



Swiss Medtech - Regulatory Aspects


Shayesteh Fürst-Ladani
CEO, SFL Group

Investment Summit 2017
16 May 2017



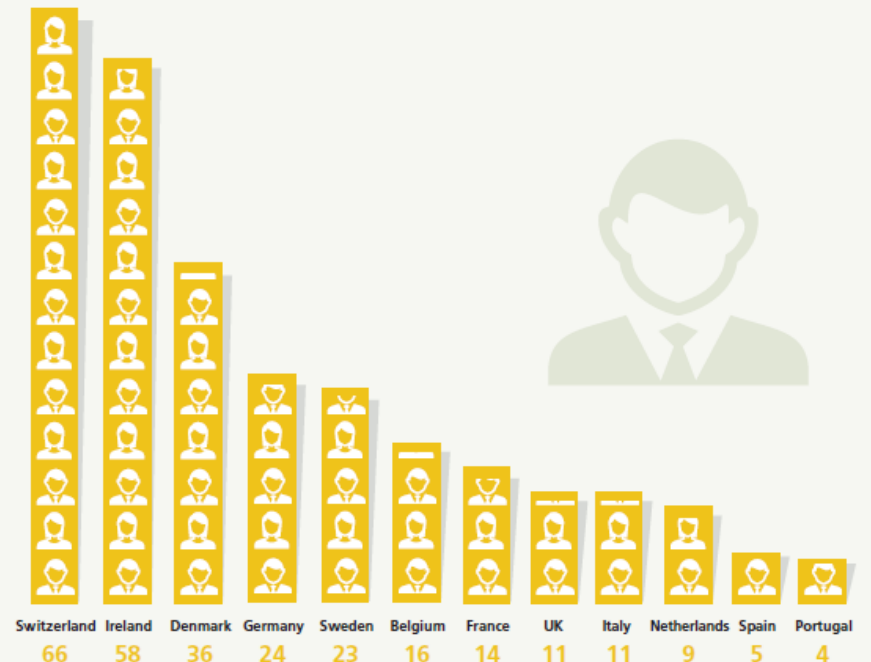
Swiss Medtech

Swiss Medtech*

- 1350 companies
- 14.1 CHF Billion turnover
- 54'500 employees
- Up to 30% of turnover spent on R&D
- Strong collaboration with universities
- Support from CTI
- Highly qualified professionals
- Swiss labor law
- Taxation
- Swissness
- Same regulatory framework as EU due to mutual recognition agreement
 - **Devices manufactured and CE-marked in Switzerland can be marketed in EU without need for further regulatory activities & approval** 










*Swiss Medtech Report 2016

NUMBER OF PEOPLE EMPLOYED IN THE MEDICAL TECHNOLOGY INDUSTRY PER 10,000 INHABITANTS (REF. 8)



**Europe Medtech Report 2016

What is a Combination Product? Device or Drug?

Medtech			
Pharma			
Combination products Device or Drug?			

Are Devices and Drugs Very Different?

Device Definition (Dir 93/42/EC)

Any instrument, apparatus, appliance, software, material or other article, whether used alone or in combination, including the software intended by its manufacturer to be used specifically for diagnostic and/or therapeutic purposes and necessary for its proper application, intended by the manufacturer to be used for human beings for the purpose of

Diagnosis, prevention, monitoring, treatment, alleviation of disease

and **which does not achieve its principal intended action in or on the human body by pharmacological, immunological or metabolic means** but which may be assisted in its function by such means

- ***Must have a medical purpose***
- ***Must be for use on humans***

Drug Definition (2001/83/EC)

Any substance or combination of substances presented as having properties for **treating or preventing disease** in human beings; or

Any substance or combination of substances which may be used in or administered to human beings either with a view to **restoring, correcting or modifying physiological functions by exerting a pharmacological, immunological or metabolic action, or to making a medical diagnosis**

- ***Must have a medical purpose***
- ***It can be used on humans as well as animals***

Classification

Device & IVD

Device: risk-based categorization

1. Class I (lowest risk)
2. Class II a and IIb
3. Class III (highest risk)

IVD: list-based categorization

- List A
- List B
- IVDs for self-testing
- General IVDs

Safety & Performance & Risk-Benefit

Drug

Risk based approach

- to some extent: novel or off-patent
- considerations to allow early access to innovative drugs

Quality & Efficacy & Safety & Benefit-Risk

Who Decides the Product is Safe and Can be Marketed?

