



Australian Government

Department of Health

Therapeutic Goods Administration

Regulation of Personalised, including 3D Printed, Medical Devices

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ARCS

TGA Health Safety
Regulation

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Australian Context

Personalised devices currently regulated as custom-made devices

custom-made medical device means a medical device that:

- (a) is made specifically in accordance with a request by a health professional specifying the design characteristics or construction of the medical device; and
- (b) is intended:
 - (i) to be used only in relation to a particular individual; or
 - (ii) to be used by the health professional to meet special needs arising in the course of his or her practice.



In Australia, custom-made devices

A diagram consisting of three white circles arranged vertically, connected by a blue line that starts at the top left, goes around the first circle, then around the second, and finally around the third, ending at the bottom left. Each circle is positioned to the left of a blue rectangular box containing text.

Are exempt from Inclusion in the Australian Register of Therapeutic Goods

Are not subject to third party oversight of manufacturing or evidence of compliance with the Essential Principles

Are required to be notified to the TGA and have post market surveillance and reporting requirements in place



Are consumers protected under these requirements?

- Custom-made implants are **not currently subject to third party pre-market review of safety, quality and performance**
- Historically, custom-made medical devices were **considered to comprise low risk products, or be very limited in number**
- **High risk devices** e.g. implants, that are manufactured conventionally are subject to rigorous regulatory oversight of design and manufacture
- **There are some novice players with limited awareness of QMS and regulatory requirements** involved in 3D printed device development

So TGA consulted on options for regulatory requirements to address risks posed by those higher risk medical devices which are custom-made



Some international approaches to regulation

US - Most 3D printed patient-specific devices subject to normal pre-market requirements

- Custom-made devices must only be for treating a “**sufficiently rare condition, such that conducting clinical investigations on such a device would be impractical**”
- Production of the device must be “**limited to no more than five units per year**”
- Manufacturer is required to submit an annual report

EU – Certification for manufacturers of high risk custom-made devices

- The new 2017 EU Medical Devices Regulation requires that manufacturers of high risk custom-made devices will now require notified body certification

Canada - has an application process for the use of custom-made devices.

IMDRF – is currently developing recommendations for a harmonised approach to defining medical devices manufactured for particular individual/s



TGA's activities

- Stakeholder workshop August 2017
- Numerous meetings with Australian stakeholders and international regulators Sep 2017 - June 2018
- Public consultation in Nov - Dec 2017
- In May 2018, the submissions and a summary of the response were published on TGA website
- Stakeholder workshop July 2018



Proposed regulatory changes related to personalised and 3D printed medical devices

Consultation paper

Version 1.0, November 2017

TGA Health Safety
Regulation



Proposals for regulatory change

Proposal 1: New definitions for personalised devices

- **customised / adaptable medical device**
 - a mass-produced device that must be adapted or assembled at the point of care, to suit an individual patient's anatomy
- **patient-specific medical device**
 - manufactured based on a standard device template model, or specified design envelope that is matched to a patient's anatomy
- **custom-made medical device**
 - intended for the sole use of a particular individual; made on request of the healthcare professional and intended to address the specific anatomy or pathological condition of the patient

Application or Number limits for custom-made devices?



Responses to proposal 1:

- A range of responses regarding the proposed definitions – also need to consider international regulator views and potential for alignment
- Suggestions to include examples aligned to each definition
- Most submissions not in favour of a limitation in the number of custom-made devices to be produced by one manufacturer per year (as per the USA)
- Few submissions commented on the proposed application and approval process for custom-made devices (as per Canada).



Proposal 2: Changes to the custom made device conformity assessment procedure

- The manufacturer's statement about a custom made device is provided to the patient (as per in the EU)
- TGA be allowed to enter and inspect custom made device manufacturing sites
- An Australian manufacturer or sponsor of custom made devices to provide an annual report to the TGA
- Documentation about an implantable custom made device to be maintained for at least 15 years



Reponses to proposal 2 were positive throughout

- Some comments on added cost and administrative burden from annual reporting and requirement to store device-related data for a longer period
- No objections to allowing the TGA to enter and inspect custom-made medical device manufacturing sites





Proposal 3: Changes to the definition of manufacturer

- To clarify when someone, who modifies a supplied device for an individual, does not meet the regulatory requirements of a manufacturer
- To address new paradigm of point-of-care manufacturing for health care facilities and practitioners - introduction of 'medical device production system'

