

# Comparison of Analytical Validation of Immunoassays and Mass Spectrometry Assays in FDA-Cleared In Vitro Diagnostic Devices

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# Disclosures

I have no financial conflicts to disclose



# Agenda

1. Overview of the FDA Submission Process
2. Comparison of Analytical Validation Studies for Vitamin D Mass Spectrometry and Immunoassay IVDs



# In Vitro Diagnostic (IVDs) Are:

- Reagents, instruments, and systems used in diagnosis of disease or other conditions...
- In order to cure, mitigate, treat, or prevent disease...
- Intended for use in the collection, preparation, and examination of specimens taken from the human body.

[21 CFR 809.3]

# Devices Are Evaluated According to Risk



- Class I: low risk (e.g., mass spectrometry instruments)
- Class II: moderate risk (e.g., prostate cancer monitoring)
- Class III: high risk (e.g., screening for colon cancer)
  
- Each risk class has its own standard of evidence and requirements for review

# Device Classification and Review



	Class I	Class II		Class III
Risk	Low	Moderate		High
Clearance/ Approval	Not Required	510(k)	De Novo	PMA
Comparison	Not Required	Predicate Device	Clinical Truth	Clinical Truth
Controls	General	General + Special Controls		
Submission Studies*	Not Required*	Analytical and Clinical		



Marketed



Cleared



Granted



Approved

\*Most Class I and some Class II IVDs are “exempt” from pre-market review

# Regulatory controls

These are provisions in the regulations that, when followed, ensure that device is safe and effective.

- General Controls: sufficient for most class I devices, examples include:
  - Facility registration (21 CFR 807.20)
  - Device listing (21 CFR 807.20)
  - Labeling requirements (21 CFR 801 or 809)
  - Maintaining records and reporting on recalls and adverse events (21 CFR 806 or 810)
- Special Controls: Special controls are regulatory requirements for class II devices.
  - Mandatory analytical and clinical performance standards
  - Special Labeling Requirements
  - Postmarket surveillance

Regulatory controls guidance document:

<https://www.fda.gov/MedicalDevices/DeviceRegulationandGuidance/Overview/GeneralandSpecialControls/default.htm>



# What Does FDA Review in a Submission?

1. Intended Use/Indications for Use
2. Analytical performance testing
3. Clinical performance testing
4. Device labeling (package insert/instructions for use)



# Intended Use/Indications for Use

1. Determines risk of device and performance testing required
2. What the device is:
  - A. Analyte that is measured
  - B. The measurement principle of the test
  - C. The specimen type
3. The context in which the device is used:
  - A. The setting (clinical laboratory, point-of-care, etc.)
  - B. Instrumentation required
  - C. The target condition
  - D. The clinical purpose (diagnosis, prognosis, monitoring)
  - E. The target population for whom the test is intended

# Analytical Performance Testing

- Precision
- Linearity/assay reportable range
- Detection Limit/Analytical Sensitivity
- Cross reactivity/ Interfering substances
- Method comparison (to the predicate or reference method)
- Matrix comparison
- Traceability, Stability, Expected values
- Controls and calibrators



# CDRH-Recognizes Guidelines for IVDs

FDA

Clinical and Laboratory Standards Institute (CLSI)



Precision



Liquid Chromatography-Mass Spectrometry  
Methods



Analytical  
Sensitivity

AND MANY MORE!

