

Coordinating Research and Evidence for Medical Devices

High Risk CE-Marked Medical Devices for Diabetes Care

A Systematic Review and Meta-analysis

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Classes of Devices

- Implantable continuous glucose monitoring systems (CGM)
- Implantable insulin pumps
- Automated insulin delivery systems (AID)
 Hybrid closed loop systems
 Fully closed loop systems









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3.24 PM
 November 1
 Dexcom G6

t:slim X2 with Control-IQ Technology



Accu-Chek Insight with DBLG1 from Diabeloop



IQ Medtronic Minimed 780G

List of Medical Devices

Class of device	Device	Manufacturer	CE-Mark
			approval date
Implantable CGM	Implantable	Senseonics Inc	2016
devices	Eversense ® CGM		
	sensor		
Implantable Insulin	MiniMed MIP2007C	Medtronic	2013
Pumps			
	DiaPort ®	Roche	2012
Automated insulin			
delivery devices			
Hybrid closed-loop	MiniMed 670G	Medtronic	2018
systems			
	Minimed 770G	Medtronic	2020
	MiniMed 780 G	Medtronic	2020
	Control-IQ	Tandem	2020
	Diabeloop	Diabeloop	2018
	Inreda Diabetic	Inreda	2016
	Tidepool Loop	Tidepool	Pending
	Omnipod 5 system	Insulet	2022
	iLet Bionic Pancreas System	Medtech Beta Bionics	Pending
	CamAPS FX*	CamDiab	2020
Fully closed-loop	CamAPS HX	CamDiab	2020

systems



Rationale

- The clinical evidence that is submitted for regulatory approval is not transparent
- A systematic review and meta-analysis of the evidence on the efficacy and safety of high-risk devices approved for managing diabetes in Europe is lacking



Aim

- To conduct a systematic review and meta-analysis assessing whether CE-marked high risk medical devices for diabetes management are safe and effective
- Reviewing study designs, statistical methods, reported outcomes and overall quality of evidence



Open access

BMJ Open Clinical evidence for high-risk medical devices used to manage diabetes: protocol for a systematic review and meta-analysis

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PROSPERO (CRD42022366871)



Databases

- Medline All (Ovid)
- Embase (Elsevier)
- Cochrane Library (Wiley)
- Web of Science Core Collection
 - -Science Citations index
 - -Emerging Sources
- Eudamed database
- Swissmedic, notified bodies, manufacturers







Inclusion Criteria

- Studies evaluating efficacy and/or safety of high risk CE-marked medical devices for diabetes care
- Observational and experimental design (pre- and post-market)
- In humans

Exclusion Criteria

• Letters to editor, proceedings, reviews, systematic reviews, metaanalysis, conference abstracts, expert opinion, animal studies



- Participants: Patients with diabetes (both pediatric and adults)
- Intervention: High risk CE-marked medical devices for diabetes
- Comparator: Any (No intervention, active intervention, sham procedure)
- Outcomes:
 - Efficacy: Glucose control, acute and chronic glucose related complications
 - <u>Safety:</u> Severe hypoglycemia, diabetic ketoacidosis, device related SAE, device deficiencies, field safety notices



- With help of a medical information specialist
- Embase 2475 hits
- 200 first abstracts screened to adapt search strategy
- Search strategy converted to the other databases



