

## REVIEW ARTICLE

# ISO 13485:2016 - The Gateway of Global or Regional Harmonization for Medical Device Regulations

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## ABSTRACT

The present review article emphasizes the pivotal role of ISO 13485:2016 in facilitating the global harmonization of medical device regulations. Compliance with this standard is crucial for manufacturers aiming to access international markets, including India, Europe, and the USA. Harmonization of regulations simplifies the process of obtaining licenses and approvals, reducing burdens on manufacturers and enhancing patient safety. By implementing effective quality management systems, manufacturers can navigate the complex regulatory landscape and contribute to the global healthcare industry. The review article also underscores the diversity of medical devices available and acknowledges the substantial expansion of the Indian market. It discusses the stringent regulations outlined in the Indian Medical Device Rules (IMDR) 2017 and the challenges faced by nations in accessing high-quality medical devices. Furthermore, it touches upon the European Medical Device Regulations and the dynamic regulatory environment in the USA. In conclusion, the paper underscores the importance of ISO 13485:2016 in achieving global and regional harmonization of medical device regulations, thereby facilitating market access for manufacturers and confirming the assurance of safe and effective medical device products to patients worldwide.

**Keywords:** Medical device regulations, Harmonisation, Indian Medical Device Rule 2017, ISO 13485, EU MDR.

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## INTRODUCTION

A medical device encompasses a broad range of tools and technologies utilized for diagnostic and therapeutic purposes to prevent and treat diseases. These devices exhibit a wide array of intended applications and functionalities, ranging from conventional therapeutic tools such as wound dressings to sophisticated computerized systems and diagnostic equipment. The Global Harmonization Task Force (GHTF) was founded in the year 1992 by significant stakeholders such as the European Countries, the United States of America, Canada and Australia, which sought to establish uniform regulations for medical devices worldwide.<sup>1-3</sup>

As per the GHTF definition, a medical device product encompasses any implement, machine, implant, apparatus software, material, appliance or article intended for diverse functions, including diagnosis, monitoring, and treatment of diseases or injuries. These devices play crucial roles in sustaining life, supporting bodily functions, controlling conception and disinfection, and providing essential information through *in-vitro* examination of human-derived specimens. It is significant to highlight that although medical

devices do not primarily operate *via* pharmacological, metabolic, or immunological mechanisms, they may be utilized in combination with such methodologies.<sup>4</sup>

The realm of medical devices encompasses a diverse array of products, ranging from basic essentials like medical gloves and surgical bandages to highly sophisticated equipment like X-ray machines, biomedical pacemakers, and surgical robots. Notably, India has emerged as a notable and largest medical device product market in Asian countries, experiencing significant growth. Until 2005, India lacked specific regulations governing medical devices. The worldwide medical device sector involves producing and advancing healthcare equipment, ranging from basic instruments such as stethoscopes and thermometers to sophisticated machinery like ultrasound devices and surgical robots. The sector's value was estimated at approximately 5.5 billion until 2016. Presently, a substantial portion of medical device sales in India—around 75%—is dominated by imported devices overseen by both state and central government bodies. The medical device industry in India is experiencing rapid growth, with an annual growth rate of 15%.<sup>5-8</sup> Projections indicate that it will reach a value of

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\$50 billion by 2025. Within this burgeoning market, devices are distributed across various segments, each with its own market share dynamics. The global medical device industry encompasses the manufacturing and development of healthcare equipment, which includes basic instruments like stethoscopes and thermometers, as well as advanced machinery such as ultrasound devices and surgical robots. The disparity between imported and domestically manufactured medical devices presents a substantial opportunity for producers to address this loophole through domestic production, marketing, and sales.<sup>9,10</sup> However, the process of developing medical device products is complex and time-consuming. Approval for these devices is subject to strict regulations outlined in the Indian Medical Device Rules (IMDR), which started in 2017 and the Medical Devices (Amendment), 2020. These regulations govern the approval process, ensuring compliance with a meticulously structured regulatory framework.

Multinational corporations primarily oversee the regulation of the medical device sector. Oversight is conducted by the CDSCO led by DCGI, i.e., Drug Controller of India. This organization is accountable for managing activities among state-level drug licensing authorities and ensuring consistent implementation of regulations across the country. The regulatory framework aims to govern the import, manufacture, distribution, and sale of specified medical devices.

Importing medical devices into India requires compliance with additional legal requirements supervised by both state and central government entities. The medical device industry is highly regulated, with different countries and regions having their own rules and regulations. This can pose challenges for manufacturers who want to distribute their products globally. This article will explore the importance of ISO 13485:2016 standards and how they serve as a gateway to achieving global harmonization for medical device regulations. We will compare the medical device rules in India, Europe (MDR), and the USA, highlighting the need for harmonization and the steps involved in obtaining licenses to manufacture medical devices.<sup>11,12</sup>

Numerous countries encounter difficulties in obtaining appropriate high-quality medical devices and equipment tailored to their unique epidemiological needs. This challenge is particularly notable in developing nations, where health technology assessments and minimal regulatory oversight are scarce to prevent the importation or use of inferior devices. Given that the majority of medical devices in developing nations are imported, they are vulnerable to unethical market practices, endangering patient safety. Governments must establish comprehensive policies that cover all facets of medical device utilization, including ensuring access to affordable, high-quality products, promoting their safe and appropriate usage, and implementing protocols for their disposal. The health technology life cycle diagram visually represents the essential policy framework. However, the efficacy of such policies hinges on their translation into national regulations enforced through legislation and accompanied by

corresponding sanctions, thereby integrating them seamlessly into the broader national healthcare system.<sup>13</sup>

The primary objective of this review article is to highlight important aspects of ISO13485: 2016 with respect to the preferred gateway of Global as well as regional harmonization systems for Medical Device Regulations for specifically Indian manufacturers while distributing and selling products at the domestic level and international markets.

