



Australian Government
Department of Health and Ageing
Therapeutic Goods Administration

Building a GHTF Regulatory Framework for Australia

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AUSTRALIA

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What does the TGA do?

- Regulates the safety, quality and efficacy of therapeutic goods available in Australia.
 - Oversees a >\$9 billion therapeutic goods sector with exports of \$2 billion
- Maintains national regulatory system for Genetically Modified Organism's
- Chemicals - oversees \$20 billion industry
- Provides advice on the use of chemicals to other agencies
- Operates under cost recovery arrangements

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How does the TGA regulate therapeutic goods?

- Operates under the Therapeutic Goods Act 1989 and associated legislation
- Sets Standards
- Evaluates safety, quality and efficacy before entry to market
- Licensing of manufacturers and ongoing audits
- Maintains Australian Register of Therapeutic Goods (ARTG)
- Monitors products on the market (Postmarket)
- Controls access to unregistered products

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Post market activities

- Controls on advertising therapeutic goods
- GMP audits of manufacturers
- Adverse reaction/incident monitoring
- Recalling unsafe products
- Enforcing the law - surveillance
- Risk based product testing



Consumer Concerns

- Timely access
- Information
- Independence
- Community service obligation
- Consumer participation in decision making



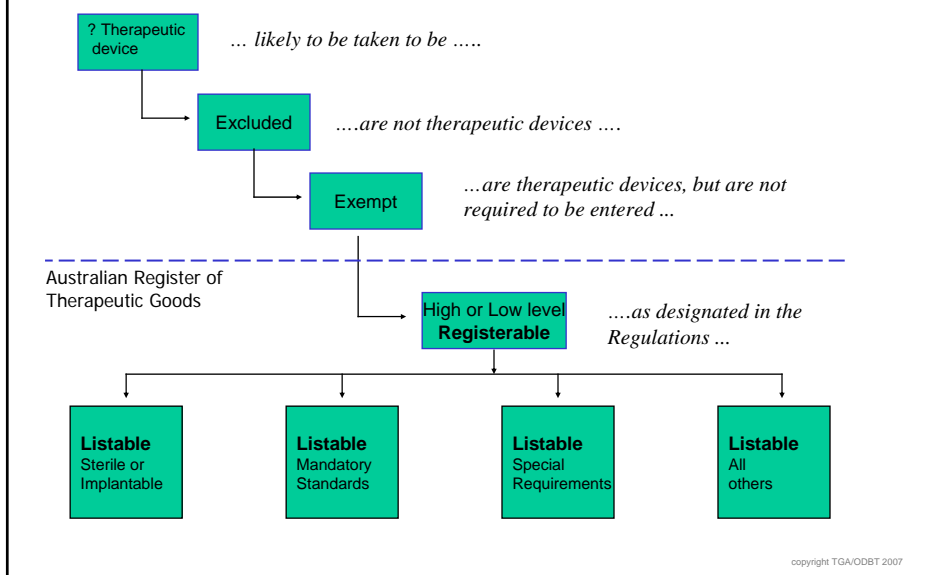
Authority & Instruments of Regulation (historical)

- Department of Health & Aged Care
 - Therapeutic Goods Administration
 - Office of Devices Blood & Tissues
 - Therapeutic Goods Act 1989
 - Therapeutic Goods Regulations 1991
 - Various Regulatory Instruments
 - » DR 4 - Device Requirements under the Therapeutic Goods Act 1989
 - » Therapeutic Goods Orders



Classification (Historical)

- Defines the requirements for supply
- Defines which part of the ARTG
- Based on 'lists' found in the legislation
- Lists define inclusion & exclusion
- Requires a change in Legislation to re-classify a device



Registered Devices

- Heart Valves
 - Active Implants
 - Drug Infusion Systems
 - Human/animal origin
 - Intra-ocular lenses
 - Intra-uterine devices
 - Breast prostheses
 - Barrier contraceptives
 - Instrument Grade Disinfectants
 - HIV, Hep C Diagnostic Kits
- Satisfactorily establish -
 - **Quality**
 - **Safety**
 - **Efficacy**
 - Evaluation of -
 - **Design**
 - **materials**
 - **design validation**
 - **Manufacturing**
 - **GMP**
 - **Sterility**
 - **Biocompatibility**
 - **Pre-clinical studies**
 - **Human clinical trial data**



