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14 **Preface**

15 The document herein was produced by the International Medical Device Regulators Forum
16 (IMDRF), a voluntary group of medical device regulators from around the world.

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19 incorporation of this document, in part or in whole, into any other document, or its translation
20 into languages other than English, does not convey or represent an endorsement of any kind by
21 the International Medical Device Regulators Forum.

22 **Introduction**

23 **What is clinical investigation?**

24

25 A clinical investigation is defined as “any systematic investigation or study in or on one or more
26 human subjects, undertaken to assess the safety, clinical performance, and/or effectiveness of a
27 medical device”. (ISO 14155:2011)

28

29 The undertaking of a clinical investigation is a scientific process that represents one method of
30 generating clinical data.

31

32

33 **What is the objective of a clinical investigation?**

34

35 The objective of a clinical investigation is to assess the safety, clinical performance and/or
36 effectiveness of a medical device for a particular indication or intended use.

37

38

39 **How is a clinical investigation conducted?**

40

41 ISO 14155: 2011 *Clinical Investigation of Medical Devices for Human Subjects — Good clinical*
42 *practice*-details the requirements for the conduct of clinical investigations. Clinical investigations
43 must take into account scientific principles underlying the collection of clinical data along with
44 accepted ethical standards surrounding the use of human subjects.

45

46 This document supersedes an earlier version produced under the Global Harmonization Task
47 Force (GHTF) with the same title in May, 2007 (GHTF/SG5/N3:2010).

48

49 **Scope**

50 The primary purpose of this document is to provide guidance in relation to:

51

- 52 • when a clinical investigation should be undertaken for a medical device to demonstrate
53 compliance with the relevant Essential Principles (see IMDRF/GRRP WG/N47 FINAL:2018
54 “*Essential Principles of Safety and Performance of Medical Devices and IVD Medical*
55 *Devices*”); and
- 56 • the general principles of clinical investigation involving medical devices.

57

58 Given the wide diversity of medical devices and their associated risks, this document is not
59 intended to provide comprehensive guidance for clinical investigations of specific medical
60 devices.

61

62 The guidance contained within this document is intended to apply to medical devices generally
63 and combination products regulated as medical devices. It is not intended to cover *in vitro*
64 diagnostic medical devices. Additionally, this document was drafted primarily to address the

65 use of Clinical Investigations to support a marketing authorization application. Some aspects of
66 this document may apply to studies conducted following commercial release of a device.
67 Future GHTF documents will specifically address post-market clinical follow-up studies.
68
69

70 **References**

71 **IMDRF/GHTF final documents**

72
73 *GHTF SG1/N011:2008 Summary Technical Documentation for Demonstrating Conformity to*
74 *the Essential Principles of Safety and Performance of Medical Devices (STED)*
75

76 *GHTF SG1/N029:2005 Information Document Concerning the Definition of the Term “Medical*
77 *Device”*
78

79 *IMDRF GRRP WG/N47 FINAL: 2018 Essential Principles of Safety and Performance of*
80 *Medical Devices and IVD Medical Device*
81

82 *GHTF SG1/ N78:2012 Principles of Conformity Assessment for Medical Devices*
83

84 *GHTF SG1/N43:2005 Labelling for Medical Devices*
85

86 *IMDRF MDCE WG (PD1)/Nx Clinical Evidence – Key definitions and Concepts*
87

88 *IMDRF MDCE WG (PD1)/Nx Clinical Evaluation*
89
90

91 **International standards**

92
93 *ISO 14155 2011 Clinical investigation of medical devices for human subjects — Good clinical*
94 *practice*
95

96 *ISO 14971: 2007 Medical devices -Application of risk management to medical devices*
97
98

99 **Other References**

100
101 *World Medical Association – Declaration of Helsinki - Ethical principles for medical research*
102 *involving human subjects*
103

104 **Definitions**

105 **Clinical Data:** Safety, clinical performance, and/or effectiveness information that is generated
106 from the clinical use of a medical device.
107