### Medical Device Rule (2017) in India

Within India, the Medical Device Rule 2017 was introduced to streamline the regulation cum guidance of medical devices and ensure patient safety. MDR rule classifies medical device products into different categories based on their risk levels. Manufacturers are required to obtain licenses from the Central Drugs Standard Control Organization (CDSCO) before marketing their products. The regulation also stresses adherence to ISO 13485:2016 standards, which are globally acknowledged as the benchmark with respect to QMS within the medical device Industry.<sup>14,15</sup>

The medical devices and diagnostics branch of the CDSCO has developed comprehensive guidelines for medical device products known as the Indian Medical Device Rules. Initially introduced in the month of January and year 2017, the IMDR was officially implemented in January 2018. Following this, these rules underwent an amendment in the month February of the year 2020, resulting in the Medical Devices (Amendment) Rules, 2020, which came into force in the month of April year 2020. This amendment included provisions for the registering of specific medical devices. Though certain medical devices continue to be regulated under the D&C Act, 1940, the implementation of IMDR and additional accompanying rules represents a significant step forward for India in enhancing patient safety concerning medical devices. Future IMDR revisions may concentrate on filling up any gaps so as to better align these rules with the European Union's Medical Device Regulation (MDR) and up *in-vitro* Diagnostic Regulation (IVDR).<sup>16</sup> These rules, which are some of the most recent international standards governing medical devices, put a lot of weight on device performance and safety.

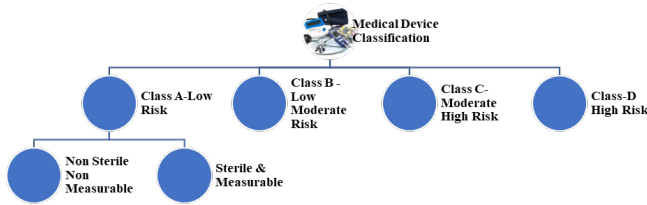
According to Indian Medical Device Rules, these regulations apply for both medical devices products and *in-vitro* diagnostic medical devices that:

- Are eligible for licensing for importation, manufacturing for sale cum supply, and sale, stocking, and exhibition.
- Manufacturing for clinical trials, testing, assessment, examination, and demonstration training is permissible.

### Medical Device Products Classification

The CDSCO of India classifies medical device products and *in-vitro* diagnostics into four risk classes based on the device's intended use, associated risk, and other parameters outlined in IMDR, depicted in Figure 1.

The classification system of medical device products or *in-vitro* diagnostic medical devices (IVD-MDs) adheres to following principles:<sup>17</sup>



**Figure 1:** Classification of medical device products as per Indian Medical Device Act 2017

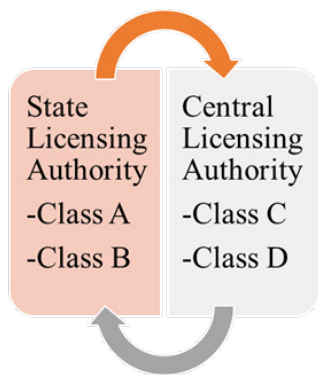
- The proposed use of the MD or IVDMDs dictates classification.
- Grouping devices or their accessories receive individual classification.
- Software is classified alongside its related sub-device.
- Devices with multiple specified uses are categorized based on their most critical use.
- In instances where multiple rules apply, the most rigorous rule leading to a higher classification is employed.

**Manufacturing Activity of Medical Devices within India**

The State Licensing Authority offers permission or loan licenses for manufacturing class A/B devices. On the other hand, the Central Licensing Authority (CLA) issues permission or loan licenses for class C/D devices which was presented in Figure 2. Unless they are suspended or revoked, these licenses are valid for an unlimited period of time, provided the license retention fee is paid before the license’s fifth anniversary of issuance. Furthermore, a three-year license can be obtained to produce a restricted number of medical devices for use, including clinical research, testing, assessment, examination, demonstration, or teaching.