Listed Devices

- Examples
 - Syringes/needles
 - Wound drains
 - Bedside monitoring
 - Non-active implants
 - Hearing aids
 - Stents
 - Endoscopes
 - Catheters
 - Bedside monitoring
 - CT & MRI scanner
 - Linear Accelerator
- Minimal evaluation -
 - **Safety**
 - **Quality** (for some devices)
 - **Labelling**
 - **Mandatory standards** (for some devices)
 - **Special conditions** (for some devices)

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Disadvantages of Old Framework

- Device classification system is unique to Australia
- Use of schedules for classification reduces the flexibility to appropriately evaluate high risk devices using new technology
- Does not establish a-priori
 - a set of minimum requirements of safety and performance for all medical devices
 - a method of demonstrating compliance with these minimum requirements

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Why Change

- Minimum set of safety & performance requirements for **ALL** devices
- Public Health will be enhanced by a system of device classification which manages technology changes more quickly
- Devices appropriately assessed according to the level of risk
- removes duplication - globally aligned system eliminates unique Australian requirements



Considerations in Establishing a Regulatory Framework

- Public health protection
 - Proportional to
 - Risks presented
 - Benefits gained
 - Resources expended
- Political accountability
 - Within a legislative framework
- Resources
 - Efficient use of
 - Funding
 - Expertise
 - Support infrastructure



Considerations in Establishing a Regulatory Framework

- Least burdensome approach
- Regional/global harmonisation
- Transparency & predictability – no surprises !!!



Considerations in Establishing a Regulatory Framework

- Appropriate Quality Management Systems
 - Based on risk
- Demonstration of compliance
 - Essential Principles of Safety & Performance
 - Risk based classification
 - Conformity assessment



Considerations in Establishing a Regulatory Framework

- Postmarket programs
 - Incident reporting
 - Manufacturers & Sponsors
 - Users
 - Pro-active Vigilance
 - Audits of Sponsors & Manufacturers
 - Compliance Testing
 - Formal recall processes
 - Enforcement
- Control of promotion/advertising
- Access to unapproved devices
 - With conditions
 - In the event of demonstrated clinical need

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Considerations in Establishing a Regulatory Framework

- Opportunities
 - Alignment of regulatory frameworks
 - Mutual Recognition Agreements
 - Memorandums of Understanding
 - Regional/Global alignment or harmonisation
 - 'Recognition' of external assessment processes
 - 'Recognition' of external Conformity Assessment Bodies
 - Value add rather than re-assess

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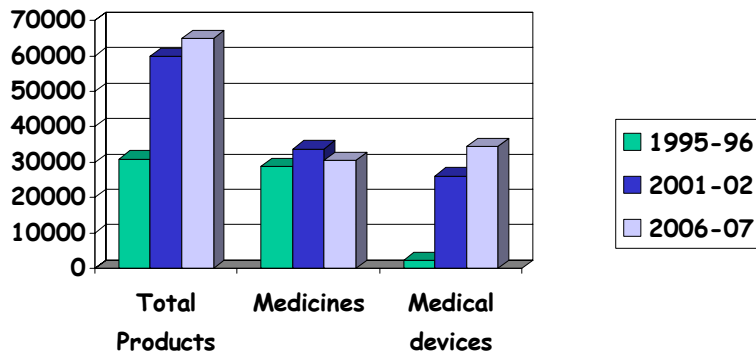
Regulatory Framework Elements - Australia

- Conformity Assessment
 - Essential principles
 - Classification
 - Technical File review
 - Quality Management Systems
- Registration of entity responsible for placing the product on the market
 - Manufacturer
 - Importer
- Inclusion of medical device(s) on the Australian Register of Therapeutic Goods
- Clear Roles & Responsibilities
 - Manufacturer
 - Importer
 - Regulator

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Product trends - Australia



Source : TGA ARTG

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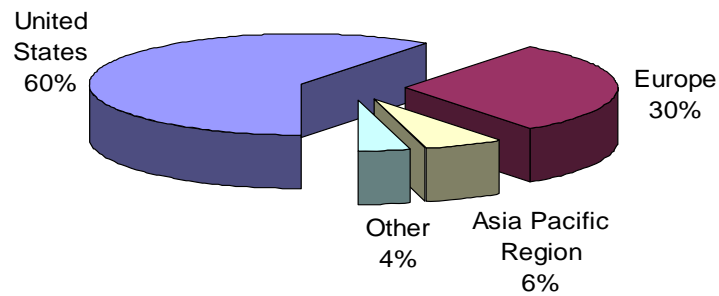
The Device Market