Device*

- Manufacturer and depending on risk Notified Body (Private organization)
- CE-Mark: Switzerland = EU (Mutual Recognition Agreement)



Drug

- Health authority or EU Commission (Government organization)
- Approval Switzerland ≠ EU (**no** Mutual Recognition Agreement)



* New Approach Directive, ultimate responsibility with manufacturer



PERFECT

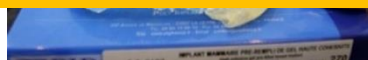


Drivers for Change to EU MD Law

- The European legislation is over 20 years old: The number of Member States in the EU has more than doubled
- Substantial technical and healthcare developments
 - Home healthcare,
 - eHealth and mHealth,
 - Companion diagnostics,
 - Device/drug combinations etc.

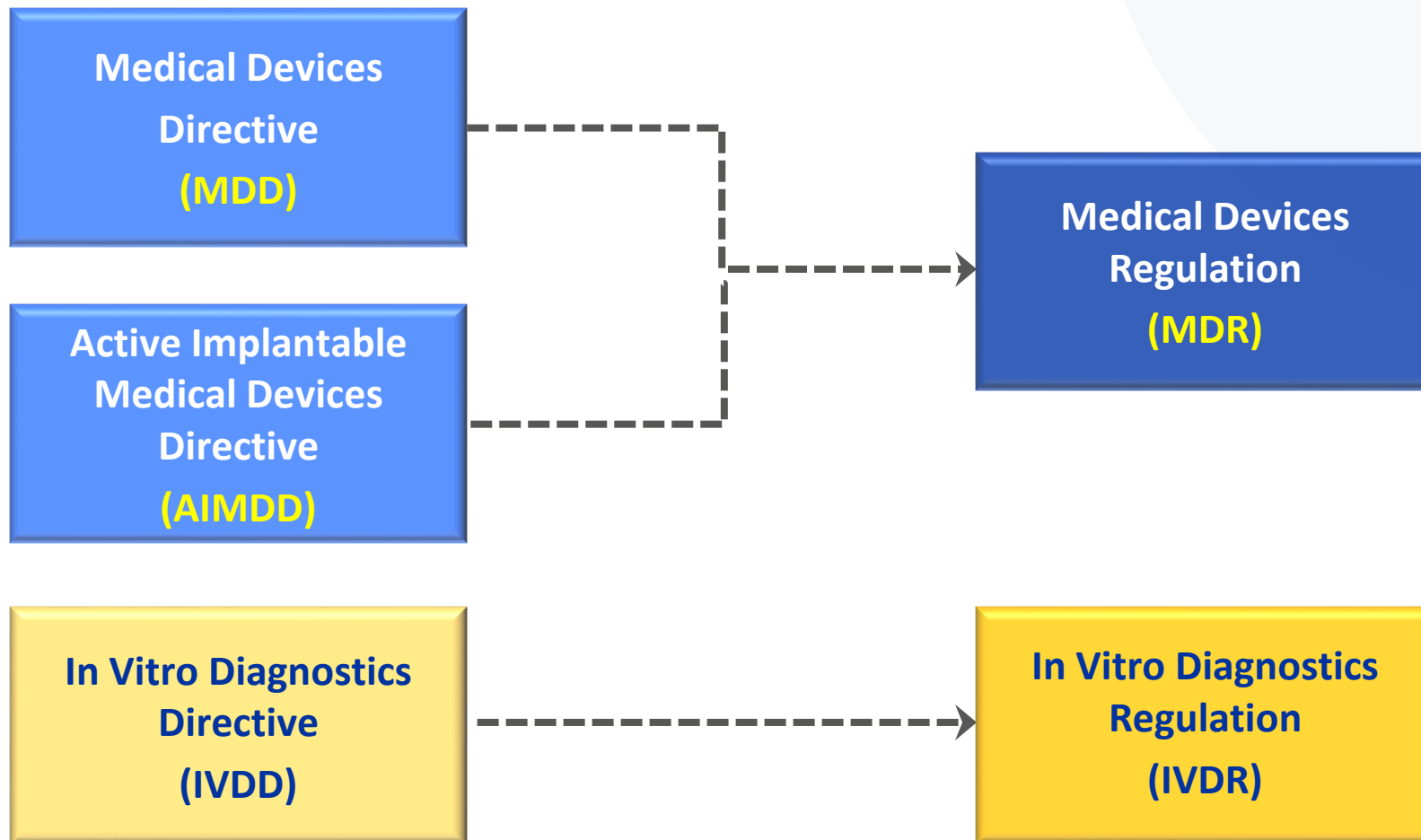


Trust → Control





Upcoming Changes in EU Medtech Law



Key Changes of the MDR

Main points



Updated scope

- Added devices with no intended medical purpose (e.g. aesthetic devices) . Substance-based devices
- Added non-viable human tissue products . Devices intended to administer a medicinal product (under certain conditions)

