ZP-20 The vigilance system and post-marketing surveillance for medical devices incl. the monitoring of adverse incidents and the system of their reporting in the Czech Republic

This guideline supersedes SÚKL guideline PZT-15 as of October 1, 2004.

INTRODUCTION

The purpose of this guideline is to provide information to the professional audience (manufacturers, distributors, providers of health care, service organisations, and other regulatory bodies) regarding the vigilance system and the system of post-marketing surveillance (hereinafter referred to as "PMS"), which are required in the EU and are also mentioned in the standard ČSN EN ISO13 485:2003 – Medical devices – Quality management systems – Requirements for the purposes of regulations. Information on the registration, reporting, and investigation of adverse incidents in the Czech Republic are also provided in association with the information on the vigilance system and the PMS system.

KEYWORDS AND TERMS

AIMD (A*ctive Implantable Medical Devices Directive*) - Council Directive 90/385/EEC for active implantable medical devices

CAPA - *Corrective and preventive actions*

MDD (M*edical Devices Directive*) – Council Directive 93/42/EEC on medical devices

IVDD (*In Vitro Diagnostic Directive)* – Council Directive 98/79/EC on *in vitro* diagnostic medical devices

PMS (*Post Marketing Surveillance*) – a system of monitoring the properties of the product by the manufacturer (e.g. safety, quality, efficacy, intended purpose of use, reactions to the new product, feed-back from customers, adverse incidents) in post-marketing stages, pursuant to the procedure established by the manufacturer.

Government Regulations:

- No. 336/2004 Coll., on technical requirements governing medical technology;
- No. 154/2004 Coll., on technical requirements governing active implantable medical devices;
- No. 26/2004 Coll., amending Government Regulation No. 181/2001 Coll., on technical requirements governing medical devices, as amended by Government Regulation No. 336/2001 Coll. (changed classification of breast implants);
- No. 286/2001 Coll., on technical requirements governing *in vitro* diagnostic medical devices.

1. THE MECHANISMS OF THE VIGILANCE SYSTEM AND PMS SYSTEM IN THE EUROPEAN UNION

In the European Union, the mechanisms which guarantee that the manufacturers are informed about the product properties, allowing to adopt the relevant action, are represented by the vigilance system and the PMS system. Information on these system is provided in various parts of the Active Implantable Medical Devices Directive (90/385/EEC), Directive on medical devices (93/42/EEC), and Directive on *in vitro* diagnostic medical devices (98/79/ES). These European directives are available from the following web site: http://europa.eu.int/comm/enterprise/medical_devices/index.htm.

1.1 Vigilance system

This system describes the method of reporting and evaluation of adverse incidents known in the EU as the *"Medical Devices Vigilance System"*. The purpose of this system is to improve the protection of health and safety of the patients, users, and third parties by reducing the likelihood of reoccurrence of the same type of an adverse incident at various sites and various times. Hierarchically, it is possible to classify the mechanisms of this system by the level of documentation and requirements contained in the below listed documents as follows:

1.1.1 The European active implantable medical devices directive - 90/385/EEC (hereinafter referred to as "AIMD"), the European medical devices directive – 93/42/EEC (hereinafter referred to as "MDD"), and the European *in vitro* diagnostic medical devices directive – 98/79/ES (hereinafter referred to as "IVDD")

"...may be placed on the market and put into service only if they do not compromise the safety and health of patients, users and, where applicable, other persons…"

Reference to Article 2 (AIMD), (MDD), and (IVDD)

The guarantee of the manufacturer to establish and update the PMS system. The obligation must include the manufacturer's duty to report adverse incidents to the competent authority immediately upon learning thereof…
References in Annexes II, IV, and V (AIMD) and IV (IVDD)
Definition of adverse incident provided in Article 8 (AIMD)

The guarantee of the manufacturer to establish and update a systematic procedure of evaluation of experience obtained in the post-marketing stage and using adequate instruments to take necessary corrective action. This guarantee must include the manufacturer's liability to report adverse incidents to the competent authority immediately upon its occurrence …
References in Annexes II, IV, V, VI, VII, (MMD)
Definition of adverse incident provided in Article 10 (MDD) and in Article 11 (IVDD)