- ~ 1500 sponsors
- > 30,000 different devices
 - between 400 - 600,000 catalogue items
- >85% of devices are imported
- <10% of devices could be classified as high risk
- Australia < 2% of world market

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Sources of Australian Imports

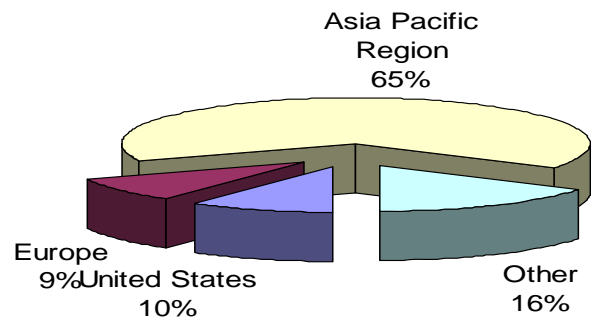


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Destination of Australian Exports



DIST

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Therapeutic Goods (Medical Devices) Amendment Act, 2002

- Regulations modelled on the recommendations of the **Global Harmonisation Task Force**
- Mutual Recognition Agreement with the European Union – since 1998

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Therapeutic Goods Amendment (Medical Devices) Act 2002

- Passed through the Parliament 4 March 2002
- Regulations in place 4 October 2002
- First transition period ended 4 October 2004
- **all devices** subject to the new legislation from 4 October 2007



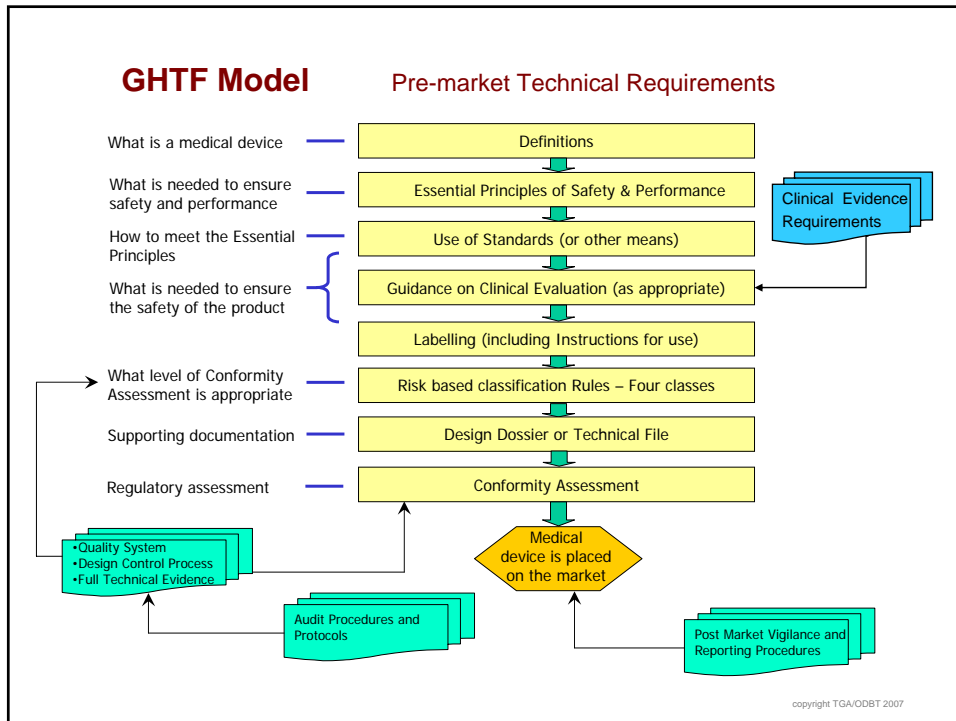
Elements of New Regulation

- 14 Essential Principles of safety and performance
- 22 Rules of Classification based on Risk to user and/or patient
- Quality Systems - ISO 13485
- Independent Assessment and on-going surveillance of Quality Systems
- Entry on the **Australian Register of Therapeutic Goods**
- **Postmarket monitoring of device performance**

And where do these harmonised principles come from



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Considerations in Establishing a Regulatory Framework

- Opportunities
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 - **Value add rather than re-assess**

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Assessment Mechanisms

- The assessment mechanisms of
 - conformity assessment certification
 - the consideration of overseas assessment reports; and
 - application audits
- ... would not be possible without harmonised definitions of
- the classification rules;
 - the conformity assessment procedures; and
 - the essential principles.

