



FDA's Regulation of Glaucoma Devices

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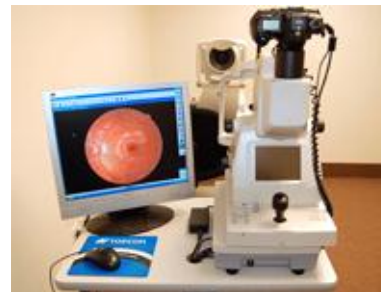
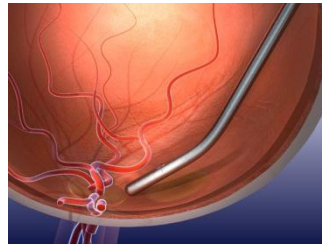
Center for Devices and Radiological Health

Food and Drug Administration

It is a Medical Device if it:

- **Diagnoses, Cures, Mitigates, Treats or Prevents a Disease or Condition**
- **Affects the Function or Structure of the Body**
- **Does Not Achieve Intended Use Through Chemical Action**
- **Is Not Metabolized**

The Diversity of Medical Devices



Risk-Based Paradigm

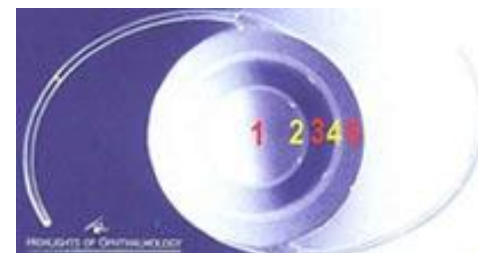
The law gives us the flexibility to calibrate our regulatory approach to the level of potential risk posed by new products



Tonometers
510(k)



**Corneal Implants in
Keratoconus**
HDE



Intraocular Lenses
PMA

Device Classifications

- **CLASS I**
 - » Simple design, low risk
 - » Most exempt from premarket submission
- **CLASS II**
 - » More complex, higher risk
 - » Premarket Notification [510(k)]
- **CLASS III**
 - » Most complex, highest risk
 - » Premarket Application [PMA]

www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/Overview/ClassifyYourDevice/default.htm

Class I: General Controls

- Establishment registration with the FDA
- Medical device listing with the FDA
- Quality systems regulation
- Labeling requirements
- Medical device reporting (MDR)
- Most Class I devices now exempt from Premarket notification [510(k)]



Class II: General Controls plus Special Controls

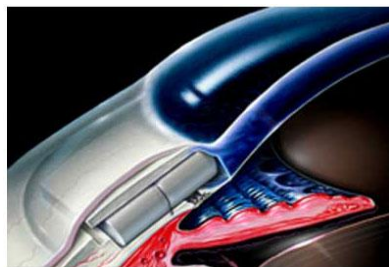
- **General controls are insufficient to provide reasonable assurance of device's safety and effectiveness**
- **Special Controls may include:**
 - » **Performance standards (e.g., ANSI, ASA, ISO, ASTM)**
 - » **FDA guidance documents**
 - » **Device tracking**
 - » **Patient registry**
- **Most require Premarket Notification [510(k)] to show substantial equivalence to a legally marketed "predicate" device**



Class II: General Controls plus Premarket Approval

- Typically reserved for devices that:
 - » Support/sustain human life, or
 - » Have substantial importance in preventing health impairment, or
 - » Potential unreasonable risk of illness or injury

- Requires Premarket Approval (PMA): reasonable assurance of safety and effectiveness



Required Regulatory Submissions

- **Not exempt Class I or Class II -» 510 (k)**
(91% of Class 1 are exempt)
- **Class III -» PMA**

510(k)

- **Section 510(k) of F.D. & C. Act**
- **Marketing clearance application**
- **Allows FDA to Determine Substantial Equivalence (SE) to a legally marketed device (predicate device) that is not subject to Premarket Approval (PMA)**

510(k) – Substantial Equivalence

A device is Substantially Equivalent (SE) if...

- In comparison to a legally marketed device (predicate), it
 - » Has the same intended use, and
 - » Has the same technological characteristics as the predicate device,

OR...

510(k) - Substantial Equivalence

- Has the same intended use, and
- Has different technological characteristics and the information in the 510(k):
 - » Does not raise new types of questions of safety and effectiveness, and
 - » Performance data demonstrates that it is as safe and effective as the predicate

Premarket Approval (PMA)

- An application requesting approval to market
- Class III Devices are subject to Premarket Approval
- Application needs to contain sufficient valid scientific evidence to provide reasonable assurance that the device is safe and effective for its intended use

Safety and Effectiveness Determination

- **Considerations**
 - » **Intended population**
 - » **Conditions of use for the device**
 - » **Probable benefit to health vs. probable injury or illness from use**
 - » **Reliability of the device**

- **Based only on Valid Scientific Evidence**

Glaucoma Devices

- **Diagnostic Tools – typically require 510(k)**
- **Therapeutic – can require 510(k) or PMA**

Glaucoma Devices: Diagnostic Tools

- **Tonometers**
- **Fundus cameras**
- **Devices for functional tests**
 - » **Standard Automated Perimetry (SAP)**
 - » **Short-Wavelength Automated Perimetry (SWAP)**
 - » **Frequency Doubling Technology (FDT)**
- **Devices for structural tests**
 - » **SLO polarimetry (GDx)**
 - » **CSLO Topography (HRT)**
 - » **Optical Coherence Tomography (OCT)**

Therapeutic Glaucoma Devices¹

- Lasers (Nd:YAG, Argon, etc.) - 510(k)
- Implantable Glaucoma Devices – 510(k) or PMA
 - » Refractory Population*
 - » Non-Refractory Population*

*as defined in ANSI Z80.27

¹ no surgical tools (e.g., Trabectome) have been cleared for the treatment of glaucoma

Implantable Therapeutic Devices – Refractory Population

- **Devices indicated for subjects who have failed medical treatments and filtering surgery and for subjects who are likely to fail filtering surgery**
- **All cleared glaucoma shunts have indications for IOP reduction**
- **All were cleared via 510(k) process**
 - » **demonstration of substantial equivalence to a predicate (legally marketed shunt)**

Implantable Therapeutic Devices – Non-Refractory Population

- **Two devices currently approved:**
 - » **Staar Aquaflo Collagen Glaucoma Drainage Device**
 - » **Glaukos iStent**

- **Many devices under investigation**
 - » **All require Premarket Approval Application (PMA)**
– demonstration of reasonable safety and effectiveness for proposed indications for use

Obtaining FDA Input Early in the Development

Pre-Submission Program

- Facilitates device development / innovation by providing informal FDA feedback on proposed:
 - » Preclinical testing
 - » Clinical trial design (e.g., endpoints, inclusion/exclusion criteria, statistical analysis plan)
- Review goal: 75 days
- Provides an opportunity for a meeting with the FDA

<http://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/GuidanceDocuments/ucm310375.htm>



Thank you