

CAPA IN MEDICAL DEVICES

Results of a short survey 2014/2015

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Introduction

During the past years, CAPA was lifted to center stage during inspections as per 21CFR820 and audits as per EN ISO 13485 (see slides 3 and 4).

However, limited data on CAPA in medical device industries is available, besides the annual data published by FDA.

A non-representative and non-controlled survey was conducted by the author to gather some data from nonsystematically selected medical device experts.

The survey does not claim any completeness or correctness of the results. It aims to show trends and opinion within the medical device industry only.



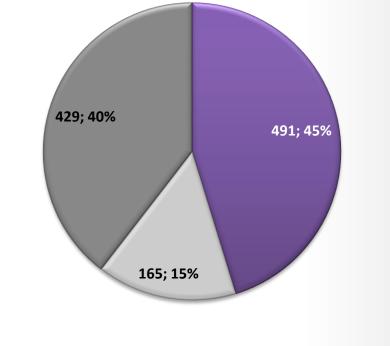
Annual data published by FDA

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FDA CY2013 CAPA Observations



■ CAPA (820.100) ■ NC (820.90) ■ Complaint Files (820.198)

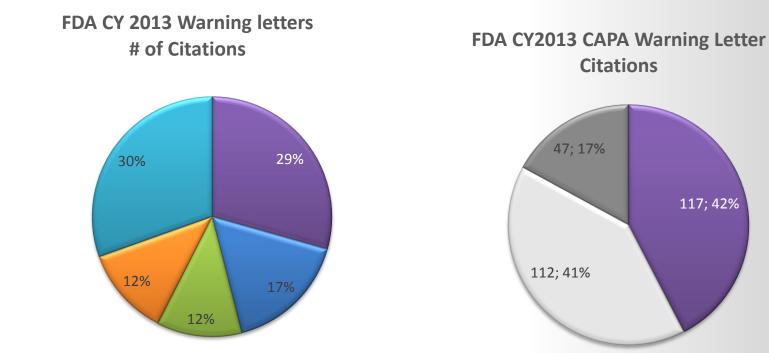
Source: <u>www.fda.gov</u>, 2013 Annual FDA Medical Device Quality System Data

Annual data published by FDA

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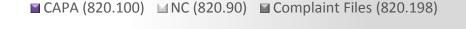
🛾 CAPA

Design Control

Document Control

Management

Production&Process Controls



Source: <u>www.fda.gov</u>, 2013 Annual FDA Medical Device Quality System Data

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Participants

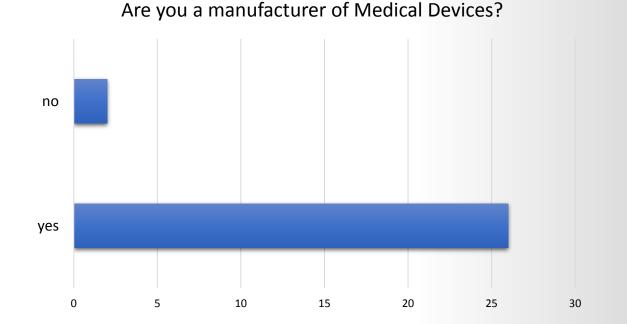
- Survey was open from 14th Nov 2014 to 11th Jan 2015
- 28 medical device experts participated in the survey.
- Participants were located, as far as known, in Germany, Ireland, USA, Sweden, the Netherlands, and Switzerland.

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Question 1



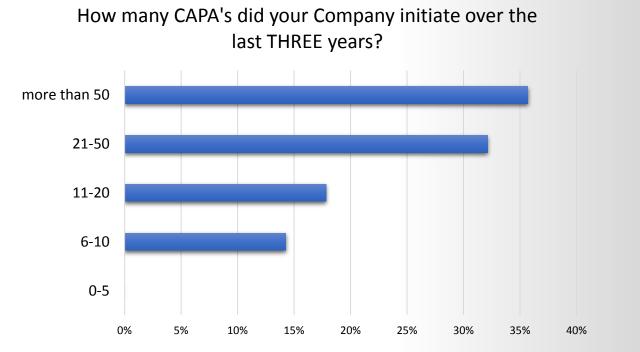
All participants are involved in Medical devices (including one material supplier and one service provider for medical device companies).

