

# SLOVENSKI STANDARD

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Biological evaluation of medical devices - Part 10: Tests for irritation and delayed-type hypersensitivity (ISO 10993-10:2002, including Amd 1:2006)

**iTeh STANDARD PREVIEW**

Biologische Beurteilung von Medizinprodukten - Teil 10: Prüfung auf Irritation und Allergien vom verzögerten Typ (ISO 10993-10:2002, einschließlich Änderung 1:2006)

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Evaluation biologique des dispositifs médicaux - Partie 10 : Essais d'irritation et d'hypersensibilité retardée (ISO 10993-10:2002, Amd 1:2006 inclus)

**Ta slovenski standard je istoveten z: EN ISO 10993-10:2009**

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EUROPEAN STANDARD  
NORME EUROPÉENNE  
EUROPÄISCHE NORM

**EN ISO 10993-10**

April 2009

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Supersedes EN ISO 10993-10:2002

English Version

**Biological evaluation of medical devices - Part 10: Tests for  
irritation and delayed-type hypersensitivity (ISO 10993-10:2002,  
including Amd 1:2006)**

Evaluation biologique des dispositifs médicaux - Partie 10 :  
Essais d'irritation et d'hypersensibilité retardée (ISO 10993-  
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Biologische Beurteilung von Medizinprodukten - Teil 10:  
Prüfung auf Irritation und Allergien vom verzögerten Typ  
(ISO 10993-10:2002, einschließlich Änderung 1:2006)

This European Standard was approved by CEN on 12 April 2009.

CEN members are bound to comply with the CEN/CENELEC Internal Regulations which stipulate the conditions for giving this European Standard the status of a national standard without any alteration. Up-to-date lists and bibliographical references concerning such national standards may be obtained on application to the CEN Management Centre or to any CEN member.

This European Standard exists in three official versions (English, French, German). A version in any other language made by translation under the responsibility of a CEN member into its own language and notified to the CEN Management Centre has the same status as the official versions.

CEN members are the national standards bodies of Austria, Belgium, Bulgaria, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland and United Kingdom.

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## Foreword

The text of ISO 10993-10:2002, including Amd 1:2006 has been prepared by Technical Committee ISO/TC 194 "Biological evaluation of medical devices" of the International Organization for Standardization (ISO) and has been taken over as EN ISO 10993-10:2009 by Technical Committee CEN/TC 206 "Biological evaluation of medical devices" the secretariat of which is held by NEN.

This European Standard shall be given the status of a national standard, either by publication of an identical text or by endorsement, at the latest by October 2009, and conflicting national standards shall be withdrawn at the latest by March 2010.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN [and/or CENELEC] shall not be held responsible for identifying any or all such patent rights.

This document supersedes EN ISO 10993-10:2002.

This document has been prepared under a mandate given to CEN by the European Commission and the European Free Trade Association, and supports essential requirements of EU Directives 93/42/EEC on Medical Devices and 90/385/EEC on Active Implantable Medical Devices.

For relationship with EU Directives, see informative Annex ZA and ZB, which is an integral part of this document.

According to the CEN/CENELEC Internal Regulations, the national standards organizations of the following countries are bound to implement this European Standard: Austria, Belgium, Bulgaria, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland and the United Kingdom.

## Endorsement notice

The text of ISO 10993-10:2002, including Amd 1:2006 has been approved by CEN as a EN ISO 10993-10:2009 without any modification.

## Annex ZA (informative)

### Relationship between this European Standard and the Essential Requirements of EU Directive 93/42/EEC on Medical Devices

This European Standard has been prepared under a mandate given to CEN by the European Commission and the European Free Trade Association to provide a means of conforming to Essential Requirements of the New Approach Directive 93/42/EEC on medical devices.

Once this standard is cited in the Official Journal of the European Communities under that Directive and has been implemented as a national standard in at least one Member State, compliance with the clauses of this standard given in table ZA confers, within the limits of the scope of this standard, a presumption of conformity with the corresponding Essential Requirements of that Directive and associated EFTA regulations.