<http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfStandards/search.cfm>

Use of CDRH-recognized guidelines can make performance testing and submission review faster and more efficient

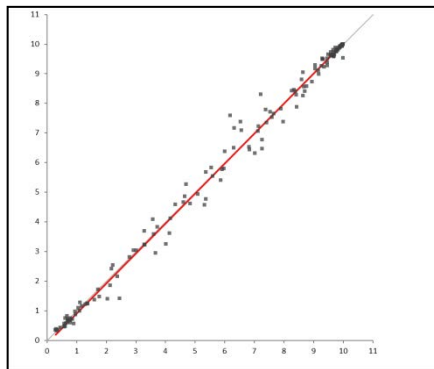
# General Recommendations for Analytical Performance Testing



Use Recognized CLSI Guidelines



Use Real Patient Samples from the Intended Use Population and Intended Matrix



Test Samples that Cover the Analytical Measuring Range and at Medical Decision Points

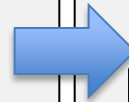
# Use the Final Finished Device for All Performance Testing



Sample  
Processing



LC-MS  
Analysis



Data  
Processing



Final  
Output

# Where to Find Information on Analytical Testing Performed for Cleared Devices



## The 510k database

<https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmnmn.cfm>

**510(k) Premarket Notification**

A 510(K) is a premarket submission made to FDA to demonstrate that the device to be marketed is at least as safe and effective, that is, substantially equivalent, to a legally marketed device (21 CFR §907.92(a)(3)) that is not subject to premarket approval.

[Learn more...](#)

**Search Database**

510K Number:  Type:  Product Code:

Center:  Combination Products:

Applicant Name:  Cleared/Approved In Vitro Products:

Device Name: **Vitamin D** Redacted FOIA 510(k):

Panel:  Third Party Reviewed:

Decision:

Decision Date:  to  Clinical Trials:

Sort by: Decision Date (descending)

[Quick Search](#) [Clear Form](#) [Search](#)

**Other Databases**

- De Novo
- Medical Device Reports (MAUDE)
- CDRH Export Certificate Validation (CECV)
- CDRH FOIA Electronic Reading Room
- CFR Title 21
- CLIA
- Device Classification
- FDA Guidance Documents
- Humanitarian Device Exemption
- Medsun Reports
- Premarket Approvals (PMAs)
- Post-Approval Studies
- Postmarket Surveillance Studies
- Radiation-Emitting Products
- Radiation-Emitting Electronic Products Corrective Actions
- Recalls
- Registration & Listing
- Standards
- Total Product Life Cycle
- X-Ray Assembler

# Where to Find Information on Analytical Testing Performed for Cleared Devices



## The De Novo database

**U.S. FOOD & DRUG ADMINISTRATION**

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SEARCH

Home | Food | Drugs | Medical Devices | Radiation-Emitting Products | Vaccines, Blood & Biologics | Animal & Veterinary | Cosmetics | Tobacco Products

### Device Classification under Section 513(f)(2)(de novo)

FDA Home | Medical Devices | Databases

In 1997, the Food and Drug Administration Modernization Act (FDAMA) added the de novo classification pathway under section 513(f)(2) of the FD&C Act, establishing an alternate pathway to classify new devices into Class I or II that had automatically been placed in Class III after receiving a Not Substantially Equivalent (NSE) determination in response to a 510(k) submission. In this process, a sponsor who receives an NSE determination may, within 30 days of receiving notice of the NSE determination, request FDA to make a risk-based classification of the device under section 513(a)(1) of the Act.

In 2012, section 513(f)(2) of the FD&C Act was amended by section 607 of the Food and Drug Administration Safety and Innovation Act (FDASIA), to provide a second option for de novo classification. In this second pathway, a sponsor who determines that there is no legally marketed device upon which to base a determination of substantial equivalence may request FDA to make a risk-based classification of the device under section 513(a)(1) of the Act without first submitting a 510(k).