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ŧ13	#9 AND #12	2,475
ŧ12	#10 OR #11	9,800,162
11	'cohort analysis'/exp OR 'longitudinal study'/exp OR 'prospective study'/exp OR 'follow up'/exp OR 'retrospective study'/de OR 'cross-sectional study'/de OR 'observational study'/de OR 'population research'/de OR 'case control study'/exp OR 'case study'/exp OR 'major clinical study'/de OR cohort*:ab,ti OR (((prospectiv* OR populat* OR observ* OR retrospect* OR epidemiologic*) NEAR/3 (stud* OR trial*)):ab,ti) OR ((case* NEAR/3 control*):ab,ti) OR ((case* NEAR/3 series):ab,ti) OR ((cross NEAR/1 section*):ab,ti) OR 'case cohort*':ab,ti OR 'nested case control*':ab,ti OR prospectiv*:ab,ti OR longitudinal*:ab,ti OR 'follow up':ab,ti OR followup:ab,ti OR population-based:ab,ti	8,541,018
ŧ10	random*:ti,ab OR placebo*:ti,ab OR 'single blind*':ti,ab OR 'double blind*':ti,ab OR 'triple blind*':ti,ab OR ((clinical NEXT/1 trial*):ti,ab) OR 'randomized controlled trial'/exp	2,371,004
9	#7 NOT #8	15,370
8	[animals]/lim NOT [humans]/lim	6,069,793
7	#5 AND #6	15,915
6	#3 OR #4	22,590
5	#1 OR #2	1,326,262
4	ambulatory insulin infusion pump*':ti,ab OR 'artificial pancreas':ti,ab OR 'artificial endocrine pancreas':ti,ab OR 'automated pancreas':ti,ab OR 'automated insulin delivery':ti,ab OR 'automated insulin therapy':ti,ab OR 'automated insulin dosing':ti,ab OR 'bionic pancreas':ti,ab OR 'closed-loop control':ti,ab OR 'closed-loop system':ti,ab OR 'continuous intraperitoneal insulin infusion*':ti,ab OR 'do-it-yourself automated pancreas':ti,ab OR 'continuous intraperitoneal insulin infusion*':ti,ab OR 'do-it-yourself automated pancreas':ti,ab OR 'hybrid closed-loop':ti,ab OR 'implantable glucose monitor*':ti,ab OR 'implantable continuous glucose monitor*':ti,ab OR 'implanted insulin pump*':ti,ab OR 'implantable insulin pump*':ti,ab OR 'implanted infusion pump*':ti,ab OR 'implantable glucose sensor*:ti,ab OR 'implantable cgm*':ti,ab OR 'sensor-augmented pump*':ti,ab OR 'implantable glucose sensor*:ti,ab OR 'medtronic 670g':ti,ab,dn,df OR minimed*:ti,ab,dn,df OR diaport*:ti,ab,dn,df OR 'control iq*':ti,ab,dn,df OR diabeloop*:ti,ab,dn,df OR 'camaps hx*':ti,ab,dn,df OR 'camaps fx*':ti,ab,dn,df OR dblg1*:ti,ab,dn,df OR (((closed OR hybrid) NEAR/3 insulin NEAR/3 (system* OR delivery OR device* OR therapy OR algorithm)):ti,ab)	9,839
3	'artificial pancreas'/exp OR 'closed loop control'/de OR 'closed loop control system'/de OR 'closed loop insulin delivery'/de OR 'closed loop insulin delivery system'/de OR 'continuous glucose monitoring device'/de OR 'glucose monitoring/insulin pump system'/de OR 'hybrid closed loop system'/de OR 'implantable drug delivery system'/de OR 'implantable infusion pump'/de OR 'insulin delivery device'/de OR 'insulin implant'/exp OR 'insulin pump therapy'/de	3,306
2	diabet*:ti,ab OR hypoglycemi*:ti,ab OR hypoglycaemi*:ti,ab OR hyperglycemi*:ti,ab OR hyperglycaemi*:ti,ab OR 'iddm':ti,ab OR 'niddm':ti,ab OR 't1dm':ti,ab OR 't2dm':ti,ab	1,132,109
1	'diabetes mellitus'/de OR 'insulin dependent diabetes mellitus'/exp OR 'non insulin dependent diabetes mellitus'/de	965,852

Methodology

- Narrative synthesis of the findings
- Meta-analysis of RCTs that compared AID systems with other therapies for diabetes management
- Meta-analysis of studies that compared outcomes before and after utilization of AID systems
- Assessment of heterogeneity
- Assessment of quality









Results

- Studies published 2009-2022
- 41% industry funding
- 18% pre-market; 82% post-market







Results

- Median sample size: 52 participants (IQR: 25-115)
- Predominantly type 1 diabetes
- Predominantly aged ≥18 years
- Median max follow-up: 13 weeks (IQR: 4-26)
- 47% of studies had a comparator group



- Efficacy outcomes
- 61 studies on HbA1c
- > 101 studies on Time in range (%)
- > No studies reported on chronic glucose related complications



Meta-analyses of RCTs comparing AID systems with other antidiabetic treatments

Outcome	N studies	Pooled mean difference (95% CI)
HbA1c(%)	N=9	-0.22 (-0.28; -0.17)
Time in range (%) (glucose 3.9-10 mmol/l)	N=16	8.79 (8.03; 9.55)



Meta-analyses of studies comparing outcomes before and after utilization of AID systems

Outcome	N studies	Pooled mean difference (95% CI)
HbA1c(%)	N=24	-0.63 (-0.65; -0.61)
Time in range(%) (glucose 3.9-10 mmol/I)	N=37	10.64 (10.55; 10.73)



- Safety outcomes
- > 71 studies reported on at least one safety outcome
- Incomplete reporting
- Frequency of safety outcomes was generally similar between intervention and control groups



Risk of Bias Assessment



Conclusions

- CE-marked medical devices, in particular AID systems, improve glucose control
- However, no studies reported on chronic glucose related complications, and safety outcomes were partially reported across studies.



Conclusions

- Evidence is characterized by small studies with short follow-up time and methodological heterogeneity
- Need for developing standards for future investigations, thereby improving study comparability and transparency of findings



CORE-MD, Coordinating Research and Evidence for Medical Devices, aims to translate expert scientific and clinical evidence on study designs for evaluating high-risk medical devices into advice for EU regulators. This project has received funding from the European Union's Horizon 2020 research and innovation programme under grant agreement No 945260