No pre-market approval

- Manufacturer continues to have the final responsibility

New expert bodies

- Medical Device Coordination Group (MDCG)
- Expert panels and laboratories

Notified bodies

- Strengthened role in assessing manufacturers
- Conduct unannounced audits
- Stronger supervision by authorities

Clinical evidence

- Reinforced rules for clinical evidence for medical devices

Scrutiny mechanism

- Scrutiny mechanism for high risk devices
- Notified bodies to consult MDCG
 - Expert panels may also be involved

Qualified person

- Qualified person responsible for ensuring regulatory compliance

Increased transparency

- Registration of clinical investigations Eudamed
- Summary of safety & performance for class III and implantable devices published

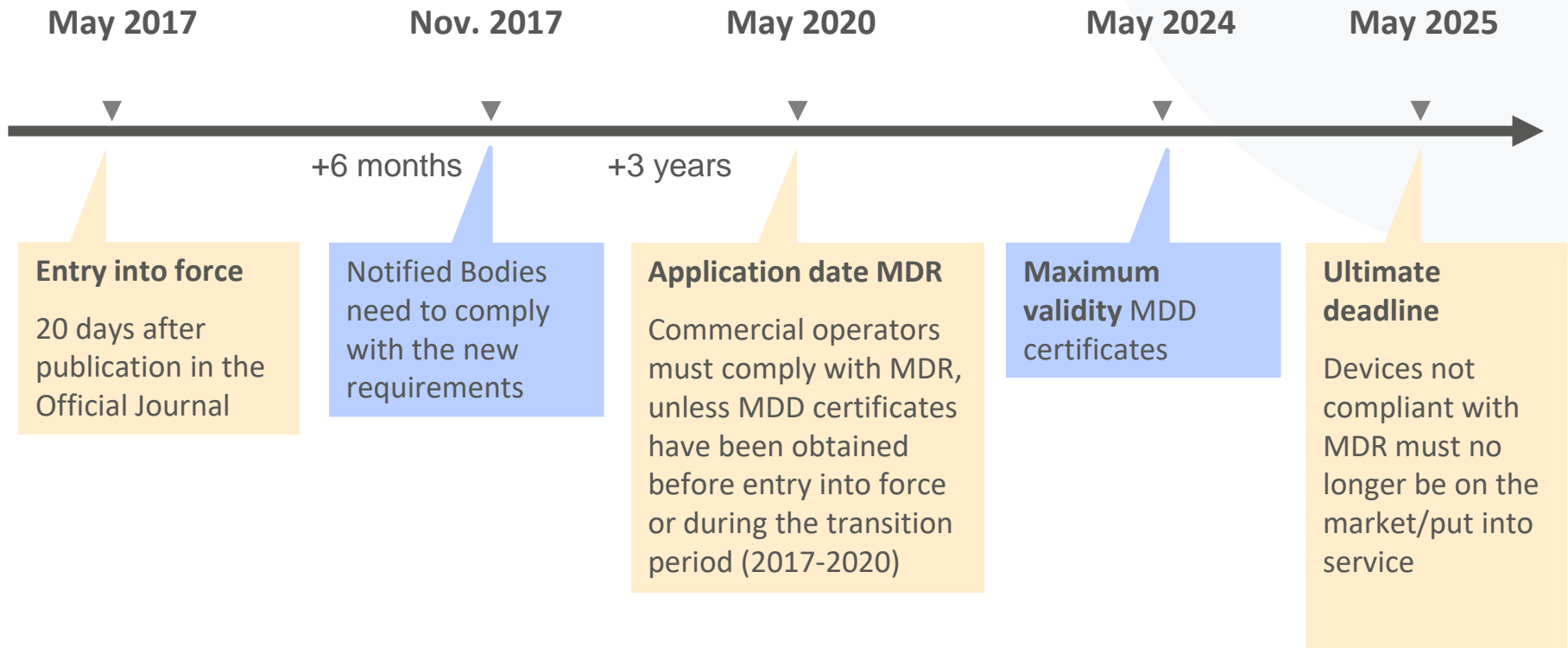
Better traceability

- Unique device identification (UDI) system to
- Enhance post-market safety
 - Reduce medical errors & counterfeiting

Vigilance and market surveillance

- PSUR for Class IIa, IIb and III
- Manufacturers report serious incidents and corrective actions to Eudamed

MDR: Key Timelines



Introduction to EU IVD law

IVDR: the new classification scheme

IVDD: 'list based' (in order of increasing risk)

