

美国FDA医疗器械监管科学研究项目简介（第二部分：有源医疗器械和计算机模拟）

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摘要 目的：通过介绍美国FDA开展的医疗器械监管科学研究项目，为我国医疗器械监管科学研究提供参考。方法：通过翻译和整理美国FDA发布的各类文件资料和研究项目摘要，介绍其正在开展的监管科学研究项目。结果与结论：美国FDA与科研机构、临床机构、其他政府机构及产业界合作开展医疗器械监管科学研究，取得的研究成果用于确保医疗器械的安全性和有效性，并促进医疗器械企业创新和高质量发展。在有源医疗器械领域，开展的研究项目有关于产品性能的研究，如电磁兼容性、磁共振成像安全、无线共存等；有计算机模拟和人工智能方面的研究，如人机交互、数字病理学评估、虚拟影像临床试验等；也有针对先进技术的研究，如患者生理信号监控技术、个性化心脏疗法等。

关键词：美国食品药品监督管理局；医疗器械；监管科学；研究项目；有源医疗器械；计算机模拟

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Introduction to the Research Project of US FDA Medical Device Regulatory Science (Part 2: Active Medical Devices and Computer Simulation)

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Abstract Objective: To introduce the research projects of medical device regulatory science conducted by US FDA in order to provide references for the research of medical device regulatory science in China. **Methods:** Through the translation and collation of some documents and research project abstracts issued by FDA, the ongoing scientific research projects on regulation were introduced. **Results and Conclusion:** FDA cooperates with scientific institutions, clinical institutions, other government agencies and industry to carry out research on medical device regulatory science. The research results are used to ensure the safety and effectiveness of medical devices and promote the development of high-quality and innovative medical devices. In the field of active medical devices, the research projects include research on product performance, such as electromagnetic compatibility, magnetic resonance imaging security, wireless coexistence, etc., and research on computer simulation and artificial intelligence, such as human-computer interaction, digital pathological evaluation, virtual image clinical trial, etc.

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Researches on advanced technologies, such as patient monitoring technology, personalized heart therapy, etc., are also involved.

Keywords: FDA; medical devices; regulatory science; research projects; active medical devices; computer simulation

在FDA中, 医疗器械和辐射健康中心(CDRH)是负责确保医疗器械安全性和有效性的部门。CDRH依据当前的临床需求和前沿研究, 在口腔科、骨科、心血管科、神经内科、放射学、感染控制等20多个临床应用领域开展约150个研究项目, 利用这些研究成果, 能够有利于患者使用到高质量的、安全有效的医疗器械。

本研究翻译和整理了美国FDA发布的各类文件资料和研究项目摘要, 详细梳理其正在开展的监管科学研究项目。同时将其文件资料中所罗列的参考文献经过归纳整理后, 作为本研究参考文献, 以便对各研究项目进行更深入的了解。目前在CDRH公布的专题研究项目中, 有源医疗器械领域开展的研究项目有关于产品性能的研究, 如电磁兼容性、磁共振成像安全、无线共存等; 有计算机模拟和人工智能方面的研究, 如人机交互、数字病理学评估、虚拟影像临床试验等; 也有针对先进技术的研究, 如患者生理信号监控技术、个性化心脏疗法等。

1 患者生理信号监控技术

智能分析、自动化和交互技术等技术正越来越多地应用于医疗电子产品中, 这使得多个生理参数信息能够通过高级的监测算法更好地监测、检测和预测疾病, 同时降低报错率; 它还可以用来开发监控生理参数的医疗器械, 该器械可跟踪患者的生命体征并在检测到潜在的风险状况时自动调整治疗方案或实施安全措施联动(例如通过输液泵)。这些先进的技术可以给患者护理带来益处, 但也对医疗器械的安全可靠性设计和临床有效性的监管提出了挑战。

目前, 该项目研究的主题主要包括:

- (1) 开发用于患者生理信号监测的高级算法及其性能评估方法^[1];
- (2) 研究从生理信号中提取的生物标记物如何反映疾病状况^[2-5];
- (3) 评估用作生理信号监测与控制的传感器^[6];
- (4) 评估用于测试生理信号监测与控制的医疗器械的系统计算模型;

(5) 将计算模型与检测方法相结合, 对医疗器械进行实际测试;

(6) 调查研究平台和工程方法, 探索医疗器械设计和使用中日益复杂的安全风险^[7];

(7) 将系统工程分析方法应用于支持互操作系统的医疗平台^[8-9]。

2 电磁兼容性(EMC)

