



EUROPEAN MEDICINES AGENCY
SCIENCE MEDICINES HEALTH

<Date>

Request for advice on the orphan device status from the Expert Panels pursuant to MDCG 2024-10¹

¹ [MDCG 2024-10 Clinical evaluation of orphan medical devices](#)



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Guidance text

Guidance text is in green italics. You may print a copy of this template with the drafting note, then delete them all in one go:

Click on Ctrl-Alt-Shift-S to view the "styles" window. Select "Drafting notes (Agency)" and click on the icon on the right, chose "Select all XXX instances", press the "Delete" key on the keyboard.

Do not change or delete the titles and the numbering style. (Add "Not applicable" if necessary)

Suggested font: Verdana 9.

Paragraph tab: alignment: left, outline level: body text, indentation: 0, spacing before: 0pt and after: 7pt; line spacing: at least, at: 14pt.

I – General Information

1. Administrative Information

1.1. Information on the requester

Name:

Position:

Email:

Phone:

1.2. Information on the manufacturer

Name of the company:

Address:

Country:

[For EU/EEA manufacturers]

SME status*: Yes /No

*https://single-market-economy.ec.europa.eu/smes/sme-definition_en

1.3. Information on the authorised representative

[Mandatory for manufacturers outside of the EU/EEA and Turkey]

Name of the company:

Address:

Country:

1.4. Information on the notified body

[Only for late stage advice]

Name of the notified body:

Address:

Country:

Notified body number:

2. Information on the device

2.1. Device name

Name:

2.2. Risk class

Class III	<input type="checkbox"/>
Class IIb	<input type="checkbox"/>
Class IIa	<input type="checkbox"/>
Class I	<input type="checkbox"/>

2.3. Risk class justification

[Please provide a justification for the risk class chosen, including the applicable classification rule.]

2.4. Type (European Medical Device Nomenclature -EMDN* level 3)

[Please indicate the EMDN type that applies to the device (multiple choices are possible)]

[*<https://webgate.ec.europa.eu/dyna2/emdn/>]

2.5. Clinical area

[Please indicate the relevant clinical area (multiple choices are possible)]

<input type="checkbox"/>	Orthopaedics, traumatology, rehabilitation, rheumatology
<input type="checkbox"/>	Circulatory system
<input type="checkbox"/>	Neurology
<input type="checkbox"/>	Respiratory system, anaesthesiology, intensive care

<input type="checkbox"/>	Endocrinology and diabetes
<input type="checkbox"/>	General and plastic surgery and dentistry
<input type="checkbox"/>	Obstetrics and gynaecology, including reproductive medicine
<input type="checkbox"/>	Gastroenterology and hepatology
<input type="checkbox"/>	Nephrology and urology
<input type="checkbox"/>	Ophthalmology
<input type="checkbox"/>	Other: []

2.6. Development history and regulatory status

[Please provide an up-to-date brief overview of the device development. Describe the worldwide regulatory status of the device. Indicate if scientific advice has been previously requested from other regulatory authorities.]

3. Additional information on the device

3.1. Device for treating medical conditions that are life threatening or cause permanent impairment of a body function

Yes / No

If Yes, please provide a justification:

[Outline the main features of the disease(s)/condition(s) and the current standard medical treatments or diagnosis, referring to relevant publications or other sources.]

3.2. Device intended for children

Yes / No

If Yes, please provide a justification:

[Describe the target population of patients.]

3.3. Novel device with a possible major clinical benefit

Yes / **No**

If Yes, please provide a justification:

[Provide an assessment of the novelty of the device and the expected clinical impact resulting from that novelty.]

II – Application – Orphan device status criteria

A. Description of the proposed orphan condition/ subpopulation

A1. Details of the proposed orphan condition (disease)

- **Name of condition/disease**
<Text>
- **Aetiology**
<Text>
- **Specific pathophysiological, histopathological, clinical characteristics**
<Text>
- **Diagnosis and symptoms**
<Text>

[This section should be completed if the device is intended to benefit patients in the treatment, diagnosis, or prevention of a disease or condition that presents in not more than 12,000 individuals in the European Union (EU) per year. The applicant should provide a clear description of this disease/condition. This description should be based on published references.]

A2. Details of the orphan subpopulation of a non-orphan condition

- **Description of the non-orphan condition**
<Text>
- **Description of the orphan subpopulation of the non-orphan condition**
<Text>
- **Justification on why the device is only intended for use within the subpopulation and not in the wider non-orphan condition, including device and patient specific factors**
<Text>

*[This section should be completed if the device is intended to be used to benefit patients in the treatment, diagnosis, or prevention of a disease or condition that presents in a clinically valid patient **sub-population** (of not more than 12,000 individuals in the EU per year - orphan subpopulation) within a disease or condition with an annual incidence of more than 12,000 in the EU.]*

The applicant should provide information to justify the existence of a valid and medically plausible orphan subpopulation. This can include providing a scientific rationale for why the device is only intended for use within that subpopulation and why the intended use would not be appropriate for the wider population with a non-rare disease/condition. Factors to consider when determining if a valid and medically plausible orphan subpopulation exists include device-specific factors such as mechanism of action, and patient-specific factors such as age/anatomy. Other patient factors may demonstrate a valid orphan subpopulation, for example, the benefit/risk of using the device may only be positive in a subpopulation of patients who are refractory to, or not medically suitable for, alternative treatments. Literature references and clinical expert statements should be provided, where available, to substantiate the justification.