**Clinical Performance Evaluation of Medical Devices**

Just as with the approval/regulatory process for drugs, evaluation for investigational medical device products necessitates clinical investigations conducted on human volunteers to ascertain their safety, performance, and or efficacy. Similarly, for clinical research evaluation, newer *in-vitro* diagnostic medical devices are crucial; they include evaluating specimens taken from human subjects by looking at them to see how well they operate. The rigorously recorded



**Figure 2:** Legislative distribution of the medical devices approval system in India

methods known as the clinical investigation plan or the clinical performance assessment plan are followed during clinical investigations and evaluations. Throughout these procedures, it is essential to put participants’ rights, safety, and well-being first, abiding by the moral guidelines set forth in the Declaration of Helsinki.<sup>18</sup>

Unlike pharmaceuticals covered by Schedule Y, which must undertake four-phase studies, medical devices categorized under the Indian Medical Device Rules (IMDR) go through a simplified two-phase research procedure consisting of pilot (exploratory study) and pivotal clinical investigations. A thorough report, either a clinical investigation report or a clinical performance evaluation report, must be provided following the completion of a clinical investigation or evaluation, respectively. Upon the study’s conclusion or early termination, these reports must be turned in to the Central Licensing Authority (CLA), participating investigators, and the ethics committee.<sup>19,20</sup>

Clinical study is needed for all class B, C, and D medical devices in India under two conditions: the device must be a novel IVD-MD or an experimental medical device without a predicate device that is made in India. However, if the device has been on the market for at least two years in Australia, Canada, Japan, Europe, or the United States, and the relevant Central Licensing Authorities must be satisfied with the available clinical study data, an import license may be issued without a clinical investigation.

Under such circumstances, the CDSCO can require post-marketing investigations based on the recommendations of subject-matter expert panels. In India, class C and D devices must be clinically evaluated to establish their safety and efficacy before import licenses for medical equipment from other countries are given. If published data or clinical studies in the device’s home country demonstrate safety and performance, an import license for class A/B devices may be granted. A free sales certificate from the country of origin is also necessary.

**Medical Device Vigilance Reporting System**

It is mandatory for the maker of medical devices to generate a vigilance report or collect post-market surveillance (PMS) data from products that have been made available to the public. The reporting process, any complaints received, and specifics of the remedial and preventative measures implemented should all be included in this report. Manufacturers also require post-marketing clinical investigations; these may involve further studies like safety assessments, assessments of drug-device interactions, or investigations intended to support use within authorized indications, including morbidity or mortality studies. These studies evaluate the effectiveness and safety of medical devices under research that do not yet have a reference model.

**Medical Device Regulations of Europe**

Medical device regulation arose in response to a number of issues and deficiencies discovered within the previous regulatory framework for medical devices. Before the

MDR, medical devices in the European Union (EU) were controlled by the Medical Device Directive and the Active Implantable Medical Device Directive, originally introduced in the 1990s. Over time, these directives faced criticism for certain deficiencies and gaps in regulatory oversight. The landscape of medical devices evolved significantly since the introduction of the MDD and AIMDD. The increasing prevalence of software-driven devices and the emergence of personalized medicine have presented regulatory bodies with new obstacles in their efforts to confirm the efficacy and safety of medical devices. High-profile incidents involving certain medical devices raised concerns about the adequacy of existing regulatory frameworks in ensuring patient safety. These incidents highlighted gaps in post-market surveillance, clinical evaluation, and transparency requirements. There were efforts globally to harmonize regulatory standards for medical devices. In order to promote commerce and provide a high degree of protection for patients and users of medical devices, the EU sought to harmonize its laws with global best practices. There was a rapid need to reform the legislative norms for medical devices. Some of the notable points are:<sup>21-23</sup>

*Enhanced patient safety*

The primary motivation behind the MDR was to strengthen patient safety by addressing shortcomings in the existing regulatory framework. This involved strengthening the standards for clinical review, improving post-market surveillance, and boosting medical device traceability and transparency.

*Adaptation to technological advances*

The MDR sought to adapt to the evolving landscape of medical device technology by introducing updated regulatory requirements that reflect the complexity and innovation seen in modern medical devices. This included addressing the regulation of software-driven devices and other emerging technologies.

*Harmonization with international standards*

The European Union sought to enable trade and advance worldwide harmonization in the regulation of medical devices by bringing its legislation into line with international standards and best practices. This would help ensure the free movement of safe and effective devices across international borders.

The development of the MDR underwent an extensive legislative process within the EU institutions, involving the Parliament of EU and the European Union’ Council. Stakeholders from various sectors, including industry representatives, healthcare professionals, patient advocates, and regulatory authorities, contributed throughout the process. Formally adopted by the Parliament of EU and the European Union’ Council of the in April 2017, MDR provided a transition period of three years for manufacturers and stakeholders to comply with the new regulations. It became fully applicable on May 26, 2021, superseding the previous directives. The MDR in Europe was established to modernize and augment the governing outline for medical device, addressing safety

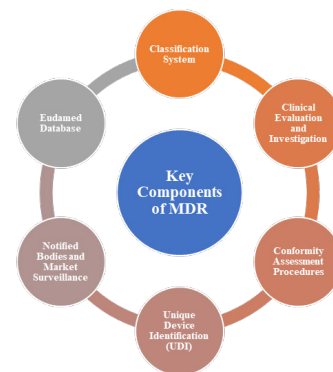
concerns, adapting to technological advancements, and aligning with International standards. Its primary goals include ensuring high protection for patients and users of medical devices, fostering innovation, and facilitating trade within the EU and globally.<sup>24,25</sup>

It brings in more stringent guidelines for labeling, post-market surveillance, and clinical evaluations. To prove compliance with the rules, manufacturers need to get a CE mark and adhere to ISO 13485:2016 requirements. In order to enable access to foreign markets, the MDR also promotes conformity with international standards.

