Standardization of medical devices nomenclature

5th March, 2024

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1. Why is nomenclature important?

- 2. Responding to Member States.
- 3. Searching a solution having 2 systems.

Agenda





There are thousands of types of Medical devices... used at all levels of health care.



In vitro diagnostic, laboratory



Medical equipment



Surgical instruments



Single use medical devices



Implantable medical devices



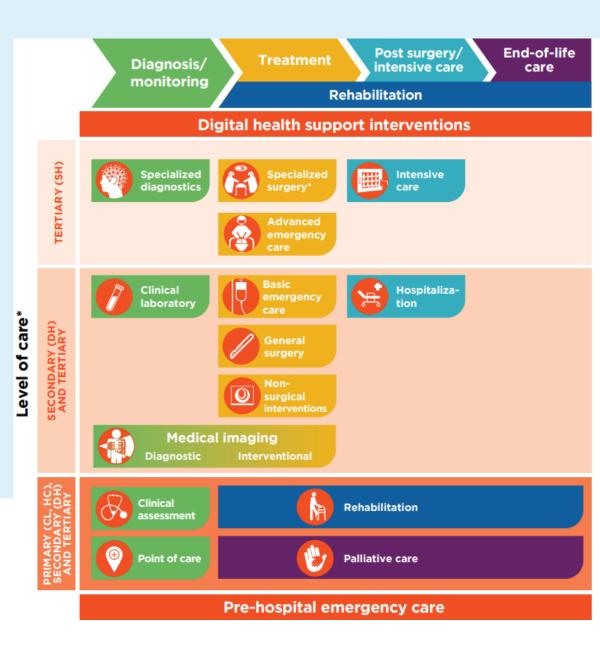
Some assistive devices



Some personal protective equipment

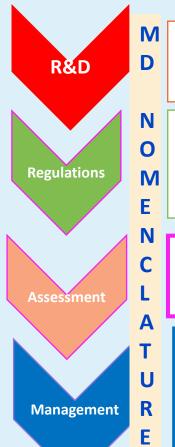


Software as medical device





Harmonized Nomenclature improves access to safe, quality, affordable medical devices, towards increased quality of health care everywhere



- Academia and Industry
- Manufacturing and trade



- National Regulatory Agencies
- Lists of approved MD for marketing in country.





- MOH (HTA): Selection of National Lists of MDs for reimbursement or procurement
- Health care benefit packages, national policies
- (WHO Essential in vitro Diagnostics and Priority Medical Devices)



- Procurement, Installation, training, maintenance, safe use, operating costs
- Post-market surveillance and adverse event report
- Decommissioning, Replacement





Save lives
Increase quality of
life



We have come a long way, uphill, approaching, but still not there... need to ensure everyone has access to naming system for medical devices, to avoid multiple developments

2024 Agreement WHO 2023 with GMDN towards open policy •EB152 access. 2022 •Cross reference Addition of GMDN **EMDN-GMDN** terms, codes and • EB150 Decision 2021 Work with GMDN definitions in WHO EB150(10) upon request of platforms. (2500 •2022 Consultations • EB 148/13 some Member types of devices) 2019 and pilot mapping States during WHA •2021 WHA74 MS info session 5th EMDN-GMDNand EB. •2021 Multiple March 2024. **UMDNS-UNSPSC** •EB 145/3 2018 •2023 WHA76 consultations with •2022 WHA75 •MS requested WHO nomenclature **Decision not** to develop yet WHO principles: agencies MS, NGOs WHA75(25) Med Devices another towards Member States nomenclature but Upon request Of Global Fora update of Global governance, to work with the some MS, use of Atlas of Medical transparent available ones. EMDN codes and •2010 1st GFMD Devices process, access as terms in WHO •2013 2nd GFMD global public good publications and electronic platforms •2017 3rd GFMD

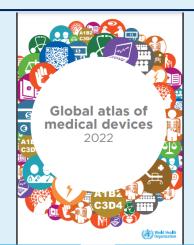


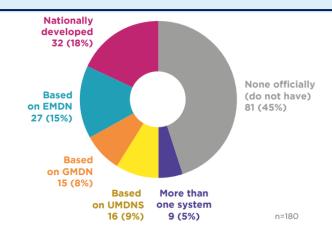
Decision approved 28 May 2022 in WHA 75 on Standardization of medical devices nomenclature: WHA75(25)