Arbitrary limitations of use to only a subpopulation of patients to meet the incidence criteria will not be considered sufficient, as it could be clinically appropriate to use the same device and therefore generate more clinical data in the remaining larger population with the non-rare disease or condition.]

B. Epidemiology of the condition

B1. Incidence of the orphan condition/ subpopulation in the European Union

<Text>

[The applicant should provide comprehensive justification that the device is specifically intended to benefit patients in the treatment, diagnosis, or prevention of a disease or condition that presents in not more than 12,000 individuals in the EU per year. This can be either a claimed orphan condition (if section A1 has been completed) or a claimed orphan subpopulation (if section A2 has been completed).]

Documentation in support of the epidemiological based criterion by way of population incidence estimates should be provided. It is acknowledged that documentation to support the incidence criteria will be limited in some cases. Authoritative references (e.g., from peer-reviewed medical literature and/or public health statistics) relevant

to the EU population should be provided where available. The manufacturer may consider including additional supporting data for incidence estimates, for example from national level data, health service level data or from independent clinical experts or medical society consensus statements. Where data available to the manufacturer are limited, for example to national or regional level only, the orphan device status may be justified by providing an EU population incidence based on extrapolation and considering relevant factors including heterogeneity of the incidence across the EU. A clear description of the assumptions and limitations of the extrapolation will need to be provided.]

C. Description of the device

C1. Description of the device, principles of operation, mode of action

<Text>

C2. Proposed indication/ intended purpose

<Text>

C3. Justification of the use of the device in the proposed orphan condition/ subpopulation

<Text>

[The applicant should provide a description of the device (C1), its intended purpose (C2), and a scientific rationale as to why the proposed intended use is considered necessary or important in the context of the management of the orphan population (or orphan subpopulation) in question, with reference to device-specific factors (C3).]

C4. In cases where the device also has another intended purpose/indication in larger patient populations, justification that the intended purpose in the orphan population/ subpopulation is sufficiently different to the other intended purpose/indications

<Text>

[It is noted that a device may have a specific intended purpose/indication for an orphan population, or orphan subpopulation, where the device also has another intended purpose/indication in larger non-orphan patient populations. In such cases, where duly justified, the principles outlined in the MDCG 2024-10 guidance (https://health.ec.europa.eu/document/download/daa1fc59-9d2c-4e82-878e-d6fdf12ecd1a_en?filename=mdcg_2024-10_en.pdf) for demonstrating sufficient clinical evidence may be applicable to these devices, for the purposes of supporting their orphan indication only, and without prejudice to the clinical evaluation requirements for other intended purpose/indications in view of their certification in accordance with the MDR. In such cases the manufacturer should justify that the intended purpose in the orphan population, or orphan subpopulation, is sufficiently different to the other intended larger non-orphan population purpose/indications, such that the clinical evidence for the non-orphan intended purpose/indication(s) is not applicable and there is an authentic challenge to generating clinical data for the orphan indication. In these cases, the relevant information should be added in section C4.]

D. Alternative options for diagnosis, prevention or treatment of the condition/ subpopulation

D1. Details of the current state of the art and any existing alternative diagnosis, prevention or treatment methods

<Text>

D2. Justification as to why the existing methods are insufficient

<Text>

D3. Justification of expected clinical benefit compared to alternative existing methods or state of the art

<Text>

[A comprehensive description of the current state of the art and alternative therapies (if any, including the relative availability of alternatives) should be provided in this section (D1).

The applicant should justify why the existing methods are insufficient (D2) and/or why the device would provide an expected clinical benefit compared to available alternatives or state of the art for the treatment, diagnosis or prevention of the disease/condition (D3).

Information from medical literature (for example clinical treatment guidelines) or consensus statements from clinical experts or medical societies, which may include patient representative groups, may be used to support the justification of the expected clinical benefit, for example, where they detail relevant gaps in clinical management of the disease in the existing state of the art and why the therapeutic option to be provided by the proposed orphan device is needed. Relevant non-clinical and preliminary clinical data on the device, and/or data on similar devices, should be used in support of a statement that the device will provide an expected clinical benefit.]

E. References

[For all sections of this document, the manufacturer should provide references to support their claims. Published authoritative references (for example, from peer-reviewed medical literature) are preferred where available.]

III - List of Abbreviations

[Please provide a list of abbreviations used in this document, if applicable]