IMPERIAL

MedTechONE Knowledge Base



What kind of work is needed during testing & experimentation?

- 1 Proof of concept
- 2 Prototype testing
- 3 In-vivo studies
- 4 Summary of class-based requirements

This document provides a detailed insight into Proof of Concept, Prototype Testing, and In-Vivo Studies in the context of pre-clinical trials for medical devices. Each of these stages is vital to validating the design, functionality, and safety of the device before regulatory submissions and clinical trials

1. Proof of concept

1.1 Objective: To demonstrate the basic feasibility of the device concept and validate that it can achieve its intended function under controlled conditions.

1.2 Step-by-Step Process:

Define Key Functional Objectives:

- Identify the primary functions the device must fulfill. For example, a
 heart valve replacement's primary goal is to control blood flow, while a
 wearable glucose monitor needs to measure glucose levels accurately.
- Establish clear success criteria (e.g., measurement accuracy within 5% of lab standards).

• Develop Initial Mockups or Simple Models:

- Create simple models or mockups using inexpensive materials to simulate the basic form and functionality of the device.
- Use tools like 3D printing for initial mockups, especially if the device requires specific structural components, such as valves or housing units.

• Preliminary Bench Testing:

- Conduct simple bench tests in controlled environments to see if the concept works.
- Examples:
 - Class I devices: Perform basic functionality checks for physical durability (e.g., bandages holding adhesive strength).
 - Class IIa and IIb devices: Test functions under anticipated usage, such as a blood pressure monitor's measurement accuracy.
 - Class III devices: Initial simulation of core functionality under stress to test responses (e.g., a pacemaker responding to induced arrhythmia).

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Iterative Refinement Based on Findings:

- Use results from preliminary testing to refine the design, improving weak areas or resolving any failure points.
- This iterative process helps identify potential risks early, ensuring that essential functions are addressed before moving on to full-scale prototype development.

Importance: Proof of Concept establishes a foundation for further development, allowing developers to validate that their approach can achieve its intended outcomes and meet regulatory standards.

2. Prototype Testing

2.1 Objective: To develop a functional prototype that closely resembles the final device and validate its performance, durability, and safety under simulated conditions

2.2 Step-by-Step Process:

Build Functional Prototypes:

- Construct a functional version of the device using materials and components similar to those intended for final production.
- Class I devices: Simple prototypes to confirm shape, size, and essential functionality (e.g., ensuring adhesive strength for wound dressings).
- Class IIa and IIb devices: Functional prototypes that include essential components and structural integrity (e.g., for a syringe or diagnostic tool).
- Class III devices: Highly detailed prototypes that replicate the full form and function of the final device, including electronics, software, or implantable materials.

Simulated Use Testing:

- Simulate real-world conditions to test the prototype's performance.
- Techniques:
 - Mechanical Stress Testing: For wearable or implantable devices, evaluate performance under repeated stress (e.g., flexing, bending).

 Environmental Testing: Expose devices to various temperatures, humidity levels, and pressures to ensure resilience in different clinical and environmental conditions.

Human Factors and Usability Testing:

- Evaluate how intended users (e.g., clinicians, patients) interact with the device. Gather feedback on ease of use, user errors, and ergonomic factors.
- Techniques:
 - **Usability Studies**: Conduct with both healthcare professionals and patients to observe device handling, positioning, and usability, particularly for Class IIb and Class III devices.
 - Risk Analysis: Identify potential risks arising from user error, especially critical for Class III devices that are life-sustaining or life-supporting.

Iterative Redesign and Optimization:

- Based on feedback from testing, improve design elements to enhance reliability, durability, and user interaction.
- Prototype testing typically involves multiple iterations, particularly for Class IIb and Class III devices, where functional integrity is paramount.
- **Importance**: Prototype testing transitions the device from concept to a near-final form, refining the design, addressing usability issues, and confirming that the device meets essential performance criteria.

3. In-vivo studies

3.1 Objective: To evaluate the device's safety, compatibility, and functionality within a living biological system. In-vivo studies are particularly important for implantable and high-risk devices.

3.2 Step-by-Step Process:

- Model Selection and Study Preparation:
 - Select an animal model that closely simulates human anatomy and physiology relevant to the device. For example, larger mammals (like pigs or sheep) are common models for heart valves, while rodents may be used for drug-delivery devices.
 - Class I and IIa devices: Rarely require in-vivo studies unless they interact with internal biological systems.
 - Class IIb devices: May require in-vivo studies for devices that contact blood or tissue, such as infusion pumps.
 - Class III devices: Require extensive in-vivo testing to evaluate tissue compatibility, functional stability, and biological responses over time.

Surgical Procedures for Implantable Devices (Primarily Class III):

- For implantable devices, conduct surgical implantation under anesthesia, following aseptic techniques.
- Techniques:
 - Surgical Placement: Place the device in its intended location to observe immediate functionality and interaction with tissue.
 - Post-Operative Monitoring: Check for infection, tissue inflammation, and other adverse responses during recovery.

• Functional and Safety Monitoring:

- Conduct regular monitoring of device function, position, and biological response over weeks or months.
- Techniques:
 - Imaging Techniques: Use imaging (e.g., X-ray, MRI) to monitor the device's positioning, wear, and interaction with surrounding tissues.

Blood and Biochemical Analysis: Test for any systemic reactions, toxicity, or unintended physiological effects (e.g., inflammatory response) due to the device.

End-Point Analysis and Histopathology:

- Upon study completion, euthanize the animals (where necessary) to examine tissues closely for signs of inflammation, immune reaction, or device degradation.
- Techniques:
 - Histopathological Examination: Examine tissue samples around the device site for cellular changes, fibrosis, or chronic inflammation.
 - Systemic Toxicity Analysis: For devices that release substances, analyze organ tissues and blood to identify any toxic effects.

Importance: In-vivo studies offer a critical insight into how the device interacts within a living system, revealing potential biological issues, long-term stability, and tissue compatibility for Class III and select Class IIb devices.

4. Summary of class-based requirements

Class I Devices:

- Typically require proof of concept and basic prototype testing only.
 - In-vivo studies are rare unless there is tissue interaction beyond skin contact.

Class IIa Devices:

- Require proof of concept, functional prototype testing, and limited human factors assessment.
- In-vivo studies are generally unnecessary unless the device contacts sensitive tissues or requires extended interaction.

Class IIb Devices:

- Require comprehensive prototype testing under simulated use conditions, including some environmental and stress testing.
- Select in-vivo studies may be necessary for devices that interact closely with internal tissues or blood.

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• Class III Devices:

- Require a complete cycle of proof of concept, advanced prototype testing, and usability testing in simulated clinical settings.
- Extensive in-vivo studies to assess tissue compatibility, long-term stability, and biological interaction, especially for implants and lifesustaining devices.

This structured approach to proof of concept, prototype testing, and in-vivo studies ensures that medical devices meet rigorous safety, performance, and regulatory standards at each step. These processes help build confidence in a device's readiness for clinical trials and eventual market entry.