The MDR aims to enhance safety and performance standards for medical devices, safeguarding patients, healthcare professionals, and users. It introduces stricter measures for transparency and traceability across the entire lifecycle of medical devices, from production to post-market monitoring. The regulation mandates more rigorous clinical evaluation procedures, including the generation of clinical data to validate device safety and efficacy, particularly for higher-risk devices. Notified bodies tasked with assessing device conformity face heightened requirements under the MDR to ensure their competency and impartiality. Furthermore, manufacturers are obligated to bolster post-market surveillance efforts, actively monitoring device safety and performance following market release. Important Key components of medical device regulations in Europe are depicted in Figure 3.

In contrast to earlier directives, the MDR upholds a risk-based categorization system for medical devices with more stringent classification requirements. Manufacturers are obliged to undergo conformity assessment processes that include the conformity assessment modules described in the regulation, depending on the category of their devices. The MDR creates stronger requirements for clinical evaluation and research, including a requirement for clinical evidence to support a device’s effectiveness and safety.

In order to improve post-market surveillance, facilitate recalls, and provide improved traceability of medical devices throughout their lifespan, the rule requires the implementation of a UDI system. Although market surveillance agencies enforce compliance and keep an eye on the safety of products on the market, notified bodies are essential in evaluating the



**Figure 3:** Important key components of MDR in Europe



conformance of medical devices. The MDR establishes a unified database called Euda-med to facilitate the registration of medical devices and information sharing between manufacturers, notified bodies, EU member states, and other relevant parties.

In Europe, the MDR is a comprehensive regulatory context designed to progress medical devices' efficacy, safety, and dependability. In order to improve patient safety and keep up with technological changes in the medical device business, the MDR aims to impose more stringent criteria for clinical review and conformism valuation. Producers, notified organizations, and other stakeholders must abide by the legislation so as to guarantee the nonstop accessibility of secure and functional medical devices on the European marketplace.<sup>26</sup>

The implementation of the MDR has significant implications for manufacturers, notified bodies, healthcare providers, and patients, which is brightly highlighted in Table 1.

**Medical Device Regulations within USA**

The background of medical device regulation in the United States is characterized by a historical evolution shaped by various factors, including technological advancements, safety concerns, legislative actions, and industry dynamics. In the early 20<sup>th</sup> century, medical devices were not subject to comprehensive regulatory oversight in the USA. Manufacturers were not required to prove the safety or effectiveness of their products before marketing them. The 1960s thalidomide disaster which caused birth deformities in thousands of infants around the globe, including the United States, sparked questions over the safety of pharmaceuticals and medical equipment. Stronger regulatory measures are necessary, as this incident demonstrated. The US Congress enacted the Medical Device Amendments of 1976 in response to rising worries about the efficacy and safety of medical devices. This act gave the US-FDA regulatory authorities and created a thorough regulatory context for medical devices. The MDA categorized MDs into three classifications (Class I, II, and III) as said by the degree of risk involved in using them. Before being marketed, class --III products—which carry the utmost risk—need pre-market approval (PMA).<sup>27-28</sup>

*FDA Modernization Act of 1997 (FDAMA)*

FDAMA introduced provisions aimed at streamlining the regulatory process for medical devices, including expedited review pathways for innovative devices and provisions for reclassifying certain medical devices.

*MDUFA*

In order to speed up the review process for new devices, the FDA can collect user fees from medical device makers under the MDUFA program, which was first allowed in 2002 and then reauthorized.

*21<sup>st</sup> Century Cures Act*

This Act was passed in 2016 to streamline regulatory procedures and encourage innovation that hasten the development and approval of items, especially devices.

Under the US- FDA is accountable for regulating medical devices in the USA. In USA, medical device regulation is managed by the its Center for Devices and Radiological Health. FDA agency's responsibilities include pre-market review, post-market surveillance, enforcement actions, and public health initiatives. Medical devices undergo either PMA or 510(k) clearance before they can be marketed in the USA. Class 2 as well as class 3 devices need PMA, however majority of class II devices can get clearance by showing significant equivalency to a device that is lawfully sold under the 510(k) process. The Quality System Regulation (QSR), which complies with ISO 13485:2016 standards, must be followed by manufacturers. The FDA carries out pre-market assessments and inspections to guarantee the efficacy and safety of medical products. It is necessary to have FDA clearance or approval in order to commercialize MS in the USA.<sup>29</sup>

Medical device regulations within USA reflects a dynamic interplay of legislative actions, technological advancements, safety concerns, and industry developments. Over the years, regulatory frameworks have evolved to enhance medical devices' safety, effectiveness, and innovation while ensuring timely access to new technologies for patients and healthcare providers.

Medical device regulations in the USA is characterized by several key features that ensure the safety, effectiveness, and quality of medical devices marketed and used in the country. Some of the notable features of these US regulations with respect to medical devices are:<sup>30</sup>

*Classification system*

Medical devices in the USA are classified into three main classes (Class 1, 2, and 3) depending on the risk level of associated with their use. Class 1 medical devices are considered at lowest risk, while class 3 medical devices pose the highest risk to patients.