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Pre-market Assessment

- All medical devices must comply with the Essential Principles regardless of Class
- All manufacturers must apply a conformity assessment procedure
- Many of the procedures require an independent assessment of a product or a Quality Management System

But, how are the assessments performed?

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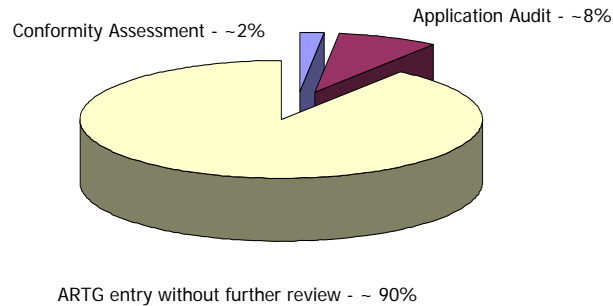
Assessment – three possibilities

- Entry and approval without review
 - Using evidence (certification) of assessment of the manufacturer and products in a jurisdiction with an equivalent regulatory framework
- Application Audit
 - Review of documentary evidence generated as part of an assessment undertaken in a jurisdiction with an equivalent regulatory framework
- Conformity Assessment
 - by the TGA

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Assessment Mechanisms – three possibilities



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Assessment Mechanisms – Entry onto the ARTG

- Sponsor submits copies of evidence of appropriate Conformity Assessment evidence - EC certificate(s)
 - Register evidence database is scoped using GMDN
- Sponsor applies for entry of device(s) on to the ARTG
 - Binding declarations made at time of application
 - Correct classification
 - Correct conformity assessment procedure has been applied
 - Complies with essential principles
 - Mechanism in place to obtain info from manufacturer on request by the Agency
 - Postmarket processes in place
 - Etc, etc
- Inclusion Certificate is issued and device is entered on to the ARTG without further review

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Assessment Mechanisms – Application Audit

- may be performed when the TGA has not performed the full conformity assessment certification
- mandatory and randomly selected documentation audits
- performed at the time that a Sponsor applies for an entry on the ARTG



Assessment Mechanisms – Application Audit

- Shorter process
- Desk audit of documentation -
 - Essential Principles checklist
 - Risk Analysis
 - EC Certification(s)
 - Design Exam Report (Class III & AIMD only)
 - Audit Report (Full QMS audit & most recent surveillance audit)
 - Summary of Clinical Evidence (expert report)
 - Labelling
 - DOC to Therapeutic Goods (medical devices) Regulations 2002



Selection for Application Audit

Mandatory

- barrier contraceptive
- implantable contraceptive device
- implantable breast prosthesis
- instrument grade disinfectant
- active implantable medical device
- prosthetic heart valve
- implantable intra-ocular lens
- intra-ocular visco-elastic fluid
- class III device not assessed under an MRA

Non-mandatory

- applications suspected of containing false information
- where the device incorporates a new, different or emerging technology
- devices that were previously unregulated
- questionable regulatory history
- Random selection

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Application Audits - level 1

- Original or notarised Declaration of Conformity
 - (to the Therapeutic Goods (medical devices) Regulations 2002)
- Original or notarised evidence of third party certification of the quality system - eg EC or and/or design exam certificates
- Labelling
 - General labelling
 - Instructions for use
 - Advertising material

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Application Audits - level 2

- Level 1 audit data **plus** –
- Risk analysis performed by manufacturer
- Summary of Clinical evidence
 - expert report
 - trial report
 - literature report
- Essential principles checklist (Australian, not EU)
- Most recent QMS Audit or re-audit report
 - including close out of non-conformities
- Design Exam or Type Exam report (if applicable)
- Special Process validations