**Table ZA — Correspondence between this European Standard and Directive 93/42/EEC on medical devices**

Clause(s)/sub-clause(s) of this EN	Essential Requirements (ERs) of Directive 93/42/EEC	Qualifying remarks/Notes
4, 5, 6, 7, 8 and annex A and B	Annex I: 7.1, 7.2, 7.5	

**WARNING —** Other requirements and other EU Directives may be applicable to the product(s) falling within the scope of this standard.

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## Annex ZB (informative)

### Relationship between this European Standard and the Essential Requirements of EU Directive 90/385/EEC on Active Implantable Medical Devices

This European Standard has been prepared under a mandate given to CEN by the European Commission and the European Free Trade Association to provide a means of conforming to Essential Requirements of the New Approach Directive 90/385/EEC on active implantable medical devices.

Once this standard is cited in the Official Journal of the European Communities under that Directive and has been implemented as a national standard in at least one Member State, compliance with the clauses of this standard given in table ZB confers, within the limits of the scope of this standard, a presumption of conformity with the corresponding Essential Requirements of that Directive and associated EFTA regulations.

**Table ZB — Correspondence between this European Standard and Directive 90/385/EEC on active implantable medical devices**

Clause(s)/sub-clause(s) of this EN	Essential Requirements (ERs) of Directive 90/385/EEC	Qualifying remarks/Notes
4, 5, 6, 7, 8 and annex A and B	Annex II: 9	

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# INTERNATIONAL STANDARD

**ISO**  
**10993-10**

Second edition  
2002-09-01

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## Biological evaluation of medical devices — Part 10: Tests for irritation and delayed-type hypersensitivity

*Évaluation biologique des dispositifs médicaux —  
Partie 10: Essais d'irritation et d'hypersensibilité retardée*  
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## ISO 10993-10:2002(E)

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## ISO 10993-10:2002(E)

## Foreword

ISO (the International Organization for Standardization) is a worldwide federation of national standards bodies (ISO member bodies). The work of preparing International Standards is normally carried out through ISO technical committees. Each member body interested in a subject for which a technical committee has been established has the right to be represented on that committee. International organizations, governmental and non-governmental, in liaison with ISO, also take part in the work. ISO collaborates closely with the International Electrotechnical Commission (IEC) on all matters of electrotechnical standardization.

International Standards are drafted in accordance with the rules given in the ISO/IEC Directives, Part 3.

The main task of technical committees is to prepare International Standards. Draft International Standards adopted by the technical committees are circulated to the member bodies for voting. Publication as an International Standard requires approval by at least 75 % of the member bodies casting a vote.

Attention is drawn to the possibility that some of the elements of this part of ISO 10993 may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights.

ISO 10993-10 was prepared by Technical Committee ISO/TC 194, *Biological evaluation of medical devices*.

This second edition cancels and replaces the first edition (ISO 10993-10:1995), which has been technically revised.

ISO 10993 consists of the following parts, under the general title *Biological evaluation of medical devices*:

- *Part 1: Evaluation and testing*
- *Part 2: Animal welfare requirements*
- *Part 3: Tests for genotoxicity, carcinogenicity and reproductive toxicity*
- *Part 4: Selection of tests for interactions with blood*
- *Part 5: Tests for in vitro cytotoxicity*
- *Part 6: Tests for local effects after implantation*
- *Part 7: Ethylene oxide sterilization residuals*
- *Part 8: Selection and qualification of reference materials for biological tests*
- *Part 9: Framework for identification and quantification of potential degradation products*
- *Part 10: Tests for irritation and delayed-type hypersensitivity*
- *Part 11: Tests for systemic toxicity*
- *Part 12: Sample preparation and reference materials*
- *Part 13: Identification and quantification of degradation products from polymeric medical devices*
- *Part 14: Identification and quantification of degradation products from ceramics*
- *Part 15: Identification and quantification of degradation products from metals and alloys*

- *Part 16: Toxicokinetic study design for degradation products and leachables*
- *Part 17: Establishment of allowable limits for leachable substances*
- *Part 18: Chemical characterization of materials*

Future parts will deal with other relevant aspects of biological testing.