- General IVDs
- IVDs for self-testing
- Annex II List B
- Annex II List A

IVDR: 'risk-based'

Class	Risk level		Examples
A	Patient – Low	Public – Low	Clinical chemistry analyser
B	Patient – Moderate	Public – Low	Urine test strips
C	Patient – High	Public – Moderate	Companion diagnostics
D	Patient – High	Public – High	HIV testing

Key Changes of the IVDR

Main points



Updated scope

- Applies to all IVDs and their accessories
- Riaks based classification: Class A, B, C and D
- New definitions and rules for: companion diagnostics (CDx), in-house tests, kits, single use IVDs, distance sales

No pre-market approval

- Manufacturer continues to have the final responsibility

New expert bodies

- Medical Device Coordination Group (MDCG)
- Expert panels and laboratory
- EMA & National Competent Authorities

Notified bodies

- Strengthened role in assessing manufacturers
- Conduct unannounced audits
- Stronger supervision by authorities

Clinical evidence

- Clarification of performance indicators
- Clinical evidence throughout the lifecycle
- Performance Evaluation Report (PER)

Scrutiny mechanism

- Involvement of EMA & National Competent Authority for CDx
- Expert Panel involved for Class D IVDs

Qualified person

- Qualified person responsible for ensuring regulatory compliance

Increased transparency

- Registration of clinical performance studies in Eudamed
- Public transparency of data from clinical performance studies, and of class C & D