**Table 1:** Affected stake holders of medical device regulations in Europe

<i>Implications of medical device regulations</i>			
<i>Manufacturers</i>	<i>Notified bodies</i>	<i>Healthcare providers</i>	<i>Patients</i>
Compliance with the MDR requires manufacturers to meet more stringent regulatory requirements, including increased clinical evidence and documentation.	Face greater scrutiny and must demonstrate their competence and independence to assess the conformity of medical devices	Benefit from enhanced safety and reliability of medical devices, as well as improved transparency and traceability.	Enhance patient safety by ensuring that medical devices meet rigorous standards for effectiveness, performance, and safety

**Pre-market Review Pathways**

*Pre-market approval*

Class III devices and certain class II devices require pre-market approval (PMA) from the FDA before they can be marketed. PMAs are subject to a stringent evaluation procedure that includes the submission of clinical evidence attesting to the device’s efficacy and safety.

*510(k) clearance*

Through the 510(k) strategy, the majority of class II devices can receive clearance. To do so, they must show that they substantially resemble a lawfully marketed product (predicate) that is exempt from PMA.

*Quality system regulation*

The FDA’s quality system regulation (QSR), also known as 21 -CFR Part 820, sets forth necessities for the design, manufacturing, packaging, labeling, storage, installation, and servicing of medical, devices to ensure their quality as well as consistency.

*Post-marketing surveillance*

Medical device makers must set up post-marketing surveillance systems to track and report adverse occurrences, device malfunctions, and other potential safety concerns.

*Unique device identification system*

The regulatory body of USA has implemented a unique device identification system, requiring most medical devices to bear a unique identifier to facilitate device tracking, post-market surveillance, and recalls.

*Quality system inspection technique*

To ensure that medical device makers adhere to regulations, the FDA inspects them. During inspections, the quality system inspection technique (QSIT) is utilized to evaluate compliance with the QSR.

*Medical device reporting*

Through the medical-device-reporting (MDR) system, manufacturers, distributor as well as importers are obligated to report specific adverse occurrences and malfunctions of their devices to the FDA. This aids in the FDA’s identification and resolution of medical device safety issues.

*FDA guidance documents*

The FDA publishes guidance documents to provide clarity and guidance on various aspects of medical device regulation, including pre-market submissions, quality system requirements, post-market surveillance, and labeling requirements.

*International harmonization*

The FDA collaborates with international regulatory agencies and participates in initiatives aimed at harmonizing regulatory requirements for medical devices globally, promoting consistency and facilitating international trade.

*ISO 13485:2016 - The gateway to harmonization*

ISO guideline 13485:2016 outlines the QMS necessities unambiguously tailor-made for companies engaged in the

manufacturing of medical devices. Originating from ISO 9001, it stands as an independent document with distinct stipulations catered to medical device manufacturers. Notably, ISO 13485 places a heightened emphasis on risk management and necessitates additional documentation compared to ISO 9001. Globally recognized, ISO 13485 serves as the predominant regulatory standard addressing QMS for medical devices. It prioritizes QMS effectiveness and adherence to both regulatory and customer specifications. Most medical devices in European Union member states, the United Kingdom, Canada, Japan, Australia, and a number of other nations must comply with ISO 13485 standards. ISO 13485 is the foundational quality standard for obtaining CE certification in the European Union, in particular.<sup>31-33</sup>

ISO 13485:2016 is a widely recognized standard that specifies the requirements for a medical device-specific quality management system (QMS). It defines the requirements needed to build and maintain an effective QMS for enterprises engaged in the design, development, production, installation, and servicing of medical devices. ISO 13485:2016 is required due to many important factors:

**Regulatory Compliance**

*Global regulatory requirements*

Medical device manufacturers are required by several regulatory bodies worldwide, such as the FDA in the USA and the medical device regulation of the EU, to establish a QMS that satisfies criteria for ISO 13485:2016.

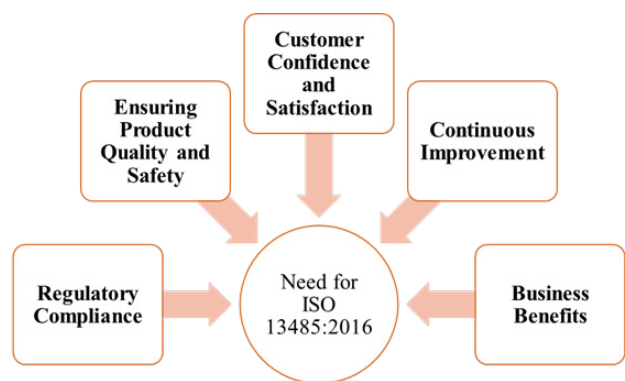
*Market access*

Compliance with ISO 13485:2016 facilitates market access for medical devices in various countries and regions by demonstrating adherence to internationally recognized quality standards.

**Ensuring Product Quality and Safety**

*Risk management*

ISO 13485:2016 highlights the status of risk management throughout the product lifecycle, helping organizations identify and mitigate risks related with medical devices to ensure their safety and effectiveness.



**Figure 4:** Perspective need of complying the global standard of ISO 13485:2016

*Process standardization*

Standard promotes the establishment of standardized processes and procedures for design, development, production, and post-market activities, contributing to consistent product quality and performance.

**Customer Confidence and Satisfaction***Enhanced customer confidence*

The ability of a company to consistently manufacture safe and efficient medical devices that satisfy both customer and regulatory criteria is increased when it is certified to ISO 13485:2016.