Only half of the submissions commented on proposal 3

- Of those, half agreed with the TGA's proposal while the other half raised issues such as need for further clarification on "medical device production system"
- Proposed exemptions for health care practitioners/hospitals not fully supported
- Uncertainty about what exactly should be considered a medical device production system and request for examples
- Comments on potential added cost and administrative burden



Proposal 4: New classification for anatomical models and digital 3D files

- Up-classification of software and anatomical models intended for diagnosis or investigation of the anatomy to class IIa
- This would not apply to hospitals or healthcare practitioners that use a medical device production system to produce the anatomical models for treating their patients, and the medical device production system was included in the ARTG

General support for Proposal 4

- Some concerns about the potential additional cost and administrative burden that would arise from reclassification
- Concerns as to which anatomical models would be captured under the new provision (e.g. anatomical models used for education ?)
- Some submissions debated whether the reclassification would be enforceable



Proposal 5: New arrangements for devices with human material

- **Devices containing human material to not be regulated as biologicals (cell and tissue products) but as Class III devices**

Responses to proposal 5 were positive

- Welcomed the plan to align with other regulators for these types of products
- One submission requested clarification on devices that are made wholly from substantially altered human material (e.g. fixation pin made from human bone)
- A suggestion to differentiate between products with different cell types



The International Perspective: IMDRF Personalized Medical Devices Working Group Chair: Australia

NWIP Purpose:
Harmonised Definitions
Aligns with IMDRF Strategic Priorities

define /di'fain/ v.tr. 1 give the exact meaning of a word etc.). 2 describe or explain the scope of (define one's position). 3 make clear, esp. in outline (a defined image). 4 mark out the boundary or limits of. 5 (of properties) make up the total character of. *definable* adj. *definer* n. [ME f. OF *definer* vtr. f. L *definire* (as DE-, *finire* finish, f. *finis* end)]
definite /'definit/ adj. 1 having exact and discernible



Progress

- Established Working Group membership – all member jurisdictions represented, also two Affiliate Organization members.
- Reviewed GHTF foundation documents for references to custom-made devices.
- Conducted Working Group member survey for definitions in own country regulations or guidance that address personalized medical devices.
- Developed draft document proposing relevant definitions.
- Conducted public consultation and revised draft
- Submitted revised draft to IMDRF MC for September meeting



WG Member Survey - Summary

Jurisdiction	Regulatory definition for custom-made	Regulatory definition for other personalized devices	Any guidance material related to personalized devices
AHWP	N/A	N/A	✓
Australia	✓		
Brazil			
Canada	✓		
China			✓
Europe	✓		
Japan			
Korea			✓
Russia			
Singapore	✓		
United States	✓		✓

OPPORTUNITY FOR
HARMONISATION



IMDRF Draft Document



IMDRF International Medical
Device Regulators Forum

PROPOSED DOCUMENT

International Medical Device Regulators Forum

Title: Definitions for Personalized Medical Devices

Authoring Group: IMDRF Personalized Medical Devices

Date: XX XXXXXX 2018



Proposed Definitions in Draft Document

adaptable medical device – a medical device that meets the following requirements:

- it is mass-produced; and
- it is adapted, adjusted, assembled or shaped at the point of care, in accordance with the manufacturer's validated instructions, to suit an individual's specific anatomic-physiologic features prior to use.



Proposed Definitions in Draft Document

patient-matched medical device – a medical device that meets the following requirements:

- it is matched to a patient's anatomy within a specified design envelope using techniques such as scaling of the device based on anatomic references, or by using the full anatomic features from patient imaging; and
- it is typically produced in a batch through a process that is capable of being validated and reproduced; and
- it is designed and produced under the responsibility of a manufacturer even though the design may be developed in consultation with an authorized healthcare professional.



Proposed Definitions in Draft Document

patient-matched medical device (continued)

Note 1: A written request from an authorized healthcare professional is not mandatory.

Note 2: The number and type of design inputs in consultation with a healthcare professional may vary depending on the medical devices to be manufactured.

Note 3: The design must remain within the validated parameters of the specified design envelope.



Proposed Definitions in Draft Document

custom-made medical device – a medical device that, at a minimum, meets the following requirements:

- it is intended for the sole use of a particular individual (which could be a patient or healthcare professional); and
- it is specifically made in accordance with a written request of an authorized healthcare professional, which gives, under their responsibility, specific design characteristics; and
- it is intended to address the specific anatomico-physiological features or pathological condition of the individual for whom it is intended.



Proposed Definitions in Draft Document

custom-made medical device (continued)

Note 1: Medical devices that are patient-specific, adaptable or mass-produced shall not be considered to be custom-made.