- 108 **Clinical Evaluation:** A set of ongoing activities that use scientifically sound methods for the
109 assessment and analysis of clinical data to verify the safety, clinical
110 performance, and/or effectiveness of the device when used as intended by the
111 manufacturer.
112
- 113 **Clinical Evidence:** The clinical data and the clinical evaluation report pertaining to a medical
114 device.
115
- 116 **Clinical Investigation:** Any systematic investigation or study in or on one or more human
117 subjects, undertaken to assess the safety, clinical performance, and/or
118 effectiveness of a medical device.
119
- 120 **Clinical Investigation Plan:** Document that states the rationale, objectives, design and pre-
121 specified analysis, methodology, monitoring, conduct and record-keeping of
122 the clinical investigation.
123
- 124 **Clinical Performance:** The ability of a medical device to achieve its intended purpose as
125 claimed by the manufacturer.
126
- 127 **Effectiveness:** The ability of a medical device to achieve clinical outcome(s) in its intended
128 use as claimed by the manufacturer.
129
- 130 **Safety:** Acceptable risks as weighed against benefits, when using the device according to the
131 manufacturer's Instructions for Use.
132
- 133 **Conformity Assessment:** The systematic examination of evidence generated and procedures
134 undertaken by the manufacturer, under requirements established by the
135 Regulatory Authority, to determine that a medical device is safe and performs
136 as intended by the manufacturer and, therefore, conforms to the *Essential*
137 *Principles of Safety and Performance for Medical Devices and IVD Medical*
138 *Device* (IMDRF GRRP WG/N47 FINAL:2018) .
139
- 140 **Endpoint:** An indicator used for providing the evidence for safety, clinical performance, and/or
141 effectiveness in a clinical investigation (ISO 14155:2011, modified).
142
- 143 **Multi-Regional Clinical Investigation:** A clinical investigation conducted in more than one
144 region under a single protocol.
145
- 146 **Region:** A geographical region, country or regulatory region.
147
- 148 **Regulatory Region:** A region comprised of countries for which a common set of regulatory
149 requirements applies for medical device approval (e.g., EU).
150
- 151 **Residual Risk:** Risk remaining after risk control measures have been taken (ISO 14971:2007).
152

153 **Risk Management:** Systematic application of management policies, procedures and practices
154 to the tasks of analysing, evaluating, controlling and monitoring risk (ISO
155 14971).
156

157 **General Principles When Considering the Need for a Clinical Investigation**

158 159 **When should a clinical investigation be undertaken?**

160
161 Clinical investigations are necessary to provide data not available through other sources (such as
162 literature or preclinical testing) required to demonstrate compliance with the relevant Essential
163 Principles (including safety, clinical performance and acceptability of benefit/risk associated
164 with its use). When a clinical investigation is conducted, the data obtained is used in the
165 clinical evaluation process and is part of the clinical evidence for the device (see IMDRF/MDCE
166 WG(PD1)/Nx– “*Clinical Evaluation*”).
167

168 When considering the need for a clinical investigation, one should consider whether there are
169 new questions of safety, clinical performance and/or effectiveness for the particular device and
170 intended use that need to be addressed in a clinical investigation. Generally, such questions are
171 more likely to be generated for high risk and/or novel devices.

172 For long established technologies, the clinical investigation data that might be required for novel
173 technologies may not be necessary. The available clinical data in the form of, for example,
174 published literature, reports of clinical experience, post-market reports and adverse event data
175 may, in principle, be adequate to establish the safety, clinical performance, and/or effectiveness
176 of the device, provided that new risks have not been identified, and that the intended
177 use(s)/purpose(s) has/have not changed.

178 179 **What are the key considerations in clarifying the need for clinical investigations?**

- 180
- 181 1. Identifying relevant clinical **Essential Principles** (for example, specifics of safety,
182 clinical performance, acceptability of benefit/risk) for the device and its intended
183 use/purpose(s) (see IMDRF/GRRP WG/N47 FINAL:2018-*Essential Principles of Safety
184 and Performance of Medical Devices and IVD Medical Device*);
185
 - 186 2. Performing **risk management** (ISO 14971:2007) activities such as a risk analysis will
187 help in identifying the clinical data necessary to address residual risks and aspects of
188 clinical performance not completely resolved by available information (e.g. design
189 solutions, preclinical and material/technical evaluation, conformity with relevant
190 standards, labelling).
191

192 Risk control measures include inherent safety by design, protective measures in the
193 medical device itself or in the manufacturing process, and information for safety. The
194 decision to use a medical device in the context of a clinical procedure requires the
195 residual risk to be balanced against the anticipated benefits of the procedure. A clinical

196 investigation may be required to further elucidate the benefit/risk in a defined patient
197 population;

198
199 3. Conducting a proper **clinical evaluation** will demonstrate which clinical data are
200 necessary, and can be adequately contributed to by sources such as literature searching,
201 prior clinical investigations (including clinical data generated in other jurisdictions),
202 clinical experience, or clinical data available from comparable devices, and which clinical
203 data should be generated from clinical investigation(s) when data are unavailable or
204 insufficient to demonstrate conformity to the Essential Principles. Available clinical data
205 from comparable devices should be carefully examined for comparability and adequacy
206 (see IMDRF/MDCE WG (PD1)/Nx *Clinical Evaluation*).

207
208 Key considerations for clarifying the need for clinical investigations are illustrated by the
209 flowchart in Figure 1.

210
211 Where uncertainty exists as to whether current data are sufficient to demonstrate conformity with
212 the Essential Principles, discussion with the relevant regulatory authorities or conformity
213 assessment bodies may be appropriate.