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Question 2

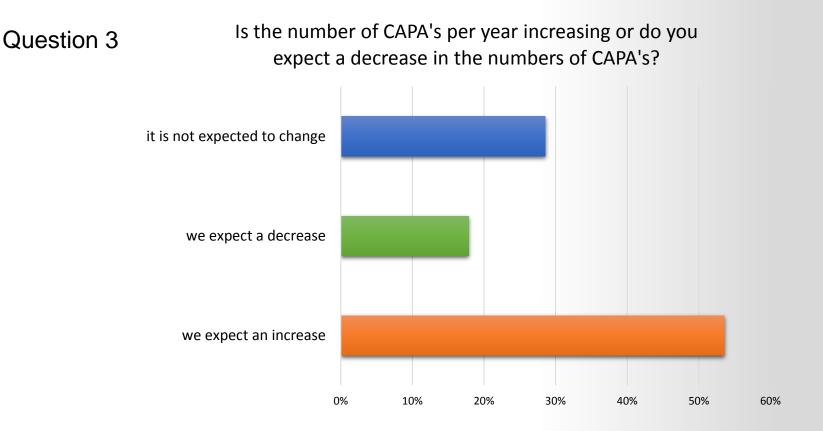


Company sizes vary, therefore a comparison may not be possible. 67% reported more than 20 CAPA's annually.

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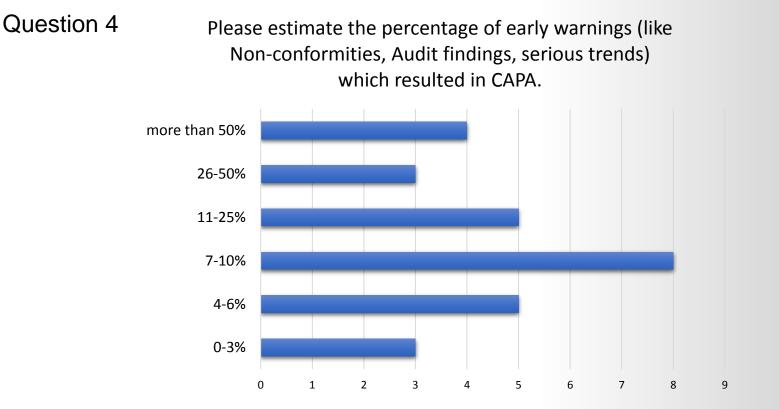


The majority of participants expect an increase in CAPA

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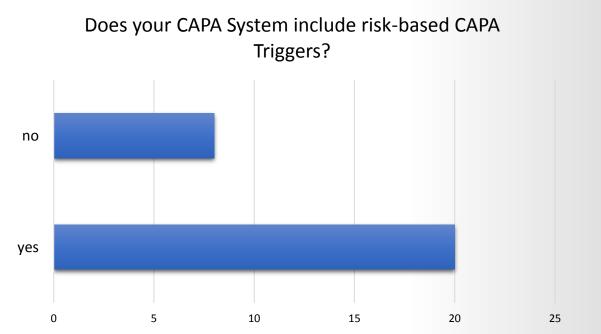


The ratio of escalating early warnings up to CAPA varies widely. The median is about 1:10.

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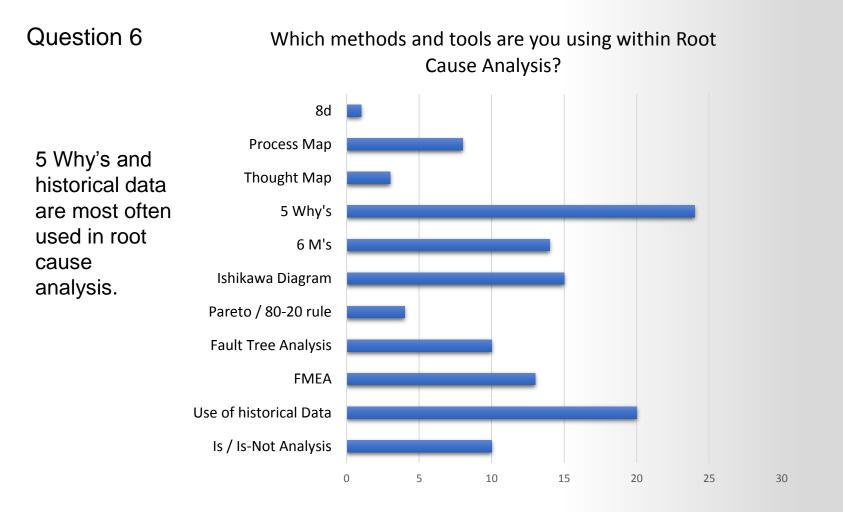
Question 5

The majority of participants are using risk-based CAPA triggers.