Note 2: A custom made device is intended for a case where an individual's specific needs cannot be met, or cannot be met at the appropriate level of performance, by an alternative device available on the market.

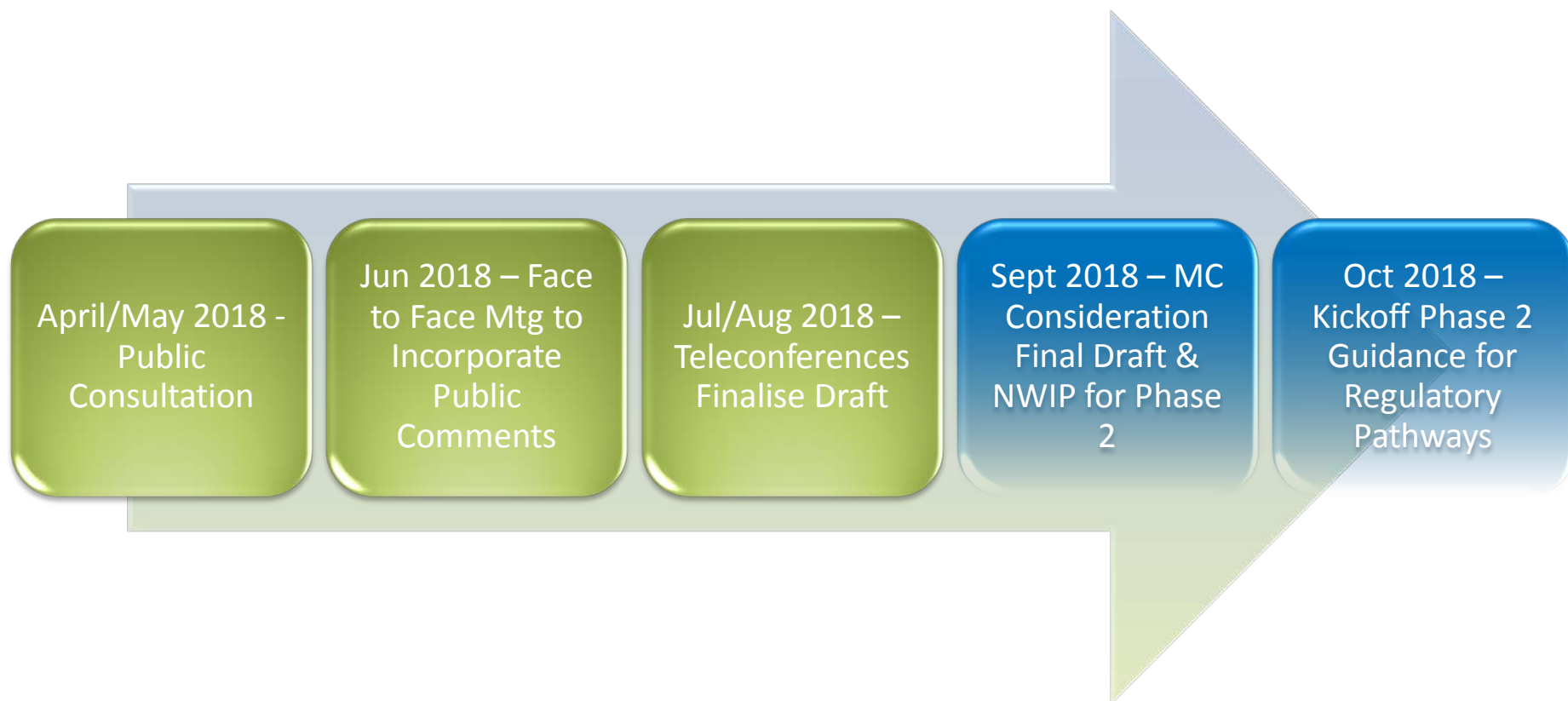


Proposed Definitions in Draft Document

- **personalized medical device** – a generic term to describe any of the types of medical devices that are intended for a particular individual, which could be either a custom-made, patient-specific, or adaptable medical device.



Working Group Timeline





Conclusion

- Further clarification and consultation is required
- For medium to high risk devices, **both patient-matched and mass-produced devices need reasonable regulatory oversight**
 - current custom-made device regulation is no longer fit for purpose
- Next Steps:
 - Continue IMDRF Work
 - October 2018 - Conduct 2nd consultation in Australia for regulatory reform
 - November/December 2018 – Analyse consultation responses, prepare policy recommendation
 - December 2018 - Seek policy approval to amend regulations



Thank You
Questions?



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