214
215 Note: This exercise is applicable for the introduction of a new device as well as for planned
216 changes of a device, its intended use and/or claims.

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219 **6 General Principles of Clinical Investigation Design**

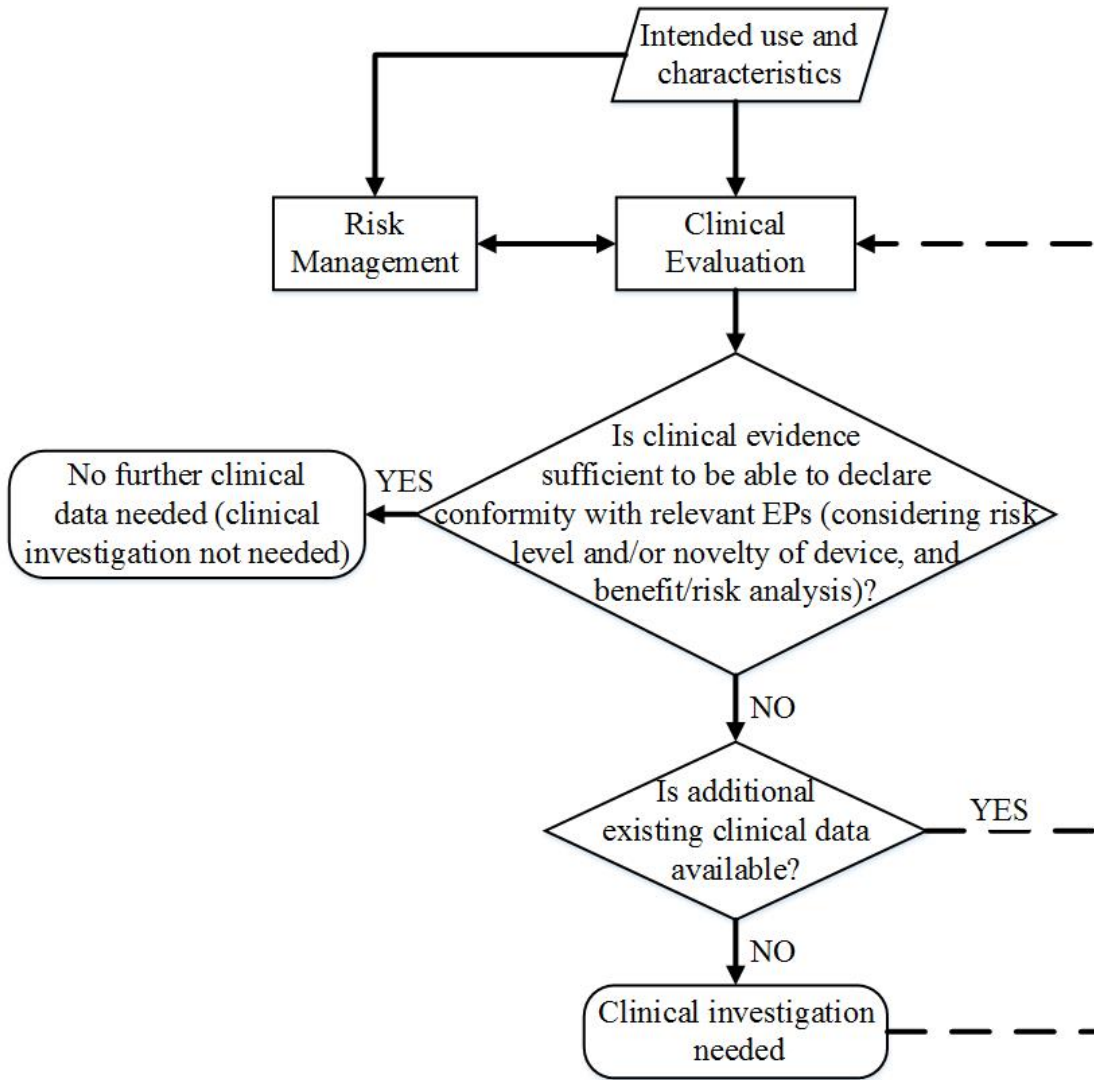
220
221 Any clinical investigation must:

- 222
- 223 • be based on the results of the clinical evaluation process;
 - 224 • follow a proper risk management procedure to avoid undue risks;
 - 225 • be compliant with all relevant legal and regulatory requirements;
 - 226 • be appropriately planned, conducted, analysed and reported;
 - 227 • follow appropriate ethical principles (see Section 7).

228 The design of the clinical investigation, including the study objectives and statistical
229 considerations, should provide the clinical data necessary to address the residual risks, including

230 aspects of clinical performance. Some factors that may influence the extent of data
231 requirements include, but are not limited to, the following:

- 232
- 233 • type of device and/or regulatory classification;
 - 234 • novel technology/relevant previous experience;
 - 234 • clinical application/indications;



EPs = Essential Principles of safety and performance of medical devices;

* - Conformance to performance standards may be sufficient to demonstrate compliance to relevant Essential Principles.