[Learn more...](#)

**Other Databases**

- 510(k)s
- Medical Device Reports (MAUDE)
- CDRH Export Certificate Validation (CECV)
- CDRH FOIA Electronic Reading Room
- CFR Title 21
- CLIA
- Device Classification
- FDA Guidance Documents
- Humanitarian Device Exemption
- Medsun Reports
- Premarket Approvals (PMAs)
- Post-Approval Studies
- Postmarket Surveillance Studies
- Radiation-Emitting Products
- Radiation-Emitting Electronic Products Corrective Actions
- Recalls
- Registration & Listing
- Standards
- Total Product Life Cycle
- X-Ray Assembler

**Search Database** Help Download Files

DeNovo Number

510(K) Number

Panel

Center

Decision Date  to

Sort by

Product Code

Priority Review

Device Name

Requester Name

[Clear Form](#)

# 510(k)s for IVDs That Measure Vitamin D

**510(k) Premarket Notification**

FDA Home Medical Devices Databases

1 to 10 of 42 Results Results per Page 10

Device Name: *Vitamin D* Decision Date To: 10/04/2017

[New Search](#) [Export to Excel](#) [Download Files](#) [More About 510\(k\)](#)

Device Name	Applicant	510(K) Number	Decision Date
<a href="#">Loci Total Vitamin D Total Assay, Loci V</a>	Siemens Healthcare Diagnostics	<a href="#">K162298</a>	03/16/2017
<a href="#">Elecsys Vitamin D Total Ii, Vitamin D To</a>	Roche Diagnostics	<a href="#">K162840</a>	02/08/2017
<a href="#">Frend Vitamin D Test System</a>	Nanoentek Usa, Inc.	<a href="#">K162754</a>	01/12/2017
<a href="#">Architect 25-oh Vitamin D 5p02, Architec</a>	Abbott Laboratories	<a href="#">K153375</a>	08/12/2016
<a href="#">Lumipulse G 25-oh Vitamin D, Lumipulse G</a>	Fujirebio Diagnostics, Inc.	<a href="#">K153361</a>	04/15/2016
<a href="#">St Aia-pack 25-oh Vitamin D, St Aia-pack</a>	Tosoh Bioscience, Inc.	<a href="#">K150270</a>	10/26/2015
<a href="#">25-hydroxy Vitamin Ds Eia</a>	Immunodiagnostic Systems Ltd.	<a href="#">K142351</a>	08/25/2015
<a href="#">Bioplex(r) 2200 25-oh Vitamin D Kit, Bio</a>	Bio-rad Laboratories	<a href="#">K141114</a>	01/09/2015
<a href="#">Access 25(oh) Vitamin D Total For Use O</a>	Beckman Coulter, Inc.	<a href="#">K142373</a>	12/22/2014
<a href="#">Ids-isys 25-hydroxy Vitamin Ds, And Ids-</a>	Immunodiagnostic Systems Ltd.	<a href="#">K140554</a>	12/19/2014

Page Last Updated: 10/02/2017

Note: If you need help accessing information in different file formats, see [Instructions for Downloading Viewers and Players](#).

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# The First LC-MS Device for Vitamin D Granted by FDA



<a href="#">New Search</a>		<a href="#">Back To Search Results</a>	
<b>Device Classification Name</b>	<a href="#">25-oh-vitamin D Mass Spectrometry Test System</a>		
<b>De Novo Number</b>	DEN170019		
<b>Device Name</b>	Vitamin D 200M Assay For The Topaz System		
<b>Requester</b>	AB SCIEX LLC 500 Old Connecticut Path Framingham, MA 01701		
<b>Contact</b>	Shilpa Sharma		
<b>Regulation Number</b>	<a href="#">862.1840</a>		
<b>Classification Product Code</b>	<a href="#">PSL</a>		
<b>Date Received</b>	03/20/2017		
<b>Decision Date</b>	05/18/2017		
<b>Decision</b>	Granted (DENG)		
<b>Classification Advisory Committee</b>	Clinical Chemistry		
<b>Review Advisory Committee</b>	Clinical Chemistry		
<b>Reclassification Order</b>	<a href="#">Reclassification Order</a>		
<b>FDA Review</b>	<a href="#">Decision Summary</a>		
<b>Type</b>	Post-NSE		

