



SLOVENSKI STANDARD SIST EN ISO 5840-1:2015

01-december-2015

Vsadki (implantati) za srce in ožilje - Proteze za srčno zaklopko - 1. del: Splošne zahteve (ISO 5840-1:2015)

Cardiovascular implants - Cardiac valve prostheses - Part 1: General requirements (ISO 5840-1:2015)

Herz- und Gefäßimplantate - Herzklappenprothesen - Teil 1: Allgemeine Anforderungen (ISO 5840-1:2015)

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Implants cardiovasculaires - Prothèses valvulaires - Partie 1: Exigences générales (ISO 5840-1:2015)

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ICS:

11.040.40	Implantanti za kirurgijo, protetiko in ortetiko	Implants for surgery, prosthetics and orthotics
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EUROPEAN STANDARD

EN ISO 5840-1

NORME EUROPÉENNE

EUROPÄISCHE NORM

September 2015

ICS 11.040.40

English Version

Cardiovascular implants - Cardiac valve prostheses - Part 1: General requirements (ISO 5840-1:2015)

Implants cardiovasculaires - Prothèses valvulaires -
Partie 1: Exigences générales (ISO 5840-1:2015)

Herz- und Gefäßimplantate - Herzklappenprothesen -
Teil 1: Allgemeine Anforderungen (ISO 5840-1:2015)

This European Standard was approved by CEN on 10 July 2015.

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-CENELEC 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-CENELEC Management Centre has the same status as the official versions.

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

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COMITÉ EUROPÉEN DE NORMALISATION
EUROPÄISCHES KOMITEE FÜR NORMUNG

CEN-CENELEC Management Centre: Avenue Marnix 17, B-1000 Brussels

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European foreword

This document (EN ISO 5840-1:2015) has been prepared by Technical Committee ISO/TC 150 “Implants for surgery” in collaboration with Technical Committee CEN/TC 285 “Non-active surgical implants” the secretariat of which is held by DIN.

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 March 2016, and conflicting national standards shall be withdrawn at the latest by March 2016.

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 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 Directive(s).

For relationship with EU Directive(s), see informative Annex ZA, 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, Croatia, Cyprus, Czech Republic, Denmark, Estonia, Finland, Former Yugoslav Republic of Macedonia, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Romania, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom.

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Endorsement notice

The text of ISO 5840-1:2015 has been approved by CEN as EN ISO 5840-1:2015 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 Union 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.1 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.1 — Correspondence between this European Standard and Directive 93/42/EEC on medical devices

Clause(s)/sub-clause(s) of this European Standard	Essential Requirements (ERs) of Directive 93/42/EEC	Qualifying remarks/Notes
5, 6, 7	7.1	
5, 6.2.4, 6.4, 6.5	7.2	
6.2.2, 6.2.3, 7.3	7.3	
6.5	7.5	
6.2.2, 6.5	7.6	
5, 6.4, 6.5	8.1	
6.2.4, 6.4	8.3	
6.2.4	8.4	
6.4	8.5	
6.2.4	8.6	
6.2.4	8.7	
6.2.1, 6.3, 7	9.1	
6.2.1, 6.3, 6.4, 6.5, 7	9.2, 1. indent	
6.4, 6.5, 7	9.2, 2. indent	
6.4, 6.5, 7	9.2, 3. indent	
6.2.1, 6.3, 6.4, 6.5, 7	9.2, 4. indent	
6.2.4	13	

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

INTERNATIONAL
STANDARD

ISO
5840-1

First edition
2015-09-15

**Cardiovascular implants — Cardiac
valve prostheses —**

**Part 1:
General requirements**

Implants cardiovasculaires — Prothèses valvulaires —

Partie 1: Exigences générales
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ISO 5840-1:2015(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.

The procedures used to develop this document and those intended for its further maintenance are described in the ISO/IEC Directives, Part 1. In particular the different approval criteria needed for the different types of ISO documents should be noted. This document was drafted in accordance with the editorial rules of the ISO/IEC Directives, Part 2 (see www.iso.org/directives).

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. ISO shall not be held responsible for identifying any or all such patent rights. Details of any patent rights identified during the development of the document will be in the Introduction and/or on the ISO list of patent declarations received (see www.iso.org/patents).

Any trade name used in this document is information given for the convenience of users and does not constitute an endorsement.

For an explanation on the meaning of ISO specific terms and expressions related to conformity assessment, as well as information about ISO's adherence to the WTO principles in the Technical Barriers to Trade (TBT) see the following URL: [Foreword - Supplementary Information](http://standards.iteh.ai)

The committee responsible for this document is ISO/TC 150, *Implants for surgery*, Subcommittee SC 2, *Cardiovascular implants and extracorporeal systems*.

This first edition of ISO 5840-1, together with ISO 5840-2 and ISO 5840-3, cancels and replaces ISO 5840:2005, which has been technically revised.

ISO 5840 consists of the following parts, under the general title *Cardiovascular implants — Cardiac valve prostheses*:

- *Part 1: General requirements*
- *Part 2: Surgically implanted heart valve substitutes*
- *Part 3: Heart valve substitutes implanted by transcatheter techniques*

Introduction

There is, as yet, no heart valve substitute which can be regarded as ideal.

The ISO 5840-series has been prepared by a group well aware of the issues associated with heart valve substitutes and their development. In several areas, the provisions of the ISO 5840-series deliberately have not been specified to encourage development and innovation. It does specify the types of tests, test methods, and/or requirements for test apparatus and requires documentation of test methods and results. The areas with which the ISO 5840-series are concerned are those which will ensure that associated risks to the patient and other users of the device have been adequately mitigated, facilitate quality assurance, aid the clinician in choosing a heart valve substitute, and ensure that the device will be presented at the operating table in convenient form. Emphasis has been placed on specifying types of *in vitro* testing, on preclinical *in vivo* and clinical evaluations, on reporting of all *in vitro*, preclinical *in vivo*, and clinical evaluations, and on the labelling and packaging of the device. Such a process involving *in vitro*, preclinical *in vivo*, and clinical evaluations is intended to clarify the required procedures prior to market release and to enable prompt identification and management of any subsequent problems.