有源医疗器械可能会受到一系列电磁干扰的影响, 从而引发电磁兼容风险或危害。因此需要通过合理的设计、测试和应用, 使有源医疗器械可以在预期使用的电磁环境中正常运行。医疗器械的电磁兼容性(EMC)本质上与药敏性相反, 该器械要求不会发出影响附近其他医疗设备的电磁能, 同时对使用环境中的电磁骚扰有较强的抗干扰能力。FDA对EMC的研究由来已久, 并且一直处于领先地位, 在许多活跃的医疗器械领域开展了研究和测试, 包括非植入医疗器械或组件^[10], 以及心脏起搏器、心脏复律除颤器、神经刺激装置(如脑深部刺激器)等植入医疗器械^[11]。研究还包括检查常见的射频发射器(如RFID)、安全系统(如防盗系统、金属探测器、人体扫描仪)对有源器械产生电磁干扰的可能性。研究的成果应用于制定相关的标准及指导文件, 以进一步评估医疗器械的安全性和有效性。

该研究实验室还与运输安全部门合作, 对采用新一代毫米波成像技术的人员安检系统可能对佩戴有医疗电子设备的乘客造成的潜在电磁兼容性风险进行分析和评估^[12]。

3 电磁剂量学与电磁建模

电磁剂量学的研究可以提高人们对电磁场(EM)与人体或其他物体(例如植入心脏的起搏器)之间复杂相互作用的认识, 而电磁建模主要结合人体解剖学上的计算模型和实验测量数据, 建立处于不同电磁场下的人体电磁模型^[13-14]。两项研究工作相结合, 应用于以下几个具有临床意义的领域:

- (1) 磁共振成像(MRI)的安全性^[15-25];

(2) 评估透热疗法和机场毫米波源(例如手机和广播电视塔)产生的电磁能;

(3) 可植入患者的无线技术效果评价^[26-27]。

这些研究成果可以为监管部门提供支持,应用于制定相关指导文件,广泛用于医疗器械的安全性和有效性评估。

4 磁共振成像(MRI)安全

磁共振成像(MRI)是一种广泛使用的诊断方式,也被认为是一种非常安全的方法,但是在扫描中使用的强电磁场有可能对患者造成伤害。此外,由于植入器械与MRI扫描中的电磁场会产生相互作用,也催生了磁共振安全领域新的焦点问题。该研究项目组主要研究的领域包括:

(1) 通过电磁建模和实验室测量结合的方法研究MRI导致的能量沉积和发热分析^[15-17];

(2) 回顾性评估和比较测试数据以了解被动式植入物的MRI安全性^[18-20];

(3) 分析主动式植入器械(如深部脑刺激器和起搏器)的MRI安全性和有效性^[21-22];

(4) 分析磁共振成像中梯度诱导加热和非预期神经刺激对患者安全性的影响^[23];

(5) 研究热剂量的生理反应(脑灌注成像)^[24];

(6) 开发硅胶乳房植入物的标准化MRI方法^[25]。

5 无线共存

越来越多的无线通信技术应用到医疗器械当中,FDA发布了《医疗器械中的RF无线技术指南》(Radio Frequency Wireless Technology in Medical Devices—Guidance for Industry and Food and Drug Administration Staff),其中提出的关键问题就是无线共存。无线共存是指一个系统在给定的共享环境中执行任务的能力,其中执行任务的其他系统可能会或可能不使用相同的规则,在非许可频段中运行的无线通信的可靠性令人担忧,并且可能会受到射频的干扰。该研究组正在努力研究适当的测试方法,以解决无线共存问题,促进医疗器械中无线技术的创新使用。该项目主要的研究内容包括:

(1) 开发可用于监管部门对无线医疗器械进行评估的方法和工具^[28-31];

(2) 与相关监管部门、研究机构、生产企业合作,推进采用无线通信技术的医疗器械的创新发展;

(3) 探索无线和信息技术在医疗中的新应用。

6 软件系统的验证

对于需要和计算机一起使用的任何医疗器械和系统,软件都是一个重要因素^[32]。医疗器械系统中使用的软件的质量,需要在上市前以及上市后持续进行评估,评估软件质量的能力取决于质量指标的建立。通过建立软件系统的质量指标,可以确保医疗器械在使用过程中的稳定性以及器械按照预期运行的可能性。要建立软件质量指标,通常是基于两方面的研究:对开发过程以及运行设计的测量。

该研究组主要的研究项目:

(1) 基于工程流程的模型的研究^[33](例如:建模的要求、模型运行的测试);