- Member States request to the Director General:
- to integrate available information related to medical devices, including terms, codes, and definitions, in the web-based database and clearinghouse established in line with resolution WHA60.29 (2007) and now available as the Medical Devices Information System (MEDEVIS); and to link this to other WHO platforms, such as the International Classification of Diseases, (ICD-11) to serve as a reference to stakeholders and Member States;
- (2) to submit a substantive report on progress made in implementing this decision to the Executive Board at its 152nd session in January 2023, and its 156th session in January 2025



Medical Devices Nomenclature systems most used.





igure 2. Type of an official nomenclature system for medical devices (data from the 2020 Country surve 2021-2022 Nomenclature consultations)

European Medical Devices Nomenclature (EMDN)

- Last update September 2021.
- ongoing public consultation until March 2024.
- Has free access of information for everyone.
- Governed by MDCG.
- Anyone can comment.

Global Medical Devices Nomenclature (GMDN),

- Continuous updates
- About 25,000 codes
- Requires membership and the system and accepts licence.
- Free for some, including governments and public health providers.

Universal Medical Devices Nomenclature System (<u>UMNDS</u>),

- Monthly updates.
- About 43,000 terms
- Requires that user registers in their system and accepts licence.
- Not free
- Mostly used in hospitals for health technology management

The United Nations
Standard Products and
Services Codes (UNSPSC)

- includes medical devices plus other multiple types of products and services.
- Mostly used for procurement.
- UNGM.



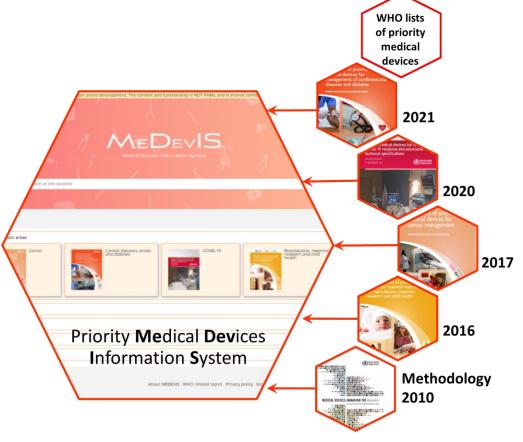


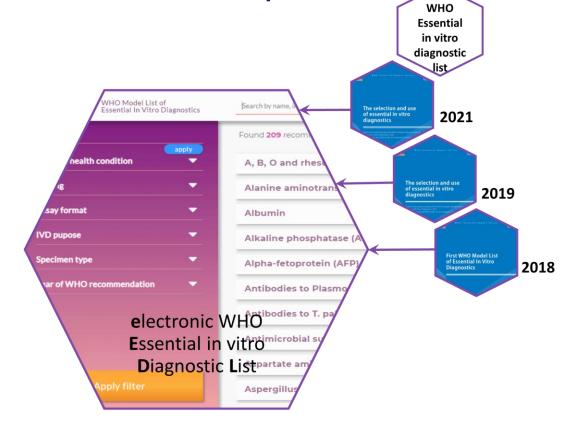




Goal:1. to include naming, codes, definitions in all WHO publications and electronic platforms, for public reference and

2. that all Member States can also use nomenclature widely.





eEDL



MeDevIS

Mapping process and results

- **Goal:** 5,200 EMDN-GMDN pairs
- **Source**: initially: AccessGUDID and EUDAMED
- **Time:** 7 months (finalize September 2023)
- **Method applied**: Automatic matching tools, similarity of term/definitions
- **Final result**: 7,500 pairs (table available to MS only as reference)
- **Challenges:** Multiple:
 - The continuous updating of the GMDN nomenclature code/terms, unless it continues in real time with everyone's collaboration.
 - Unable to perform automated creation of EMDN-GMDN pairs using UDI system as a source.
 - It is possible to establish relationships between nomenclatures, even though the different granularity of the nomenclature, but it would not be one to one.



Collaboration with EMDN 2023.

Meetings
Medical devices
policy officers EC
to:

Agree on the use of the EMDN codes and terms in all WHO publications.

 Shared the outcomes of the mapping exercise and challenges faced. Q3

terms were added to all the WHO Priority Medical Devices and in Medevis,

with the corresponding disclaimer

and link to the EMDN page.

