local production: policy, national strategy to support local manufacturers and no double standards between domestics and foreign manufacturers.
- Regulatory testing: no routine testing pre-market. Keep lot verification.





Local production: Chapter 6.3.3.4

- Can contribute to better access
- Technology transfer needed
- Adopt international standards
- Impartial technical support to manufacturers
- Consistency of requirements
- Timely market authorizations
- Regional initiatives for reliance and recognition





Regulatory testing: Chapter 6.3.3.5

- No routine testing at the pre-market phase
- Manufacturer is responsible for safety and performance.
- Testing may be justified in case of
 - suspected products such as SF
 - adverse event
 - post-market according to risk based testing plan
 - lot verification
 - law enforcement



Expanded and new topics (II)

Chapter 7 Regulatory pathways

- Regulatory pathway according to risk class: routine assessment and renewal period.
- Regulatory pathway based on reliance: applying reliance routinely.
- Regulatory pathway for emergency use authorization or derogation: preparedness and importance of reliance.
- Regulatory pathway for combination products: the need for a single regulatory pathway.
- Regulatory pathway for borderline products.
- Regulatory pathway for donated medical devices.



Regulatory pathway according to risk class: Chapter 7.1

World Health Organization

Regulatory pathway :according to risk class: Routine assessment



- * Overseas manufacturer shall assign a local authorized representative.
- ** Except for Class A devices that are sterile or have a measuring function: regulatory audit can be considered.

Regulatory pathway :according to risk class: Reliance



- * Overseas manufacturer shall assign an authorized representative.
- ** For sameness check at a minimum name of the product, regulatory version, product code, design, labelling and packaging, intended use, IFU, manufacturing site and QMS certificate ISO 13485. Reference: Good Regulatory Practice.
- *** Except for Class A devices that are sterile or have a measuring function: regulatory audit can be considered.

13

Expanded and new topics (III)

Chapter 8 Additional topics

- Reprocessing of single-use medical devices: only in dire and exceptional situations.
- Software as a Medical Device (SaMD) and Software in a medical device (SiMD): framework for assessing SaMD.
- Companion diagnostics: framework for specific type of IVD.
- Collaborative Registration Procedure: specific form of work sharing and reliance. •
- Emergency use listing: practice of EUL by WHO as an example for WHO Member states.

Chapter 9 Implementation

- Involving stakeholders in the regulatory process: important part of GRP.
- Developing a road map: systematic planning and follow up.
- Regulatory capacity building: important part of GRP.







The Spirit of Regulation





✓ Regulation should not create barrier and articulated to all stakeholders.

- ✓ Balance between public safety and innovation.
- ✓ Cognizant of international harmonization and convergence efforts.
- Transparent regulatory decision with strong and sound scientific evidence.



www.who.int/medicines Thank you for your attention!