(2) 使用数学方法进行软件安全性和可靠性的设计分析(例如:型式化设计要求和危害分析、模型检查);

(3) 软件程序的验证和取证^[34](例如:模型驱动测试、架构重新设计);

(4) 用于软件评估的测试案例和程序;

(5) 人机界面的研究^[35];

(6) 交互性的医疗器械;

(7) 人体传感器网络^[36];

(8) 基于移动应用程序的控制系统。

对于软件程序的验证和研究是跨领域的,即适用于所有使用软件的医疗器械和系统,目前FDA已开发了一些程序平台来促进这项研究(如开放式通用输液泵测试平台^[37-39])。

7 人机交互

人机交互是新兴的医疗器械技术,该技术逐步应用于神经学、物理治疗、骨科、外科手术等领域,开发用于监测和建模的各种先进医疗器械及功能,包括3D打印功能、运动和受力采集技术、计算机建模和仿真工具^[40-41]、肌肉监测、脑部监测和眼动追踪系统^[42]等。该研究项目旨在通过研究现有的和新兴的人机交互技术,解决影响医疗器械可用性的认知因素和其他人为因素,从而推进监管科学的发展。

当前该项目研究的领域包括:

(1) 新一代上肢假肢的测试方法开发^[43];

(2) 膝盖前交叉韧带(ACL)损伤易感性的性别建模和分析;

(3) 评估患者对创新修复技术的风险-受益意向^[44];

(4) 3D打印的患者匹配手术器械的人为因素干扰的评估;

(5) 收集真实世界数据以进行更大、更智能的开放式临床试验;

(6) 脑电生物标记物的群体变异性具有的潜在诊断应用。

8 神经系统器械

与神经系统直接接触的医疗器械正在成为包括麻痹、截肢、帕金森病、癫痫、脑外伤、类风湿性关节炎和失明在内的疾病的基本治疗和诊断手段。越来越多的新型神经学器械有可能扩大器械对神经系统的干预和治疗,以改善患者的健康状况。该研究项目关注最先进的技术和研究前沿,研究适用于中枢和周围神经系统器械的安全性和可靠性,为监管部门的科学监管以及确保患者能够快速使用安全有效的神经学器械提供技术支持。

当前研究的领域:

(1) 中枢神经系统器械的研究包括:

- a) 植入电极的长期可靠性评估^[45];
- b) 急性和长期神经系统的表征以及对植入的被动和主动神经装置的功能响应^[46-48];
- c) 评估光遗传学的长期安全性和可靠性;
- d) 啮齿动物模型诊断轻度颅脑损伤的新兴技术研究;
- e) 开发新型非侵入性诊断生物标记物以检测轻度脑外伤患者的脑损伤。

(2) 外周神经系统器械的研究包括:

- a) 开发测试平台以评估周围神经接口的性能和长期安全性^[49-51];
- b) 超声对神经调节的安全性和有效性的评估^[52];
- c) 评估用于功率传输和遥测的新型超声动力植入物;
- d) 利用自主神经调节的差异进行生物学性别的判定;
- e) 电刺激诱发的神经损伤的预测性成像生物标记物的开发。

9 心脏建模

计算建模和仿真正越来越多地用于医疗器械的开发、测试和验证。对于心脏的计算模型正朝着临床应用快速发展,例如消融、除颤和心脏再同步治疗的优化。然而,对于计算机模拟的监管决策往往落后于技术的开发和应用。对于这些

计算模型,需要对其所有组成部分严格评估模型预测的可靠性、可信性和稳定性,以及它们在诊断过程中可能存在的风险。在物理和工程界有较为成熟的模型评估方法(验证、确认和不确定性量化, Verification, Validation and Uncertainty Quantification, 简称VUUQ),目前正逐步被生物医学界采用。但是由于生理模型的复杂性,VUUQ的应用极具挑战性且繁琐。该研究的目的是通过开发基于VUUQ的用于评估心脏模型的工具和方法来实现创新^[53-61],从而为监管部门提供指引和支持。同时,对心脏模型的评估方法也可以扩展到评估其他各类复杂的生理模型,如各种细胞模型的比较和预测。

10 个性化心脏疗法

该研究是为了提高预测患者在使用心脏器械和治疗中受益还是受损的准确性^[62],从而为监管部门提供指引,也为医疗器械产品的创新提供技术支持。研究团队采用了一套转化医学的方法包括:

- (1) 评估医疗器械全心脏和单细胞心脏模型的安全性和有效性;
- (2) 评估精准医学中患者特异性诱导的多功能干细胞衍生的心脏细胞;
- (3) 评估人工诱导的多功能干细胞衍生的心肌细胞以评估药物性心律失常^[63-64];
- (4) 计算建模和仿真;
- (5) 患者的个体特征研究;
- (6) 临床试验中的个体患者荟萃分析^[65-66];
- (7) 上市后结果和比较有效性研究^[67]。

目前主要的研究领域包括:

- (1) 为心脏再同步治疗(心脏衰竭患者的专用起搏器)和使用植入式除颤器制定更好的选择标准^[68];
- (2) 开发和测试新型的心脏毒性生物标记物;
- (3) 利用患者特异性诱导的多功能干细胞衍生心肌细胞预测药物的个体化反应^[69]。

11 用于监管评估的虚拟影像临床试验 (Virtual Imaging Clinical Trial for Regulatory Evaluation, 简称VICTRE)

昂贵而漫长的临床试验可能会延迟对创新技术的监管评估,从而影响患者获得高质量医疗器械产品的机会。尽管计算建模在产品开发中越来越多地使用,但它很少成为监管应用的中心环节。在此

背景下, VICTRE项目试图仅使用计算模型来复制先前进行的影像临床试验。VICTRE试验不涉及人类受试者, 也不涉及临床医生, 所有试验步骤均在计算机上进行, 研究的基本问题是计算机成像试验是否处于成熟的开发阶段, 希望能在新的医学成像系统的监管评估中发挥重要作用。目前, VICTRE试验包括对2986位虚拟患者进行电子成像, 比较了数字乳房X线摄影(DM)和数字乳房断层合成(DBT)系统^[70], VICTRE试验的结果与使用受试者图像分析比较的试验结果一致。虽然需要进一步的研究来评估研究结果的通用性, 但该研究工作提供了证据, 表明最新的计算方法可以优化目前繁琐的监管评估方法。更重要的是, 进行影像学试验的全过程计算机方法并不是要替代而是对传统的临床试验进行补充和优化, 从而将计算结果逐步纳入监管机构的指导文件中, 可以帮助减少传统临床试验的规模和缩短时间。VICTRE的未来研究需要解决其局限性, 对包括病变类型和大小在内的试验参数进行系统的探索。

12 数字病理学评估

这个研究项目主要开发和评估数字病理系统, 如全视野的数字化图像(WSI)系统的安全性和有效性^[71], 主要通过两个方面进行: 一是对数字病理扫描和显示系统特性(特别是颜色转移)的技术评估^[72]; 二是对病理学家解释数字病理图像的诊断能力进行评估。目标是研究哪些技术特征是重要的, 它们如何影响病理学家的诊断, 以及如何测量它们的信息。充分描述这些技术特征可以减少临床研究的规模、成本和持续时间。该项目组研究的主要工作包括:

(1) 设计一个数字和模拟病理学的评估软件(eeDAP)^[73-74]。通过比较病理学家对数字病理图像和对常规病理切片的评估的准确性和可重复性, 希望将eeDAP发展为临床结果评价工具, 以用于产品上市前的研究;

(2) 使用数字病理学, 对卵巢癌进行初步诊断以及检测淋巴结组织上的转移性卵巢癌^[75]。主要研究内容包括:

a) 检查病理学家对卵巢癌不同亚型进行分类的差异来源;

b) 开发一组组织病理学模式和相关决策支持工具, 以提高病理学家诊断的效果;

c) 评估病理学家采用WSI和常规显微镜的表现;

d) 评估使用WSI检测卵巢癌转移的可行性。

(3) 开发了定量评估蛋白质HER2/neu的算法, 量化HER2/neu的组织学表达, 检查这种乳腺癌的生物标记物对不同图像采集方法的再现性, 并通过对比研究, 证明计算机辅助有助于病理学家的评估^[76-77];

(4) 研究以数字化全玻片成像替代苏木精和伊红染色玻片及常规显微镜检查, 使其应用于常规外科手术疾病的病理诊断。

13 诊断和生物标志物的统计评估方法

评估成像设备和预测性生物标记物的有效性取决于评估这些设备的研究设计和从这些研究中收集到的数据的统计学意义。该研究项目旨在开发数学和统计学方法, 以设计、分析和评估成像诊断设备、预测生物标记物以及基于成像或生物标记物数据的计算机算法^[78-88]。研究包括在不同层次上评估这些设备的有效性的方法: (1) 使用不同观察者的观察结果对比进行图像质量评估; (2) 使用临床数据评估设备的独立性能; (3) 在必要时评估医生使用这些设备进行诊断的表现。

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