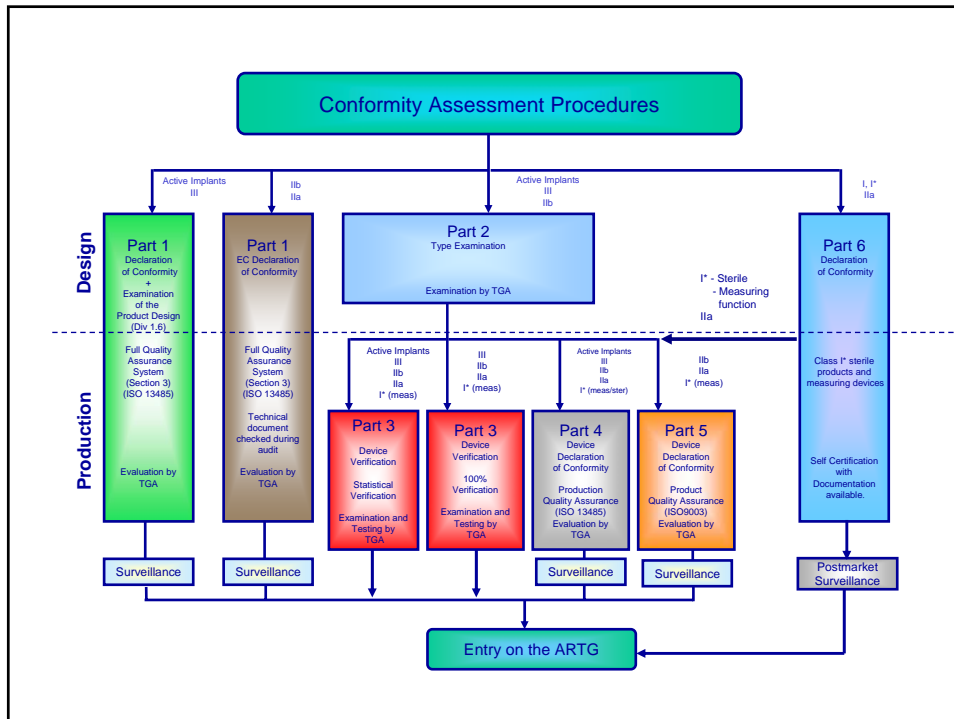
Assessment Mechanisms - Conformity Assessment Procedures

- Conformity Assessment Certification
 - The TGA must perform the assessment as selected by the Medical Devices Rule for
 - Selected types of devices
 - Selected types of manufacturers
 - For all other assessment the TGA will take into account the assessments performed by other regulators performing similar assessments overseas.
 - The TGA will decide if the products are suitable for supply in Australia

Assessment Mechanisms - Conformity Assessment Procedures

- A set of activities that the manufacturer must do
 - procedure is selected by the manufacturer
 - based on the risk class of the product
 - using classification rules
 - procedures are available for devices used for a special purpose
 - custom made
 - procedure packs
 - Combination device - medicine products
 - Must confer with TGA medicines regulator
 - Must meet regulatory requirements for medicines

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Assessment Mechanisms - Conformity Assessment Procedures

- Types of Manufacturers
 - products from Australian manufacturers
- Types of Products
 - contains tissues of animal origin
 - contain tissues, cells or substances of microbial origin or recombinant technology
 - incorporating stable derivatives of human blood or human plasma
 - incorporates a medicine with an ancillary action



Assessment Mechanisms - Conformity Assessment Procedures

- Procedures require
 - application of a quality management system (QMS)
 - design or type examination assessments, by the TGA
 - manufacturer's post-market review:
 - Corrective & Preventative Action (CAPA) and adverse event reporting
 - initial and surveillance audit of the QMS, by the TGA
 - the keeping of records
 - a declaration of conformity referencing Therapeutic Goods (medical devices) Regulations 2002



Assessment Mechanisms - Conformity Assessment Procedures

- The TGA issues a "Conformity Assessment Certificate" at the successful conclusion of an assessment
- Scope of certificate is specified in terms of GMDN Code for relevant devices

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Australian Register of Therapeutic Goods

- Record of
 - Manufacturer
 - Sponsor
 - Conformity Assessment Body
 - Conformity Assessment Procedure
 - Kind of medical device
 - Manufacturer
 - Sponsor
 - Class
 - GMDN Code
 - Other device specific information (Class III & AIMD only)
- Entry on the ARTG is the basis for legal supply

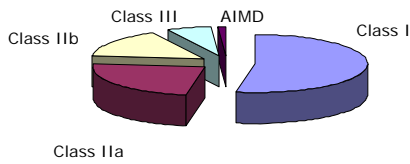
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The ARTG today.....