28 September

Presented the status of work on nomenclature to the IMDRF management committee, upon request of the EC as chair.

22 November

WHO presented update to The EC Medical Devices Coordination Group (MDCG-NOM) and agree to future collaboration.

WHO provide input to MDCG NOM, on annual revision



Collaboration with GMDN 2023-24

Meetings to share concerns and define collaboration

- March to December 2023
- Definition of technical and legal aspects
- Scope

Agreement:

• Licence open access, noncommercial, for publicly available information, reached February 2024. WHO adding disclaimer and link to GMDN website.

The scope:

- Terms, codes and definitions of the WHO selected medical devices.
- 1. WHO model list of essential in vitro diagnostics
- 2. WHO Priority Medical Devices lists, other associated subsets.
- 3. WHO would not publish the whole GMDN list

Funding:

• Financial compensation to GMDN for the management of 3,000 initial codes, annual expansion.



License of MeDevIS, using Creative commons non commercial was agreed to host the GMDN codes, terms and definitions.

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Status of nomenclature (terms and codes) of medical devices (22 February) Outcomes of mapping has been shared with the 3 agencies (EMDN, GMDN, UMDNS).

WHO-EMDN

 Codes and terms already used in all WHO MeDevIS data since 2023.

WHO- GMDN

- Inclusion of codes, terms and definitions in WHO MEDEVIS (tests in February 2024)
- Approval for WHO open access, using Creative Commons non commercial licence.

WHO- UMDNS

- In pause.
- ECRI still does not have a publicly available nomenclature system

WHO- UNSPSC

- WHO secretariat will contact in Q3. 2024.
- They are interested.

The way forward, by WHO in 2024

- Organize consultations and monthly webinars*
- With the agreements achieved place codes, terms and definitions in WHO resources and make them publicly available.
- Use the nomenclature systems for any new device added in WHO Lists and publications.
- Continue collaboration with EMDN and GMDN to support MS, co-existing as the measurement system...



Next steps: Proposal to have monthly webinar on nomenclature of medical devices

1. When? First Tuesday of every month at 13:00 CET to be available to all countries.

Webinar, in Teams, open to all participants

3. Who? Member States, NGOs, nomenclature agencies, etc...

4. What? Nomenclature use cases, lessons learned and challenges, examples:

April: WHO tools, EMDN, GMDN

May: Ministries of Health, policies, national lists

June: Regulatory agencies: registration, to post market surveillance

July: Procurement and supply management, NGOs and humanitarian agencies

August: UDI, unique device identifier

September: At facility level: inventories, maintenance, CMMS

October: HS, harmonized code, WCO,

November: Med tech industry

December: creation of communities of practice



Way forward: Nomenclature of medical devices

Use EMDN or GMDN*

*requires registration

Support in-country and regional harmonization

WHO medical devices information to include reference to EMDN and GMDN and organize webinars

Towards standardization of nomenclature to support better health care provision Avoid developments of other nomenclature systems





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Switzerland

medicaldevices@who.int

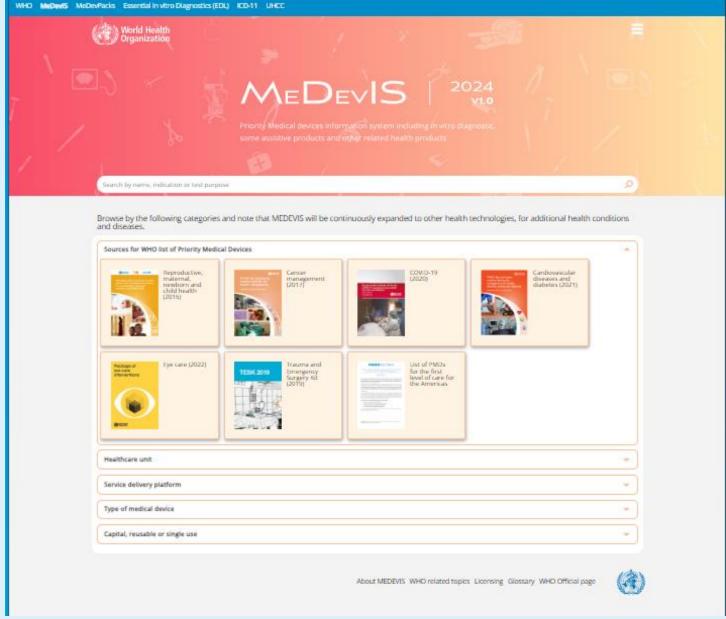
Medical devices website: https://www.who.int/health-topics/medicaldevices#tab=tab_1