This part of ISO 10993 is a harmonization of numerous standards and guidelines, including BS 5736, OECD Guidelines, U.S. Pharmacopoeia and the European Pharmacopoeia. It is intended to be the basic document for the selection and conduct of tests enabling evaluation of irritation and dermal sensitization responses relevant to safety of medical materials and devices.

Annex A forms a normative part of this part of ISO 10993. Annexes B and C are for information only.

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## ISO 10993-10:2002(E)

## Introduction

This part of ISO 10993 assesses possible contact hazards from chemicals released from medical devices that may produce skin and mucosal irritation, eye irritation and delayed contact hypersensitivity

Some materials that are included in medical devices have been tested, and their skin or mucosal irritation or sensitization potential has been documented. Other materials and their chemical components have not been tested and may induce adverse effects when in contact with biological tissues. The manufacturer is thus obliged to evaluate each device for potential adverse effects prior to marketing.

Traditionally, small animal tests are performed prior to testing on humans to help predict human response. More recently, *in vitro* tests as well as human tests have been added as alternatives. Despite progress and considerable effort in this direction, a review of findings suggests that currently no satisfactory *in vitro* test has been devised to eliminate the requirement for *in vivo* testing. Where appropriate, the preliminary use of *in vitro* methods is encouraged for screening purposes prior to animal testing. In order to reduce the number of animals used, this part of ISO 10993 presents a step-wise approach, with review and analysis of test results at each stage. An animal test is usually required prior to human testing.

It is intended that these studies be conducted using Good Laboratory Practice and comply with regulations related to animal welfare. Statistical analysis of data is recommended and should be used whenever appropriate.

The tests included in this part of ISO 10993 are important tools for the development of safe products, provided that these are executed and interpreted by trained personnel.

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# Biological evaluation of medical devices —

## Part 10:

## Tests for irritation and delayed-type hypersensitivity

### 1 Scope

This part of ISO 10993 describes the procedure for the assessment of medical devices and their constituent materials with regard to their potential to produce irritation and delayed-type hypersensitivity.

This part of ISO 10993 includes

- a) pretest considerations,
- b) details of the test procedures, and
- c) key factors for the interpretation of the results.

Instructions are given in annex A for the preparation of materials specifically in relation to the above tests.

Supplementary tests which are required specifically for devices used intradermally in the ocular, oral, rectal, penile and vaginal areas are given in annex B.

### 2 Normative references

The following normative documents contain provisions which, through reference in this text, constitute provisions of this part of ISO 10993. For dated references, subsequent amendments to, or revisions of, any of these publications do not apply. However, parties to agreements based on this part of ISO 10993 are encouraged to investigate the possibility of applying the most recent editions of the normative documents indicated below. For undated references, the latest edition of the normative document referred to applies. Members of ISO and IEC maintain registers of currently valid International Standards.

ISO 10993-1:1997, *Biological evaluation of medical devices — Part 1: Evaluation and testing*

ISO 10993-2, *Biological evaluation of medical devices — Part 2: Animal welfare requirements*

ISO 10993-9, *Biological evaluation of medical devices — Part 9: Framework for identification and quantification of potential degradation products*

ISO 10993-12, *Biological evaluation of medical devices — Part 12: Sample preparation and reference materials*

ISO 10993-13, *Biological evaluation of medical devices — Part 13: Identification and quantification of degradation products from polymeric medical devices*

ISO 10993-14, *Biological evaluation of medical devices — Part 14: Identification and quantification of degradation products from ceramics*

ISO 10993-15, *Biological evaluation of medical devices — Part 15: Identification and quantification of degradation products from metals and alloys*

ISO 10993-18, *Biological evaluation of medical devices — Part 18: Chemical characterization of materials*