With regard to *in vitro* testing and reporting, apart from basic material testing for mechanical, physical, chemical, and biocompatibility characteristics, the ISO 5840-series also covers important hydrodynamic and durability characteristics of heart valve substitutes. The ISO 5840-series does not specify exact test methods for hydrodynamic and durability testing, but it offers guidelines for the test apparatus.

The ISO 5840-series is incomplete in several areas. It is intended to be revised, updated, and/or amended as knowledge and techniques in heart valve substitute technology improve.

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Cardiovascular implants — Cardiac valve prostheses —

Part 1: General requirements

1 Scope

This part of ISO 5840 is applicable to heart valve substitutes intended for human implantation and provides general requirements. Subsequent parts of the ISO 5840-series provide specific requirements.

This part of ISO 5840 is applicable to both newly developed and modified heart valve substitutes and to the accessories, packaging, and labelling required for their implantation and for determining the appropriate size of the heart valve substitute to be implanted.

This part of ISO 5840 outlines an approach for qualifying the design and manufacture of a heart valve substitute through risk management. The selection of appropriate qualification tests and methods are derived from the risk assessment. The tests may include those to assess the physical, chemical, biological, and mechanical properties of heart valve substitutes and of their materials and components. The tests may also include those for preclinical *in vivo* evaluation and clinical evaluation of the finished heart valve substitute.

This part of ISO 5840 defines operational conditions for heart valve substitutes.

This part of ISO 5840 excludes homografts.

NOTE A rationale for the provisions of this part of ISO 5840 is given in Annex A.

2 Normative references

The following documents, in whole or in part, are normatively referenced in this document and are indispensable for its application. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies.

ISO 5840-2, *Cardiovascular implants — Cardiac valve prostheses — Part 2: Surgically implanted heart valve substitutes*

ISO 5840-3, *Cardiovascular implants — Cardiac valve prostheses — Part 3: Heart valve substitutes implanted by transcatheter techniques*

ISO 11135, *Sterilization of health-care products — Ethylene oxide — Requirements for the development, validation and routine control of a sterilization process for medical devices*

ISO 11137 (all parts), *Sterilization of health care products — Radiation*

ISO 11607 (all parts), *Packaging for terminally sterilized medical devices*

ISO 14155, *Clinical investigation of medical devices for human subjects — Good clinical practice*

ISO 14160, *Sterilization of health care products — Liquid chemical sterilizing agents for single-use medical devices utilizing animal tissues and their derivatives — Requirements for characterization, development, validation and routine control of a sterilization process for medical devices*

ISO 14630:2012, *Non-active surgical implants — General requirements*

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ISO 14937, *Sterilization of health care products — General requirements for characterization of a sterilizing agent and the development, validation and routine control of a sterilization process for medical devices*

ISO 14971, *Medical devices — Application of risk management to medical devices*

ISO 17665 (all parts), *Sterilization of health care products — Moist heat*

3 Terms and definitions

For the purposes of this document, the following terms and definitions apply.

3.1**accessories**

device-specific tools that are required to assist in the implantation of the *heart valve substitute* (3.28)

3.2**adverse event****AE**

untoward medical occurrence in a study subject which does not necessarily have to have a causal relationship with study treatment

Note 1 to entry: An AE can be an unfavourable and unintended sign (including an abnormal laboratory finding), symptom, or disease, temporary or permanent, whether or not related to the prosthetic valve implantation or procedure.

3.3**actuarial methods**

statistical technique for calculating event rates over time

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Note 1 to entry: Standard actuarial methods calculate the probability of freedom from events within pre-specified intervals of time. When the intervals approach zero width, the methods are called Kaplan-Meier methods.

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3.4**arterial end diastolic pressure**

minimum value of the arterial pressure during diastole

3.5**arterial peak systolic pressure**

maximum value of the arterial pressure during *systole* (3.63)

3.6**back pressure**

differential pressure applied across the valve during the closed phase

3.7**body surface area****BSA**

total surface area (m²) of the human body

Note 1 to entry: This can be calculated (Mosteller's formula) as the square root of the product of the weight in kg times the height in cm divided by 3 600 (see Reference [31]).

3.8**cardiac index**

cardiac output (3.9) (CO, L/min) divided by the *body surface area* (3.7) (BSA, m²) with units L/min/m²

3.9**cardiac output****CO**

stroke volume (3.59) times heart rate

3.10 closing volume

portion of the *regurgitant volume* (3.48) that is associated with the dynamics of valve closure during a single *cycle* (3.15)

Note 1 to entry: See [Figure 1](#).

3.11 coating

thin-film material that is applied to an element of a *heart valve system* (3.29) to modify its physical or chemical properties

3.12 compliance

relationship between change in diameter and change in pressure of a deformable tubular structure (e.g. valve annulus, aorta, conduit) defined in this part of ISO 5840 as

$$C = 100\% \times \frac{(r_2 - r_1) \times 100}{r_1 \times (p_2 - p_1)}$$

where

C is the compliance in units of % radial change/100 mmHg;

p_1 is the diastolic pressure, in mmHg;

p_2 is the systolic pressure, in mmHg;

r_1 is the inner radius at p_1 , in millimetres;

r_2 is the inner radius at p_2 , in millimetres.

Note 1 to entry: Reference ISO 25539-1.

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