Additional complementary slides 5th March 2024



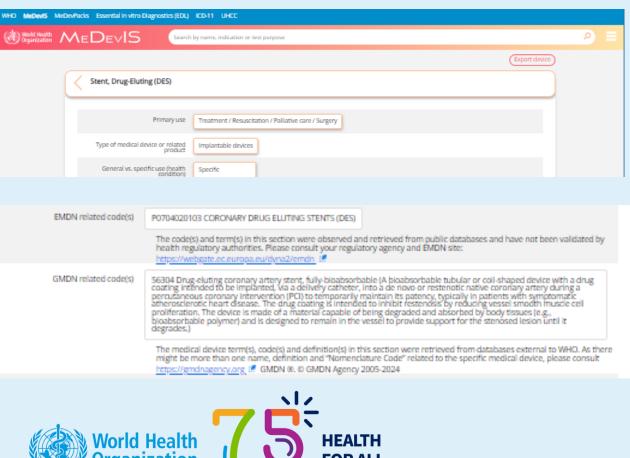
MeDevIS, 2024 v 1.0 is being released today.

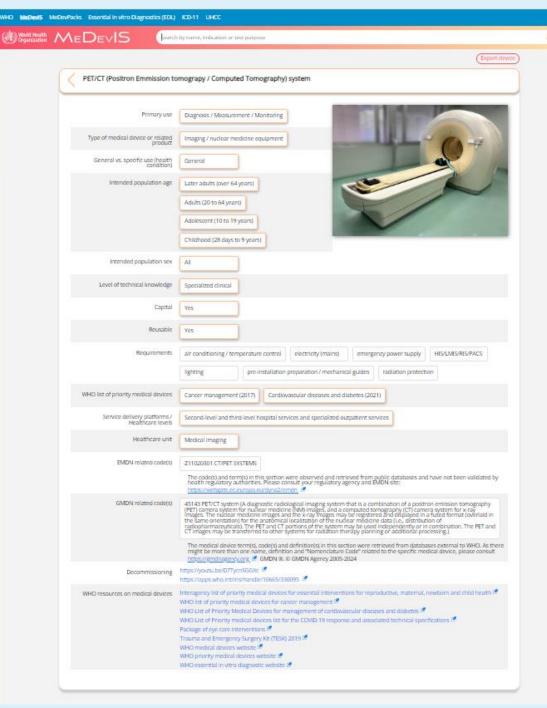
As per decision WHA75(25), "to integrate available information related to medical devices, including terms, codes, and definitions, in the web-based database and clearinghouse..."





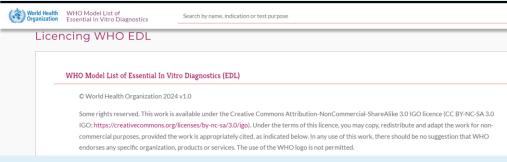
Including EMDN and GMDN codes, terms, disclaimer, link to their website.

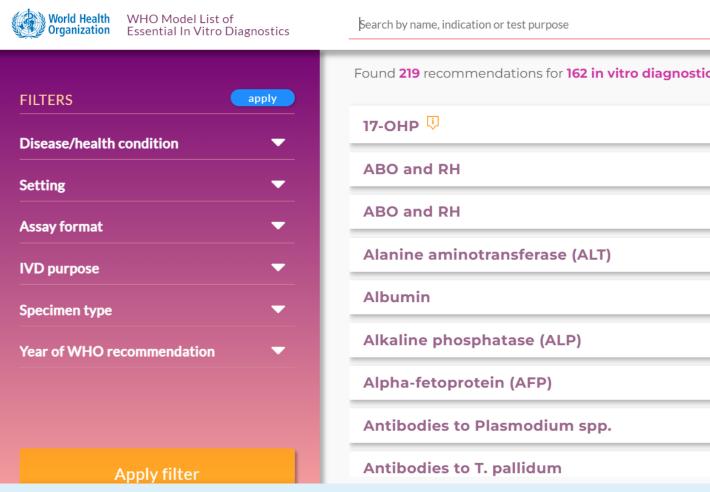




4th WHO model list of Essential in vitro diagnostic (EDL) is included in eEDL 2024, v 1.0









https://www.who.int/publications/i/item/9789240081093 https://edl.who-healthtechnologies.org/

4th Essential in vitro diagnostic list is being classified with EMDN and GMDN codes. Work in progress.