# The First Page of the Decision Summary



## DEN170019 (LC-MS)

## K162298 (Immunoassay)

### EVALUATION OF AUTOMATIC CLASS III DESIGNATION FOR Vitamin D 200M Assay

#### DECISION SUMMARY

**A. DEN Number:**

DEN170019

**B. Purpose for Submission:**

De Novo request for evaluation of automatic class III designation for the Vitamin D 200M Assay for the Topaz System

**C. Measurand:**

Total 25-hydroxyvitamin D

**D. Type of Test:**

Liquid Chromatography Tandem Mass Spectrometry (LC-MS/MS)

**E. Applicant:**

AB SCIEX

**F. Proprietary and Established Names:**

Vitamin D 200M Assay

### 510(k) SUBSTANTIAL EQUIVALENCE DETERMINATION DECISION SUMMARY ASSAY ONLY TEMPLATE

**A. 510(k) Number:**

k162298

**B. Purpose for Submission:**

New Device

**C. Measurand:**

25-hydroxyvitamin D

**D. Type of Test:**

Quantitative chemiluminescent immunoassay

**E. Applicant:**

Siemens Healthcare Diagnostics

**F. Proprietary and Established Names:**

LOCI Vitamin D Total Assay

LOCI VITD CAL

# Intended Use/Indications for Use



## DEN170019 (LC-MS)

**The Vitamin D 200M Assay for the Topaz System** is intended for in vitro diagnostic use in the **quantitative determination of total 25-hydroxyvitamin D** (25-OH-D) through the measurement of 25-hydroxyvitamin D3 (25-OH-D3) and 25-hydroxyvitamin D2 (25-OH-D2) in **human serum using LC-MS/MS technology** by a trained laboratory professional in a clinical laboratory. **The Assay is intended for use with the Topaz System.** The Vitamin D 200M Assay for the Topaz System is intended to be used in conjunction with other clinical or laboratory data to assist the clinician in making individual patient management decisions in an **adult population** in the **assessment of vitamin D sufficiency.**

## K162298 (Immunoassay)

**The LOCI Vitamin D Total Assay** is an in vitro diagnostic test for the **quantitative measurement of total 25-hydroxyvitamin D** (25-OH-D) **in human serum and plasma** on the **Dimension® EXL™ integrated chemistry system** with LOCI® Module. Measurements of vitamin D are used in the **assessment of vitamin D sufficiency.**

# Precision (CLSI EP05-A3)

## DEN170019 (LC-MS)

Sample	Mean (ng/mL)	Repeatability		Within-Laboratory		Reproducibility	
		SD	%CV	SD	%CV	SD	%CV
1	14.9	0.57	3.8%	1.05	7.0%	1.10	7.3%
2	13.7	0.65	4.7%	0.80	5.8%	0.80	5.8%
3	31.0	1.28	4.1%	2.03	6.5%	2.03	6.5%
4	67.5	3.58	5.3%	3.99	5.9%	5.85	8.7%
5	100	6.37	6.3%	6.46	6.4%	10.4	10.4%
<b>Native Patient Sample</b>	28.4	1.44	5.1%	2.04	7.2%	2.10	7.4%

## K162298 (Immunoassay)

Samples	N	Mean	Repeatability		Within-Lab Precision	
		ng/mL	SD	%CV	SD	%CV
QC (Low)	80	18.9	0.58	3.1	1.01	5.4
QC (Level 1)	80	38.7	1.02	2.6	2.02	5.2
QC (Level 2)	80	89.6	1.72	1.9	3.67	4.1
Serum 1	80	8.2	0.46	5.6	0.71	8.7
Serum 2	80	29.4	0.76	2.6	1.46	5.0
Serum 3	80	76.5	1.63	2.1	3.11	4.1
Plasma	80	25.2	0.44	1.8	0.78	3.1

# Linearity (CLSI EP06-A)

## DEN170019 (LC-MS)

A serum sample with a high concentration of vitamin D was serially diluted with a low concentration serum sample to generate nine samples with vitamin D concentration values of 3.4, 47.7, 91.9, 136, 180, 225, 269, 313, 357 ng/mL, respectively.