*Improved supplier relationships*

Suppliers and subcontractors that are certified to ISO 13485:2016 are often preferred by medical device manufacturers, as they demonstrate a commitment to quality and compliance with industry standards.

**Business Benefits***Operational efficiency*

Implementation of ISO 13485:2016 helps organizations improve operational efficiency by streamlining processes, reducing errors, and minimizing waste in the production and distribution of medical devices.

*Competitive advantage*

Certification to ISO 13485:2016 can provide a competitive advantage in the marketplace, as it demonstrates a company's commitment to quality and compliance, potentially attracting new customers and business opportunities.

**Continuous Improvement***Focus on continual improvement*

ISO 13485:2016 necessitates organizations to continually monitor, measure and improve their procedures and quality management system, fostering a culture of continuous improvement and innovation.

*Adaptability to change*

The standard's flexible framework allows organizations to adapt to changes in technology, regulations, and customer requirements, ensuring the ongoing appropriateness and efficiency of their quality management system.

ISO guideline of 13485:2016 is a globally recognized benchmark for QMS specific to the medical device industry. It offers manufacturers a framework for setting up and keeping up efficient quality control systems, guaranteeing the reliable manufacturing of secure and efficient medical equipment. The need for ISO 13485 is briefly highlighted in Figure 4. A license or permission must be obtained in accordance with ISO 13485:2016 in order to operate in various nations, including Europe, the USA, and India.<sup>34</sup>

**Importance of Harmonization**

The harmonization of medical device regulations is essential for several reasons: facilitating international trade, enhancing

patient safety, and promoting innovation in the medical device industry.

**Facilitating International Trade***Reducing barriers*

Harmonized regulations streamline the process for medical device manufacturers to gain market access in multiple countries or regions, reducing regulatory barriers and administrative burdens.

*Promoting global market access*

Consistent regulatory requirements across different jurisdictions simplify the process of obtaining approvals or certifications, enabling medical device manufacturers to access global markets more efficiently.

*Enhancing patient safety*

- *Ensuring consistent standards*

Harmonized regulations establish consistent standards for safety, efficacy, and quality of medical devices, regardless of the country under which they are manufactured or used. This helps ensure a high level of protection for patients worldwide.

*Improving post-market surveillance*

Harmonization facilitates the exchange of information and collaboration among regulatory authorities, enhancing post-market surveillance and the timely detection of safety issues or adverse events associated with medical devices.

**Promoting Innovation***Encouraging investment*

Harmonized regulations provide clarity and predictability for medical device manufacturers, encouraging investment in research, development, and innovation. This fosters the creation of new and improved medical technologies.

*Fostering collaboration*

Harmonization promotes collaboration among stakeholders, including regulatory authorities, industry organizations, and healthcare professionals, facilitating the development of common standards, best practices, and technological advancements.

**Addressing Global Challenges***Adapting to technological advances*

Harmonized regulations enable regulatory authorities to adapt more quickly to technological advancements in the medical device industry, ensuring that regulations remain relevant and effective in addressing emerging challenges.

*Retorting to public health emergencies*

Throughout public health emergencies or pandemics, harmonized regulations allow for more efficient coordination and response efforts, enabling timely access to critical medical devices and technologies.

Harmonization of medical device regulations is crucial for promoting international trade, enhancing patient safety,

fostering innovation, and addressing global challenges in the medical device business. Collaborative efforts among regulatory bodies, industry stakeholders, and healthcare professionals are essential to achieve effective harmonization and ensure the continued availability of safe and effective medical devices worldwide. In brief, the motives for the harmonization of medical device regulations at a global level is highlighted in Figure 5.

Firstly, it reduces the burden on manufacturers by eliminating the need to comply with multiple sets of regulations. This streamlines the process of obtaining licenses and approvals, saving time and resources. Secondly, harmonization enhances patient safety by guaranteeing that medical devices pass rigorous quality and safety requirements. It also facilitates the exchange of information between regulatory authorities, promoting global collaboration in monitoring and surveillance.<sup>35</sup>

**Overall Steps to Obtain Licenses for Medical Device Manufacturing**

Obtaining licenses to manufacture medical devices involves a series of steps which was depicted in Figure 6. These steps may vary slightly depending on the country or region, but they generally include:

*Establishment registration*

Manufacturers must register their establishments with the relevant regulatory authority. This involves providing detailed information about the manufacturing facility, quality systems, and personnel.

*QMS*

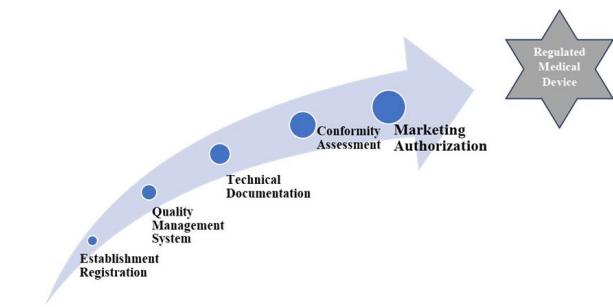
Implementation of a robust quality management system is essential. ISO 13485:2016 serves as a guide for establishing and maintaining such a system.