- 1830 Sponsors
- 6100 manufacturers
- 25000 'kinds of medical device'

• Distribution

- 12100 Class I
- 250 Class I measuring
- 950 Class I sterile **52.5%**
- 6000 Class IIa devices **24%**
- 4000 Class IIb devices **16%**
- 1600 Class III devices **6.5%**
- 250 Class AIMD devices **1.0%**

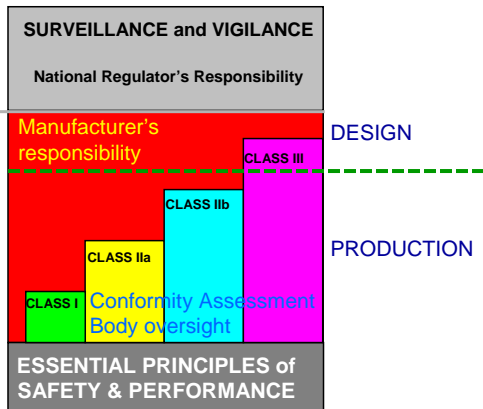


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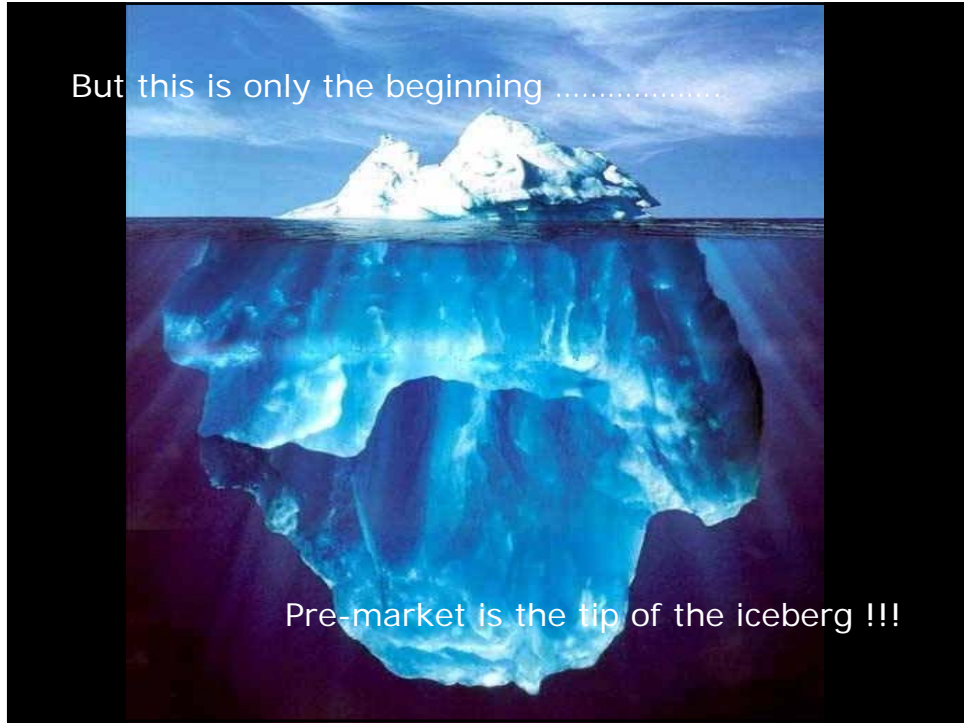
POSTMARKET


PREMARKET

RISK ↑



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Abrridged pre-market assessments **must** be supported by a strong post-market program

- Incident reporting
 - Manufacturers
 - Clinical users
 - General public
- Pro-active vigilance systems
 - Epidemiological studies
 - Audits
 - Product
 - Sponsor/distributor
 - Manufacturer
 - Formal recall processes
 - Enforcement

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From Design to Obsolescence

- The product life cycle
 - Design
 - Bench testing & validation
 - Clinical testing
 - Risk based pre-market review & approval

 - Market entry
 - Post-market review and evaluation

 - Replacement



Post-market

- Questions of interest -
 - Long term safety
 - After clinical trial - use in the broader population
 - Change of user setting
 - eg hospital to home use
 - Adverse events
 - Unusual pattern of adverse events which may not lead to product recall



Where does the data come from

- Case control studies
- Non-clinical testing
- Product registries
- 'Sentinel' users
- Epidemiological studies
- Manufacturer reporting to NCA (eg TGA)
- Sponsor reporting (mandatory in Australia)
- User reporting (clinical, patient, etc)