The results of the linear regression analyses are summarized below:

$$y = 0.9974x + 1.1737 \quad R^2 = 0.998$$

## K162298 (Immunoassay)

A serum sample with a high concentration of vitamin D was serially diluted with a low concentration serum sample to generate nine samples with vitamin D concentration values of 4.4, 24.7, 44.9, 65.1, 85.4, 105.6, 125.8, 146.1 and 163.3 ng/mL respectively.

The results of the linear regression analyses are summarized below:

$$y = 1.0222x + 1.3862, R^2 = 0.998$$



# Traceability

## DEN170019 (LC-MS)

The assigned 25-hydroxyvitamin D of the Vitamin D 200M Assay for the Topaz System is certified with the CDC Vitamin D Standardization-Certification Program (VDSCP)

## K162298 (Immunoassay)

The assay is standardized through the Vitamin D Standardization Program (VDSP).

# Analytical Sensitivity (CLSI EP17-A2)



## DEN170019 (LC-MS)

### LoQ/LLMI Only

The lower limit of the measuring interval (LLMI) for each lot was determined to be the lowest concentration of analyte that achieved both the **bias and precision goals (<20% bias and <20% CV)**

## K162298 (Immunoassay)

### LoB, LoD, and LoQ

The Limit of Blank (LoB), Limit of Detection (LoD) and Limit of Quantitation (LoQ) studies were performed according to the CLSI EP-17-A2 guideline

LoQ was determined to be 5.0 ng/mL based on **total precision ( $\leq 20\%$ )** using all measurements observed on the low serum samples

# Analytical Specificity/Interference Testing/Cross-Reactivity (CLSI EP07-A2)



## DEN170019 (LC-MS)

The design of the analytical specificity study was based on CLSI EP07-A2 guideline.

## K162298 (Immunoassay)

Interference testing was performed according to CLSI EP07-A2

Similar endogenous and exogenous interferents and cross-reactants were tested for both devices, including Vitamin D metabolites.

More interferents were tested in the LC-MS assay to demonstrate that non-Vitamin D metabolites with similar m/z did not interfere with the output of the device



# Method Comparison (CLSI EP09-A3)



(This is different for LC-MS vs Immunoassay for Vitamin D)

## DEN170019 (LC-MS)

The sponsor performed an accuracy study to the CDC Vitamin D Standardization-Certification Program (VDSCP).

	Passing-Bablok regression results
n	118
Slope	1.008
Intercept	-0.3949
Correlation Coefficient	0.991
Range (ng/mL)	5.6 – 133 ng/mL

## From the Special Controls for DEN170019:

“The device must have initial and annual standardization verification by a certifying vitamin D standardization organization deemed acceptable by FDA.”

## K162298 (Immunoassay)

A method comparison study was performed in accordance to CLSI EP09-A3 to evaluate the accuracy between LOCI Vitamin D Total Assay on the Dimension EXL with LOCI® Module system against the reference method procedure (RMP), University of Ghent’s ID-LC-MS/MS. The results were analyzed by standard Passing Bablok regression

n	Sample Range (ng/mL)	Slope (95%CI)	Intercept (95%CI)	r-Value
163	5.2 - 126.1	1.06 (1.01 to 1.12)	0.4 (-0.54 to 1.42)	0.977

# Summary

1. FDA has regulatory authority to review IVDs before they are marketed in the U.S.
2. I gave an overview of the regulatory process for FDA review of IVDs
3. Analytical performance testing for most analytical studies in Vitamin D submissions are the same for LC-MS and immunoassay IVDs
  - A. Interference testing for LC-MS included unrelated metabolites with similar m/z to the Vitamin D analyte
  - B. LC-MS IVDs must have initial and annual standardization verification by a certifying vitamin D standardization organization deemed acceptable by FDA

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