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236
237

Figure 1 Key considerations for clarifying the need for clinical investigations

238
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- nature of exposure to the product, e.g.: surface contact, implantation, ingestion;
- risks inherent in the use of the product, e.g.: risk associated with the procedure;
- performance claims made in the device labeling (including instructions for use) and/or promotional materials;
- component materials or substances;
- disease process (including severity) and patient population being treated;
- demographic, geographic and cultural considerations (e.g.: age, ethnicity, gender, etc.);
- potential impact of device failure;
- period of exposure to the device;
- expected lifetime of the device;
- availability of alternative treatments and current standard of care; and

- 249
- ethical considerations.

250 *Considerations for Device Study Protocols*

251 Factors needing consideration in study protocols include:

- 252
- clear statement of objectives
 - 253 • primary and secondary endpoints, or composite endpoints if applicable
 - 254 • appropriate subject population(s)
 - 255 • minimization of bias (e.g., randomization, blinding/masking, concealment of allocation)
 - 256 • identification of confounding factors (e.g., concurrent medications, co-morbidities)
 - 257 • choice of appropriate controls (e.g., active control, sham, historical), where necessary
 - 258 • design configuration (e.g., parallel, crossover, cohort study, single arm)
 - 259 • type of comparison (e.g., superiority, non-inferiority, equivalence)
 - 260 • follow-up duration and monitoring, where necessary

261 In designing the study, statistical considerations should be prospectively specified and be based
 262 on sound scientific principles and methodology. Care must be taken in developing a statistical
 263 plan that includes consideration of, for example, the following:

- 264
- clinically relevant endpoints
 - 265 • analysis population (e.g. intention-to-treat, per-protocol)
 - 266 • statistical significance levels, power
 - 267 • sample size calculation and justification
 - 268 • analysis methodology (including sensitivity analyses)
 - 269 • accounting for learning curve or run-in issues
 - 270 • the provision for an interim analysis, where applicable
 - 271 • management of potential confounding factors (e.g. adjustment, stratification or stratified
 - 272 randomization)
 - 273 • describe procedures for multiplicity control and adjustment of error probabilities, if
 - 274 applicable
 - 275 • the specification of subgroups for analysis, if applicable
 - 276 • the handling of missing, unused or spurious data, including drop-outs
 - 277 • procedures for reporting any deviation(s) from the original statistical analysis plan

278 The design should ensure that the statistical evaluation derived from the investigation reflects a
 279 meaningful, clinically significant outcome.

280 Multi-regional clinical investigation designs may be considered to facilitate more efficient
 281 medical device development, thus providing earlier access to new medical devices worldwide.
 282 For multi-regional clinical investigation designs, the potential differences between two or more
 283 regions that might affect study results should be carefully considered.

284 Discussion with the relevant regulatory authorities or conformity assessment bodies may be
 285 appropriate when there is uncertainty as to whether the proposed clinical investigational plan is
 286 sufficient.

287

288 ***Conduct of Clinical Investigations***

289 A properly conducted clinical investigation, including compliance to the clinical investigation
290 plan and local laws and regulations, ensures the protection of human subjects, the integrity of the
291 data and that the data obtained is acceptable for the purpose of demonstrating conformity to the
292 Essential Principles. ISO 14155 outlines good clinical practice for clinical investigations of
293 medical devices.

294

295 ***Final Study Report***

296 The outcome of a clinical investigation should be documented in a final study report. This then
297 forms part of the clinical data that is included in the clinical evaluation process and ultimately
298 becomes integrated into the clinical evaluation report (see IMDRF/MDCE WG(PD1)/Nx
299 *Clinical Evaluation*) for the purposes of conformity assessment.

300

301

302

303 **7 Ethical Considerations for Clinical Investigations**

304

305 As a general principle, “the rights, safety and wellbeing of clinical investigation subjects
306 shall be protected consistent with the ethical principles laid down in the Declaration of
307 Helsinki” and the applicable regulatory requirements or other relevant standards (ISO
308 14155:2011).

309

310 It is ethically important in deciding to conduct a clinical investigation that it should generate
311 new data and answer specific safety, clinical performance, and/or effectiveness questions that
312 remain unanswered by the current body of knowledge. The desire to protect human
313 subjects from unnecessary or inappropriate experimentation must be balanced with the need
314 to protect public health through the use of clinical investigations where they are indicated.
315 In all cases, however, care must be taken to ensure that the necessary data are obtained
316 through a scientific and ethical investigational process that does not expose subjects to
317 undue risks or discomfort. The rights, safety and well-being of subjects are paramount, and
318 appropriate trial design and conduct is essential to generate meaningful data.