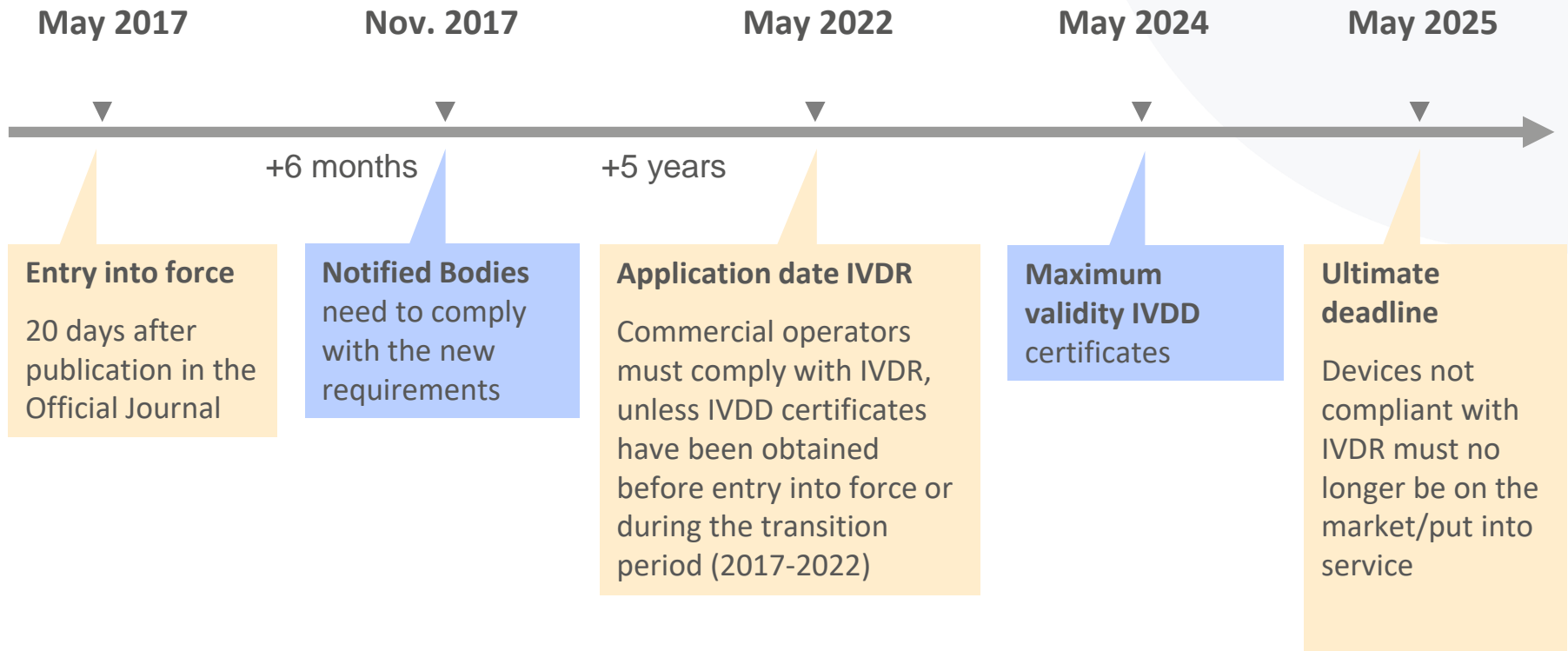
Better traceability

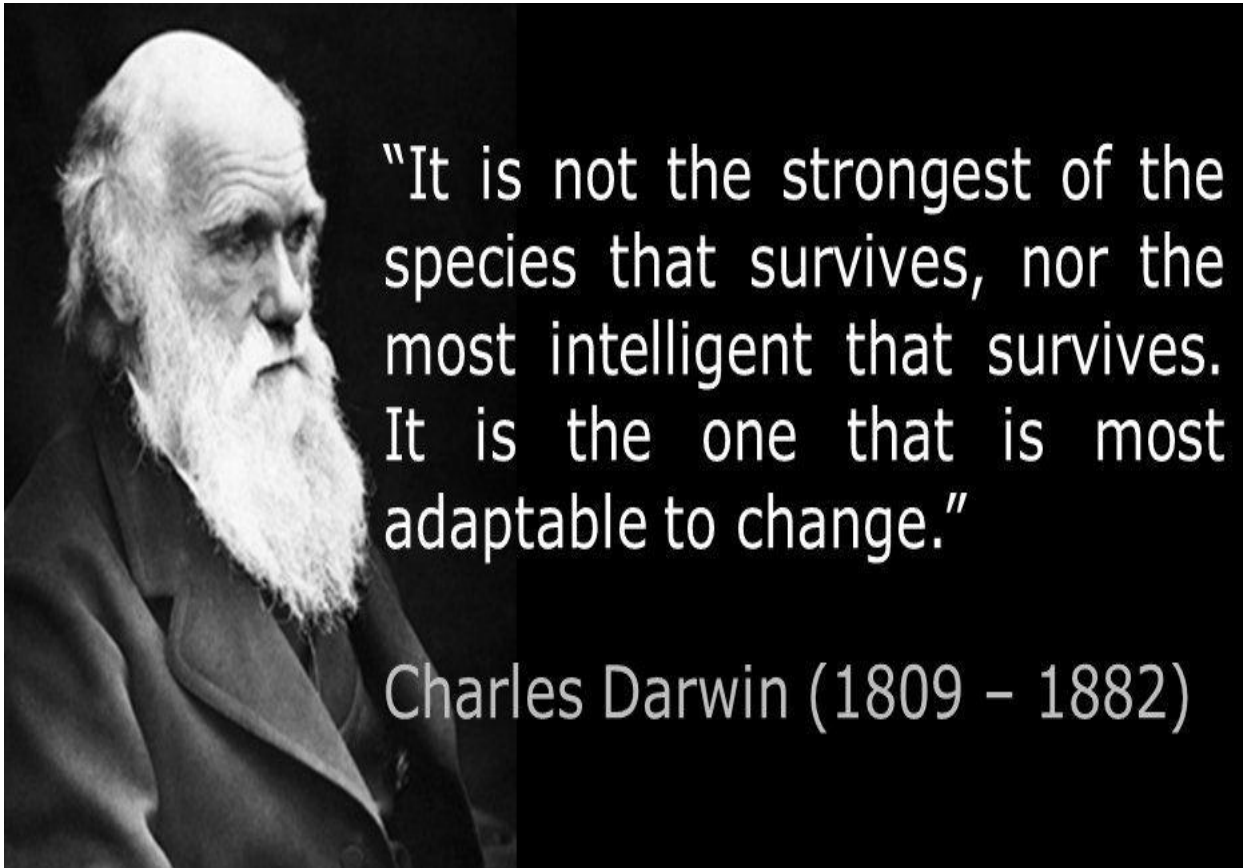
- Unique device identification (UDI) system to
- Enhance post-market safety
- Reduce medical errors & counterfeiting

Vigilance and market surveillance

- PSUR for Class C and D
- Manufacturers report serious incidents and corrective actions to Eudamed

IVDR: Key Timelines





"It is not the strongest of the species that survives, nor the most intelligent that survives. It is the one that is most adaptable to change."

Charles Darwin (1809 – 1882)





One Consultancy

Integrated

1



Team Experience

Tailored



Pharma & Medtech Solutions

- Regulatory Affairs & Quality Assurance
- Medical Affairs & Pharmacovigilance
- Public Affairs & Reimbursement
- Legal Advice & Compliance



sfl-services.com

Thank You!

Head Office: SFL Regulatory Affairs & Scientific Communication GmbH, Margarethenstrasse 47
4053 Basel, Switzerland

Basel +41 61 361 944 3

London +44 20 751 095 60

Brussels +32 24 016 188

office@sfl-services.com