	DIAGNOSTIC TEST	TEST PURPOSE	ASSAY FORMAT	GMDN CT	GMDN CT NAME	GMDN CODE	GMDN TERM NAME	GMDN TERM DEFINITION
Combined HIV antibody/p24 81 antigen (antiHIV/p24 Ag)		To screen blood donations for HIV	Immunoassay	CT284	Human immunodeficiency virus (HIV) IVDs	48445	HIV1/HIV2 antigen/antibody IVD, kit, enzyme immunoassay (EIA)	A collection of reagents and other associated materials intended to be used for a and/or quantitative detection of antigens from and antibodies to human immunode virus 1 and 2 (HIV1/HIV2) in a clinical specimen, using an enzyme immunoassay (EIA) n.
82	2 Haematocrit (Hct)	To diagnose and monitor anaemia. Note: Result time sensitive for emergency and critical care	method (if automated haematology analyser not	CT561	Haematology analyser	56696	Haematocrit analyser IVD	An electrically-powered automated or semi-automated laboratory instrument intended to used to determine the red cell haematocrit or packed red cell volume of a whole blood specimen, using technology which may incorporate centrifugation, photometry or electror
83	3 Haematocrit (Hct)	To diagnose and monitor anaemia. Note: Result time sensitive for emergency and critical care	Haematology analyser (preferred)	CT561	Haematology analyser	56696	Haematocrit analyser IVD	An electrically-powered automated or semi-automated laboratory instrument intended to used to determine the red cell haematocrit or packed red cell volume of a whole blood specimen, using technology which may incorporate centrifugation, photometry or electron
84	4 Haemoglobin (Hb)	To diagnose and monitor anaemia. To monitor the safety of certain drugs (e.g. zidovudine for HIV infection). To screen potential blood donors	Haemoglobinometer	CT1945	Haemoglobin analyser	32435	Haemoglobin analyser IVD, point-of-care	A mains electricity (AC-powered) instrument, which may include internal rechargeable batteries, intended to be used by health professionals at the point-of-care, and often als the laboratory, to determine the concentration of haemoglobin in a clinical specimen, us technology which may include colorimetry, electrometry or photometry.
85	5 Haemoglobin (Hb)	Clinical marker for certain severe infections (e.g. malaria, viral haemorrhagic fevers). To aid in the diagnosis of intravascular haemolysis, renal conditions, rhabdomyolysis (myoglobinuria)	Dipstick	CT880	Hemoglobin IVDs	64807	Urine haemoglobin IVD, kit, rapid colorimetric, ci	and/or (semi-)quantitative screening of urine for haemoglobin within a short period, related to standard laboratory testing procedures, using a rapid colorimetric method. This is a ratest commonly used in the laboratory or in point-of-care analyses. It is not intended to be inited for self-testing.
	6 Haemoglobin (Hb)	To diagnose and monitor anaemia and polycythaemia. To monitor the safety of certain drugs (e.g. zidovudine for HIV infection). To screen potential blood donors. Clinical marker for certain sewere infections (e.g. malaria, viral haemorrhagic fewers). To aid in the diagnosis of intravascular haemolysis, renal conditions, rhabdomyolysis (myoglobinuria). Note: When used for emergency or critical care, results are time-sensitive.	Optical methods, haemoglobinometer, if automated haematology analyser not available	CT880	Hemoglobin IVDs	55872	Total haemoglobin (totHb) IVD, kit, spectrophotometry	A collection of reagents and other associated materials intended to be used for the qual and/or quantitative determination of total haemoglobin (totHb) in a clinical specimen, u spectrophotometry method.
	Haemoglobin A1c (HbA1c)	To diagnose and monitor diabetes mellitus	Handheld and small analysers	CT833	Clinical chemistry substrate/metabolite (non-drug/non- hormone) IVDs	63151	Glycated haemoglobin (HbA1c) IVD, kit, spectrop	A collection of reagents and other associated materials intended to be used for the qual and/or quantitative detection of glycated haemoglobin (HbA1c), also known as glycosylat not haemoglobin, in a clinical specimen, using a spectrophotometry method.
	hin A1c (HbA1c)	To diagnose and monitor diabetes mellitus	Immunoassav	CT883	Clinical chemistry substrate/metabolite (non-drug/non- hormone) IVDs	61010	Glycated haemoglobin (HbA1c) IVD, kit, chemiluminescent immunoassav	A collection of reagents and other associated materials intended to be used for the qual and/or quantitative detection of glycated haemoglobin (HbA1c), also known as glycosylat haemoglobin in a clinical specimen using a chemiluminescent immunoassav method.