*Product classification*

Devices are segregated into different groups depending on their risk levels. Manufacturers must determine the appropriate classification for their products.

*Technical documentation*

Manufacturers must prepare comprehensive technical



**Figure 6:** Pathway of steps for getting approval of medical device product

documentation, including design specifications, risk assessments, and clinical evidence. This documentation provides evidence of compliance with regulatory requirements.

*Conformity assessment*

The conformity assessment process involves evaluating the technical documentation and conducting audits or inspections of the manufacturing facility. This step ensures that the medical devices meet the necessary quality and safety standards.

*Marketing authorization*

Once the conformity assessment is successfully completed, manufacturers can apply for marketing authorization from the regulatory authority. This authorization allows marketing approval and distribution of medical device products in the respective market.

**CONCLUSION**

ISO 13485:2016 plays a pivotal role as a pathway towards achieving global harmonization in medical device regulations. Compliance with this standard is imperative for manufacturers aiming to penetrate international markets, including India, Europe, and the USA. Harmonization of regulations simplifies the process of obtaining licenses and approvals, alleviating burdens on manufacturers while bolstering patient safety. By adhering to ISO 13485:2016 and implementing robust quality management systems, manufacturers can navigate the intricate landscape of medical device regulations and make significant contributions to the global healthcare industry.

The realm of medical devices encompasses a vast array of tools and technologies utilized for diagnostic and therapeutic purposes in disease prevention and treatment. From traditional therapeutic instruments like wound dressings to cutting-edge diagnostic equipment and surgical robots, medical devices serve diverse applications and functions.

India has emerged as a prominent market for medical devices in Asia, experiencing notable growth. However, a considerable proportion of medical device sales in India, approximately 75%, comprises imported devices, overseen by both state and central government bodies. Stringent regulations outlined in the India’s MDR of the year 2017 and their Amendment Rules of the year 2020 govern approval process, ensuring adherence to a structured regulatory framework.

Globally, the harmonization of medical device regulations



**Figure 5:** Motives for harmonization of medical device regulations at a global level



is imperative for facilitating international trade, enhancing patient safety, and fostering innovation in the industry. ISO 13485:2016 serves as a cornerstone in this endeavor, providing a preferred gateway for manufacturers to navigate both domestic and international markets while adhering to regulatory requirements and maintaining quality standards.