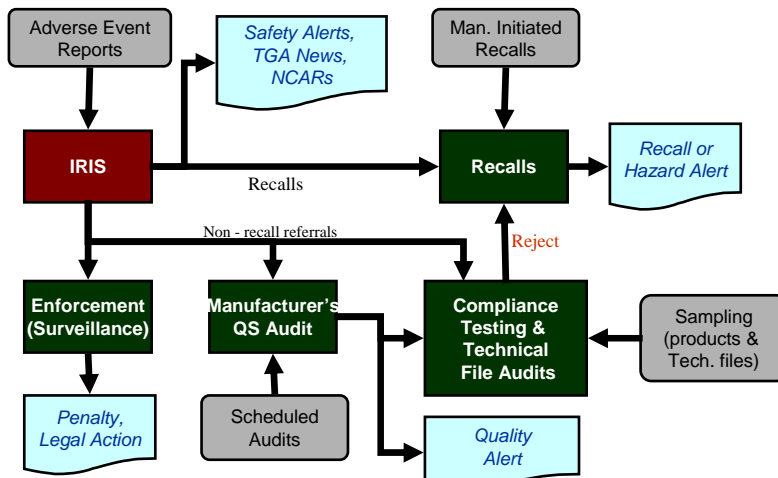
Post-Market Activities

- Manufacturer's Post-Market Surveillance.
 - pro-active and reactive - carried out by the manufacturer and/or sponsor
- Post Market Vigilance
 - Reporting of serious medical device adverse events and 'near miss' events to regulatory agencies
 - Subsequent regulatory agency investigations and dissemination of information about those events.

Post-Market Activities

- Post Market Monitoring (TGA)
 - Activities carried out by TGA to ensure ongoing market compliance eg.
 - Post-market Testing
 - Product survey (technical file audits)
 - Surveillance
 - Post-market QMS and GMP audits

TGA's Vigilance and Market Monitoring Systems





Post-Market Surveillance

- Manufacturer/Sponsor obligations:
 - Records to be kept and made available on request that demonstrate compliance with essential principles.
 - Establish and maintain a post-market surveillance, reporting and corrective action system for problems and complaints (no matter how minor)
 - Make information obtained using this system available upon request



Post-market Monitoring

- The TGA conducts...
 - Post-market testing of certain types of products.
 - “product surveys” to check for compliance with information requirements and for meeting essential principles.
 - Post-market QMS audits.
- And
 - Encourages user reporting to both the sponsor and the TGA.



Post-market Vigilance

- Sponsors must report the details of events associated with their device(s) that have resulted or could have resulted in serious injury or death
- This is now law... (always has been for that matter !!)
- Guidance will allow some exemptions
- Guidance will detail information required



Post-market Vigilance

- AE Reporting timeframes...
 - Within **two days** of becoming aware of an issue of serious public health threat or concern that will require prompt action to reduce the hazard
 - Within **ten days** of becoming aware of a death or serious injury
 - Within **thirty days** of becoming aware of an event that might have led to serious injury or death



Post-market Vigilance

- The TGA ...
 - Collects and investigate adverse events reports from
 - sponsors and manufacturers
 - other regulatory agencies
 - medical device users
 - Disseminates information and/or oversee corrective actions taken as a result of adverse event report investigations
 - Exchanges vigilance information to other regulatory agencies in accordance with various MRA and GHTF agreements

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User Reports

- Evidence suggests that a substantial number of medical device adverse events and malfunctions are not reported to either the manufacturer or the TGA.
- The TGA regulates the supply, not the use
- The TGA can encourage, promote and entice user reporting, but not enforce it.

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Case Studies

- Heart Valve with Silzone Coating
- Most manufacturer's Zirconia Hip Prosthesis
- Pacemaker
- UHMW Acetabular Cup
- Tempo Pacemaker

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Common Themes

- All received significant media coverage at the time
- All devices had good previous market history
- All devices passed final QC checks
- All are implantable devices
- All require surgery to correct
- Significant mortality associated with some corrective surgery for these devices

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Common Themes

- All received regulatory approval, after evaluation, in significant markets
- All corrective actions will have (had) a large impact on the National health budget



Conclusions

- Pre-market assessment processes must be supported by rigorous post market programmes
- Regulatory approval is not a once off exercise, but requires continuous post-market monitoring is required to ensure continued safety of medical devices



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