All adverse incidents listed under Article 10 shall be recorded completely and reported to the competent authority.
Reference in Annex X (MDD)

1.1.2 Quality system
The standard ISO 13485:2003 stipulates the requirements governing the quality management system which may be applied to the design, development, manufacturing, and servicing of medical devices. This standard is based upon standard ISO 9001, it is independent and does not contain some requirements which are specific for other management systems (such as finance management, safety-at-work management and occupational health protection management).
The manufacturer must plan and implement the manufacturing and provision of services (Article 7.5), an important chapter is that on the product traceability (Art.7.5.3.2) and chapter 8 - measuring, analysis, and improvements.

1.1.3 Medical devices vigilance system (published by the European Commission, III as MEDDEV 3/93 –rev- 2, May 1993)
The guideline describes requirements governing the vigilance system, explains how to use it, and provides examples of various types of adverse incidents and the time scale of reporting.
The purpose of the established procedures of the vigilance system may be described simplistically as follows:

- to ensure that information about all incidents are forthwith transferred to a central site; to analyse the significance/relevance in respect of notification criteria (to be reported/not to be reported/by whom/serious injury/death/suspected incident);
- to identify and report in time incidents falling within these criteria;
- to inform about an incident;
- to conduct initial assessment/report;
- to propose/implement action (grade I);
- to conduct full investigation;
- to propose/implement action (grade II);
- to draft final report;
- to archive and close the case.

1.2 PMS System
1.2.1 European Directives 93/42/EEC (MDD), 90/385/EEC (AIMD), and 98/79/EC (IVDD)
The procedures for conformity assessment stipulated by these directives require the manufacturer's guarantee to establish and update a post-marketing surveillance system. References in Annexes II, IV, V (AIMD) and IV (IVDD).

The guarantee of the manufacturer to establish and update a systematic procedure of evaluation of experience with the devices obtained in the post-marketing stage and using adequate instruments to take necessary corrective action.
References is Annexes II, IV, V, VI, VII, X (MMD)

1.2.2 Information from feed-back may be for example:

- marketing reports;
- reports from the authorised representative;
- customer complaints
- customer reports;
- additional information about a new/modified product;
- reports from regulatory authorities;
- published literature.

1.2.3 Summary of both systems (vigilance and PMS)
Both systems have to be adopted as an important part within the manufacturer/agent/distribution chain and documented. It is necessary to keep complex records and to use them as an input for management review, to include distribution and marketing activities in the system, incl. the inclusion of the clinical department of the manufacturer in this system.

Furthermore it is necessary to confirm that a system built in this manner will be unequivocal and transparent both on the outside and inside and that it will be justifiable.

A recommended scheme to establish the procedures and follow-up actions for the above mentioned activities and areas:

a)
- to create and maintain an up-to-date and effective database of sold medical devices with the identification of the target user;
- to assign a person responsible for these activities and to ensure its training;
- to establish documented procedures and records (archival) associated with these procedures;
- to establish procedures for immediate triggering of corrective action, such as the issuance of informative alarms, adverse incident reports, and the recall of medical devices from the market/service;
- to review all complaints, reports, initiatives pursuant to pre-established procedures;
- to look for any system weaknesses in procedures as well as in the quality system, if applicable, in order to ensure continuous improvement;
- to analyse trends;
- to document the outcomes, archive them in an adequate manner and in association with the technical life (expiry) of the medical device;
- to use the outcomes and records as inputs for the management review of the system;
- the procedures of the manufacturer and its authorised representative or importer/distributor should be harmonised in terms of effectiveness of the implemented procedures and records of these activities, incl. the distribution chain;

b) specification of other requirements (with the exception of the activities listed above under item a) as per the given medical device, e.g.:
- electromedicine - to assess service reports as inputs for your system, incl. reports from distributors/agents, and guarantee damages;
- implants - to maintain a database of sold medical devices/implanted medical devices traced back to patients (with respect to the protection of personal data which has to be ensured when collecting information and creating databases, incl. the responsibility for the database);
- new medical devices/usage/materials - to continue with further conduct of clinical investigations of medical devices.