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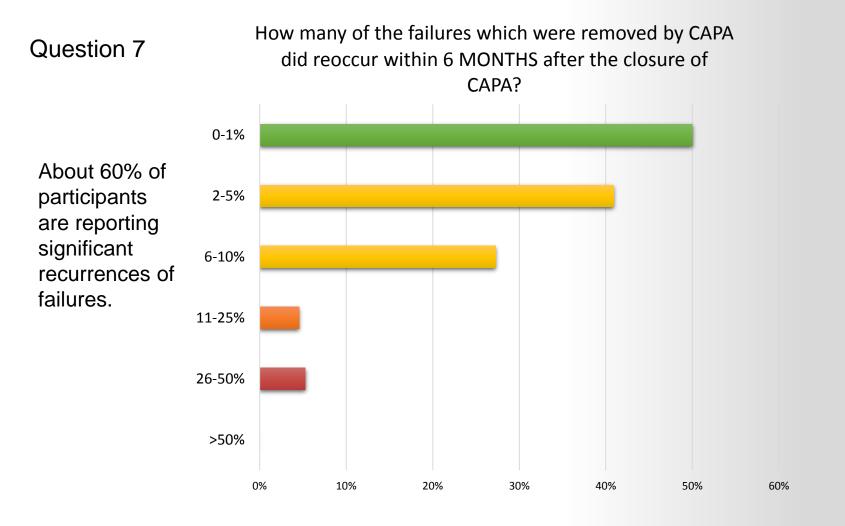
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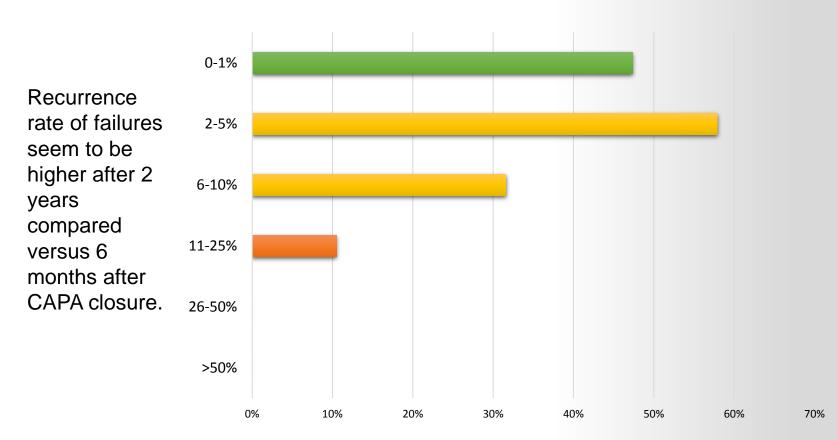
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Question 8

How many of the failures which were removed by CAPA did reoccur within 2 YEARS after the closure of CAPA?

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If you would need to categorize the way you handle failure Investigation, what would fit your daily practice? None of the above mainly pro-active (more than 50%) mainly reactive (more than 80%) reactive only (fire-fighting) 0% 10% 20% 30% 40% 50% 70% 80% 60%

Most of the participants handle failure investigations reactively.

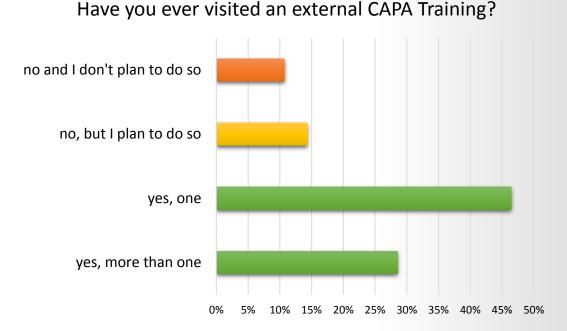
Question 9

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Results of the survey



Question 10

Degree of training is 75% and can be considered high.

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Summary

- 67% reported more than 20 CAPA's annually.
- The ratio of escalating early warnings up to CAPA varies widely. The median is about 1:10.
- The majority of participants expect an increase in CAPA.
- Most participants are using risk-based CAPA triggers.
- 5 Why's and historical data are most often used in root cause analysis.
- About 60% of participants are reporting significant recurrences of failures. Recurrence rate of failures seem to be higher after 2 years compared versus 6 months after CAPA closure.
- Most of the participants handle failure investigations reactively.
- Degree of training is 75% and can be considered high.

BEST PRACTICES IN CAPA

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