Α	В	D	E	F		G		1	J	K
١o.	EDL TEST	SETTING	v. v	Assay format	v	Specimen type 💌	Tag	v	EMDN code	▼ EMDN term
1	A, B, O and rhesus factor (Rh)	No laboratory	To determine A, B and O groups and Rh type	Slide agglutination test		Capillary whole blood, Venous whole blood	EDL-	001	W0103030299	RHESUS TYPING ASSAYS OTHER
2	Alanine aminotransferase (ALT)	Laboratory	To aid in the diagnosis of liver disease as a marker of liver injury.	Optical methods on semi-automated or automated chemistry analysers		Serum, Plasma	EDL-002		W01010103	ALANINE AMINO-TRANSFERASE
3		No laboratory	To detect or monitor kidney disease	Dipstick	ı	Urine	EDL-	003	W01010201	ALBUMIN (CC)
4	Albumin	Laboratory	To aid in the diagnosis and monitoring of diseases affecting protein metabolism (synthesis, loss, intake, absorption) e.g. liver disease, kidney disease, severe malnutrition, malabsorption, burns, etc.)	Optical methods on semi-automated or automated chemistry analysers	4	Serum, Plasma	EDL-4	004	W01010201	ALBUMIN (CC)
			To monitor kidney function	Optical methods on semi-automated or automated chemistry analysers	ı	Urine	EDL-	004	W01010201	ALBUMIN (CC)
1	aline phosphatase (ALP)	Laboratory	To aid in the diagnosis of hepatobiliary and bone disorders	Optical methods on semi-automated or automated chemistry analysers	5	Serum, Plasma	EDL-	005	W01010105	ALKALINE PHOSPHATASE - TOT



MEDEVIS WEBSITE

https://medevis.who-healthtechnologies.org/



Comparison of EMDN and GMDN vs. WHO principles (Feb 24)

	WHO Principles medical devices nomenclature	EMDN	GMDN
•Governance	1.Organizational and review structures should be in place to ensure that all stakeholders from different regions are able to provide feedback according to global needs.		GMDN agency with their advisory groups and members only
	1. a transparent methodology and processes;	Open website	For members only
•Classification,	1. a transparent mechanism for regular updates (e.g. once per year);	open to input from all stakeholders	Continuous update and for members only
coding and nomenclature	1. hierarchies grouped into categories and subcategories to meet stakeholder needs;	Yes	Yes
characteristics	1. medical devices used outside highly regulated countries;	Yes	Yes
Characteristics	1. mutually exclusive terms;	Yes	Yes
	1. availability of terms in other languages	In process	Yes
	1. be capable of being referenced and used by regulators, procurers, managers and all users of medical devices (hospitals/health care workers and patients);		Yes for internal institutional use, publicly limited to licence
•Access to information	1. be freely available and considered a global public good;	Yes	Limited
Information	1. support unique device identifier system;	Yes	Yes
	1. be accessible through simple and intuitive search;	Yes	Yes
	1. be available for use in all health-related data base systems.	Yes	Limited to licence
More information	https://www.who.int/teams/health-product-policy-and-standards/assistive-and-medical-technology/medical-devices/nomenclature	https://webgate.ec.eur opa.eu/udi- helpdesk/en/other- relevant- information/emdn- codes.html	https://www.gmdnag ency.org/



Background

- The World Health Assembly Report by the Director-General WHA75/11 and the Decision WHA75(25).
- The Executive Board report <u>EB152/11</u>
- The WHA76 Consolidated report by the Director General, section 13.7
- The WHA76 <u>Committee A, twelfth session, on 27/05/2023, 09:15-11:30 hrs.</u> webcast MS discussion, including Dr. Nakatani's ADG Access to Medicines to Medicines and Health Products.