## REFERENCES

- Sarwal R; Prasad U; Madangopal K; Kalal S; Kaur D; Kumar A; Regy P; Sharma J. Investment Opportunities in India's Healthcare Sector Niti Aayog report. 2021.
- Manu M, Anand G. A review of medical device regulations in India, comparison with European Union and way-ahead. Vol. 13, Perspectives in Clinical Research. Wolters Kluwer Medknow Publications; 2022. p. 3–11. [https://doi.org/10.4103/picr.PICR\\_222\\_20](https://doi.org/10.4103/picr.PICR_222_20)
- Pineda P. Medical Devices Regulatory Convergence. In 2018. p. 130.
- Higgins D, Madai VI. From Bit to Bedside: A Practical Framework for Artificial Intelligence Product Development in Healthcare. *Advanced Intelligent Systems*. 2020 Oct;2(10). <https://doi.org/10.1002/aisy.202000052>
- Vasiljeva K, van Duren BH, Pandit H. Changing Device Regulations in the European Union: Impact on Research, Innovation and Clinical Practice. *Indian J Orthop*. 2020 Apr 1;54(2):123–9. <https://doi.org/10.1007/s43465-019-00013-5>.
- Naga Swaroopa S VRR. A comparative study of Medical Devices and their Regulations in US EU India and China. *Asian Journal of Pharmaceutical and Clinical Research*. 2023;16(3):6–14. DOI:10.22159/ajpcr.2023.v16i3.46624
- Ministry of Chemicals and Fertilisers D of P. GSR National Medical Devices Policy 2023. Government Resolution. 2023. p. 1–9.
- McDermott O, Antony J, Sony M, Healy T. Critical failure factors for continuous improvement methodologies in the Irish MedTech industry. *TQM Journal*. 2022;34(7):18–38. <https://doi.org/10.1108/TQM-10-2021-0289>
- Govt of India. Medical Device Rule 2017 with ammendments till 14.10.2022\_CDSO INDIA. 2022.
- Dept of Pharmaceuticals M of C and F. 27. Public Notice and Approach paper on draft NMDP 2022. 2022.
- Targhotra M, Aggarwal G, Popli H, Gupta M. Regulatory aspects of medical devices in India. *International Journal of Drug Delivery*. 2017 Oct 6;9(2):18. DOI:10.5138/09750215.2147
- Cheng Michael, World Health Organization. Medical device regulations : global overview and guiding principles. World Health Organization; 2003. 1–43 p.
- Dange H, Patil R, Upasani C. A., Methodical Review on Allergens and Allergic Reactions. *International Journal of Pharmaceutical Quality Assurance*. 2023;14(4):1239-1245. <https://doi.org/10.25258/ijpqa.14.4.64>
- List\_of\_Devices from CDSCO website. <https://cdsco.gov.in/opencms/opencms/en/Medical-Device-Diagnostics/Medical-Device-Diagnostics/>.
- Antich-Isern P, Caro-Barri J, Aparicio-Blanco J. The combination of medical devices and medicinal products revisited from the new European legal framework. Vol. 607, *International Journal of Pharmaceutics*. Elsevier BV; 2021. DOI: 10.1016/j.ijpharm.2021.120992
- Ministry of Chemicals and Fertilizers. Press Release on Policy for the Medical device Sector. Press Buero of India. 2023. p. 1–3.
- Hu H, Wang X, Zhou H, Jin Z, Wei S. Global Trade Pattern of Medical Devices and China's Trade Position: Based on Data From 2001 to 2020. *Front Public Health*. 2022 Jul 22;10. <https://doi.org/10.3389/fpubh.2022.926216>
- Sarkar A, Sodha SJ, Junnuthula V, Kolimi P, Dyawanapelly S. Novel and investigational therapies for wet and dry age-related macular degeneration. *Drug Discovery Today*. 2022 Aug 1;27(8):2322-32. <https://doi.org/10.1016/j.drudis.2022.04.013>
- Zippel C, Bohnet-Joschko S. Innovation for safe and effective medical devices: Contributions from post-market surveillance. *Ther Innov Regul Sci*. 2017 Mar 1;51(2):237–45. DOI: 10.1177/2168479016674040
- Joshi D, Sharma I, Gupta S, Gurjeet Singh T, Dhiman S, Prashar A, et al. A global comparison of implementation and effectiveness of materiovigilance program: overview of regulations. *Environmental Science and Pollution Research [Internet]*. 2021;28(1):59608–29. <https://doi.org/10.1007/s11356-021-16345-5>
- Miklos AC, Li C, Sorrell CD, Lyon LA, Pielak GJ. An upper limit for macromolecular crowding effects. *BMC Biophys*. 2011 May 31;4(1). DOI: 10.1186/2046-1682-4-13
- Hoda F, Verma R, Arshad M, Siddiqui AN, Khan MA, Akhtar M, et al. Materiovigilance: Concept, structure and emerging perspective for patient's safety in india. *Drug Res*. 2020 Sep 1;70(9):429–36. DOI: 10.1055/a-1195-1945
- EUROPEAN PARLIAMENT AND THE COUNCIL OF THE EUROPEAN UNION. REGULATION (EU) 2017/ 745 OF THE EUROPEAN PARLIAMENT AND OF THE COUNCIL - of 5 April 2017 - on medical devices, amending Directive 2001/ 83/ EC, Regulation (EC) No 178/ 2002 and Regulation (EC) No 1223/ 2009 and repealing Council Directives 90/ 385/ EEC and 93/ 42/ EEC. 2017.
- Mafnas NA. FDA's Utilization of MDSAP Audits. 2020.
- 38 WHO Regional Publications EMS. Regulation of medical devices A step-by-step guide. 2016.
- Kaushik A, Saini KS, Anil B, Rambabu S. Harmonized medical device regulation: Need, challenges, and risks of not harmonizing the regulation in Asia. Vol. 2, *Journal of Young Pharmacists*. E-Flow Medknow Publications; 2010. p. 101–6. DOI: 10.4103/0975-1483.62221
- ISO TECHNICAL DATA SHEET. Medical devices-Quality management systems-Requirements for regulatory purposes [Internet]. GUIDANCE DOCUMENT. 2016. p. 1–46. Available from: [www.iso.org](http://www.iso.org)
- Authrer. A Step towards Import Reduction and Affordable High-End Medical Devices. Dhyeya IAS [Internet]. 2023 [cited 2023 Feb 27];1–4. Available from: [dhyeyaias.com/current-affairs/daily-current-affairs/national-medical-devices-policy-2023-a-step-towards-import-reduction-and-affordable-high-end-medical-devices](http://dhyeyaias.com/current-affairs/daily-current-affairs/national-medical-devices-policy-2023-a-step-towards-import-reduction-and-affordable-high-end-medical-devices) Context
- Dhyeya IAS. National Medical Device Policy 2023 Why in News? What are the Key Features of NMD Policy 2023? 2023;1–4.
- US FDA. FDA official Website Data. 2023. p. 1–5 Overview of Device Regulation. Available from: <https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/overview-device-regulation>.
- Specialist AKS, Policy IH. FDA Regulation of Medical Devices. 2023.
- Van Norman GA. Drugs and Devices Comparison of European and US Approval Processes. JACC: BASIC TO TRANSLATIONA

- L SCIENCE. 2016;1–14. DOI: 10.1016/j.jacbts.2016.06.003.
33. Niemiec E. Will the EU Medical Device Regulation help to improve the safety and performance of medical AI devices? *Digit Health*. 2022 Mar 1;8. DOI: 10.1177/20552076221089079.
34. Pardeshi SR, Kole EB, Kapare HS, Chandankar SM, Shinde PJ, Boisa GS, Salgaonkar SS, Giram PS, More MP, Kolimi P, Nyavanandi D. Progress on Thin Film Freezing Technology for Dry Powder Inhalation Formulations. *Pharmaceutics*. 2022 Nov 28;14(12):2632. <https://doi.org/10.3390/pharmaceutics14122632>
35. Dang A, Sharma JK. Economics of Medical Devices in India. *Value Health Reg Issues*. 2019 May 1;18:14–7. DOI: 10.1016/j.vhri.2018.06.004.