2. REPORTING MECHANISMS AND INVESTIGATION OF ADVERSE INCIDENTS IN THE CZECH REPUBLIC

Pursuant to Act No 22/1997 Coll., as amended, the following government regulations on medical devices have been adopted in the Czech Republic: no. 336/2004 Coll., no. 154/2004 Coll., no. 26/2004 Coll., and no. 453/2004 Coll.

The duty to notify, register, and investigate adverse incidents and to prevent the occurrence of adverse events is stipulated by Articles 32 – 35 of Act No 123/2000 Coll., on medical devices and on amendments to some related acts, as amended (full text of Act No 123/2000 Coll. is provided in the Collection of Acts under no. 346/2003 Coll.). Please note the definition of the authorised representative as stipulated by Article 3 , letter (l) of the above cited Act:
"the authorised representative is a person established in a Member State of the European Communities and authorized by the manufacturer in writing to act on his behalf with respect to manufacturer's obligations stipulated by this Act and special legal regulations".

The Decree on adverse incidents of medical devices no. 501/2000 Coll., as amended by Decree no. 304/2004, stipulates the forms, methods of notification of adverse incidents of medical devices, their registration, investigation and evaluation, documentation and its archival, and follow-up intended to prevent the occurrence of adverse incidents, particularly their reoccurrence. The Annexes to this Decree are: *Form I* for the initial reporting of an adverse incident (medical devices) and *Form II* for the final reporting of an adverse incident which is a follow-up of the initial report form (medical devices). These forms are available from the SÚKL home page at www.sukl.cz under the section ***Medical Devices.***

In order to provide a navigation within this area, the relevant definitions as stipulated by Act No 123/2000 Coll. are provided below:

An adverse incident is

1. any failure or deterioration in the properties or effectiveness of a medical device, or any inaccuracy in labelling of a medical device or in its instructions for use, which can or could lead to the death of the user or another individual or to a serious deterioration in their health condition,
2. any technical or medical fact related to the properties or effectiveness of a medical device which leads to a systematic recall of medical devices of the same type from the market due to reasons specified in point 1.

Side effects are undesirable concomitant effects identified during or after the medical device has been used in accordance with its intended purpose of use.

Interaction is any undesirable effect that medical devices have on each other or that a medical device has on other objects or a medical device and medication when used in accordance with its intended purpose of use.

The obligations of persons involved in the adverse incident reporting pursuant to Article 32 of Act No 123/2000 Coll. are as follows:

1. Manufacturers, importers, providers, authorized bodies, accredited persons or persons carrying out the servicing are obliged to report to SÚKL in writing all adverse incidents they have identified or have been informed about;
2. In case of risk due to delay, employees of the persons listed in paragraph 1 are also authorized to report to SÚKL any adverse event related to the death of an individual if they identify it or are informed about it and the statutory body of the persons listed in paragraph 1 cannot be reached.

The periods governing notification to SÚKL have been established pursuant to the Decree on adverse incidents of medical devices no. 501/2000 Coll., on the forms, methods of notification of adverse incidents of medical devices as follows:

- completed Form I must be sent no later than within:
  a) 24 hours of occurrence or learning of the adverse incident if it is associated with a death of an individual;
  b) 3 days in all other cases;
- the scope and content of the notification must be consistent with the availability of necessary information for the entity who is reporting the adverse incident.

Recommended scheme for adverse incident reporting

In the event of a decision to report an adverse incident which is associated with a medical device it is recommended to apply the following scheme as the most straightforward method. Report either:

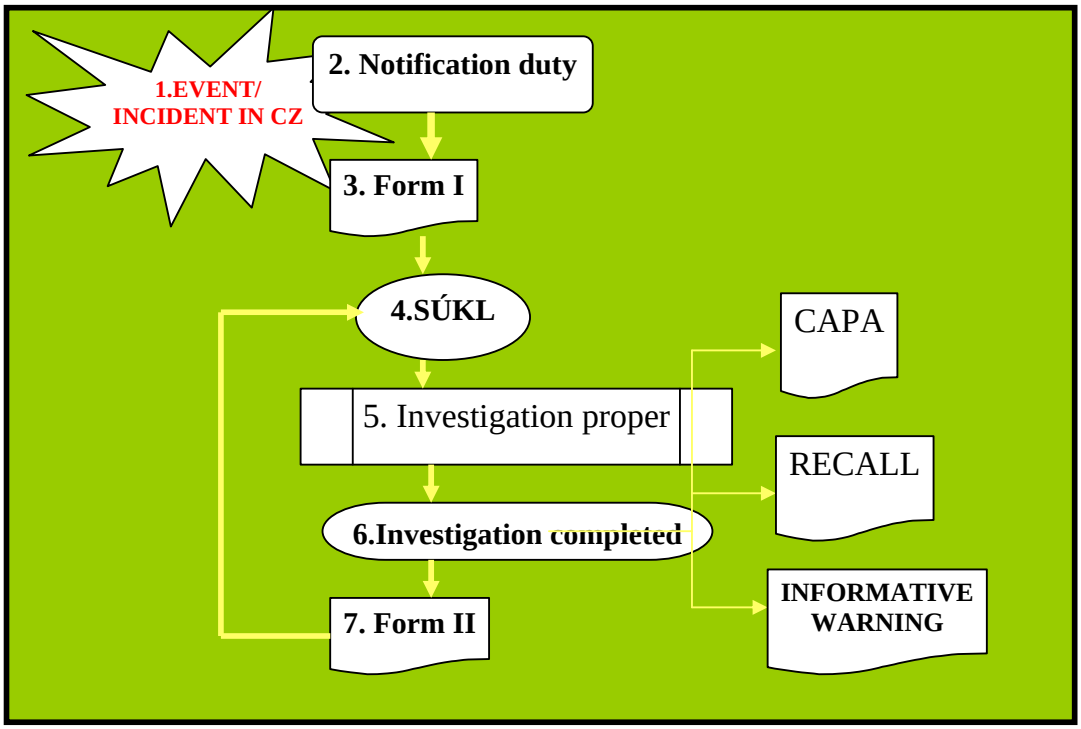
1. to SÚKL who forthwith contacts the manufacturer, distributor; or
2. to the manufacturer, distributor, who shall report the incident to SÚKL and the investigation by both entities shall continue.

After May 1, 2004, various alternatives for the adverse incident notification for medical devices may apply, as illustrated by Cases 1 to 5.

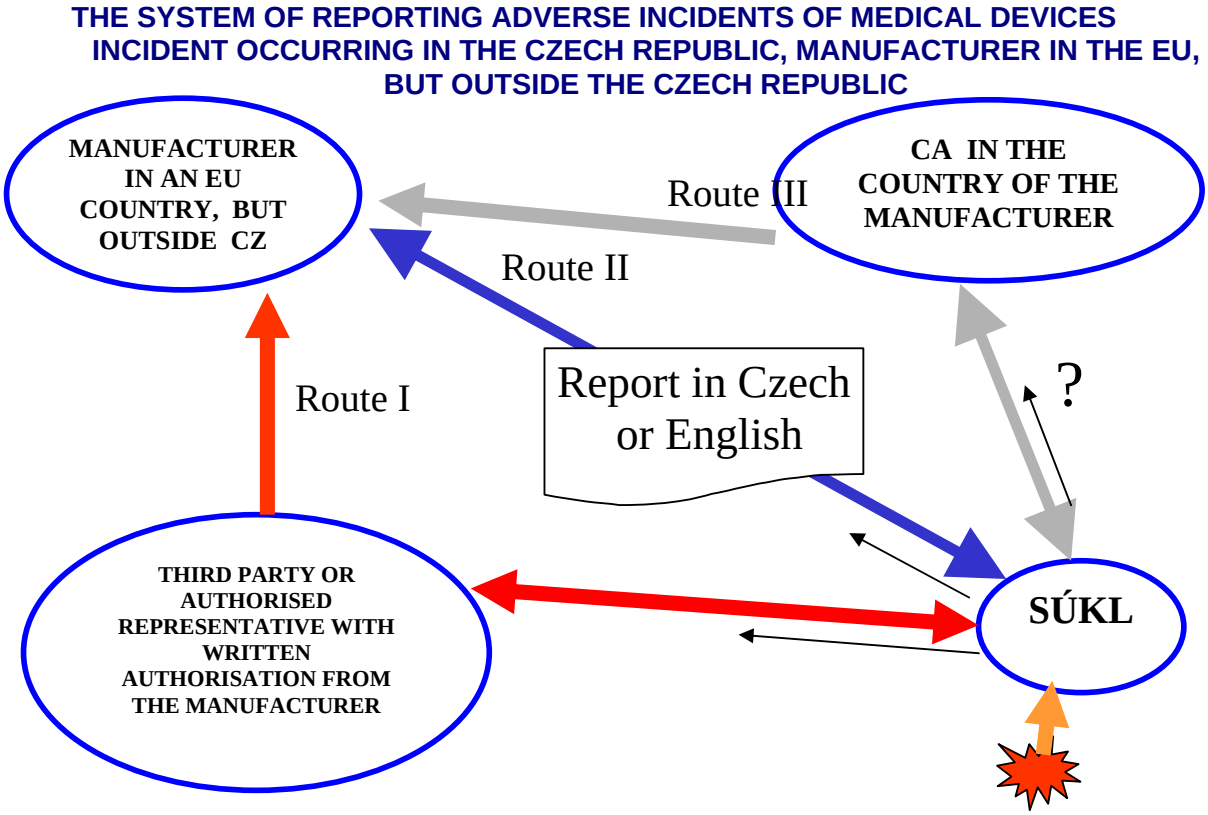
Please note: additional information is available from the web site of the Ministry of Health of the Czech Republic: www.mzcr.cz/kat/67

Case no. 1.:

Incident occurring in the Czech Republic

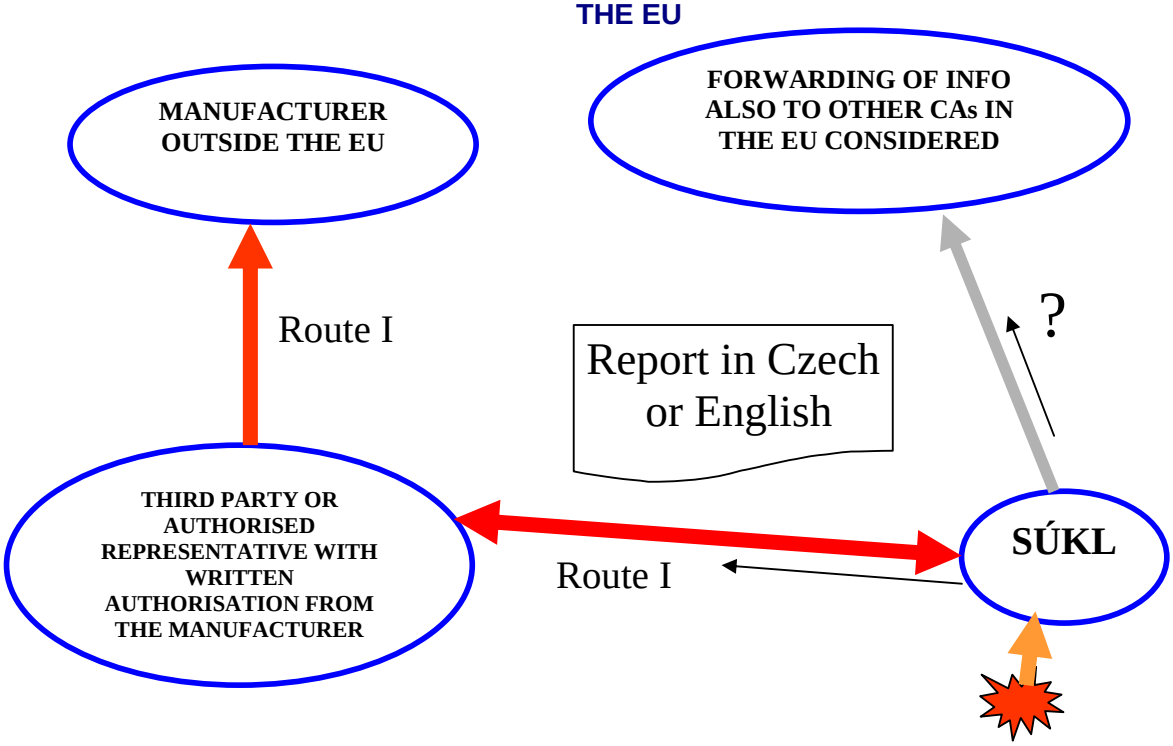


Case no. 2:



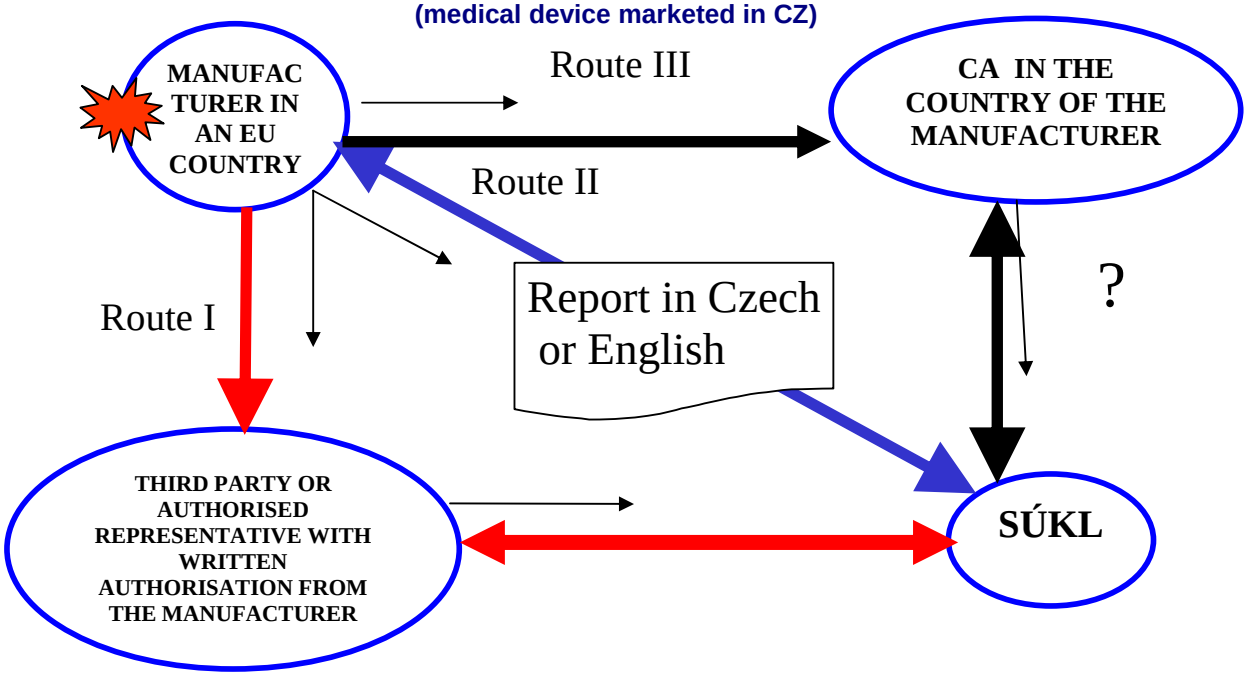
Case no. 3

THE SYSTEM OF REPORTING ADVERSE INCIDENTS OF MEDICAL DEVICES
INCIDENT OCCURRING IN THE CZECH REPUBLIC, MANUFACTURER OUTSIDE THE EU



Case no..4

THE SYSTEM OF REPORTING ADVERSE INCIDENTS OF MEDICAL DEVICES
INCIDENT OCCURRING OUTSIDE THE CZECH REPUBLIC, MANUFACTURER IN THE EU, BUT OUTSIDE THE CZECH REPUBLIC
(medical device marketed in CZ)



Case no. 5

THE SYSTEM OF REPORTING ADVERSE INCIDENTS OF MEDICAL DEVICES
INCIDENT OCCURRING OUTSIDE THE CZECH REPUBLIC, MANUFACTURER OUTSIDE THE EU(medical device marketed in CZ)