

MEDITSIINISEADMETE BIOLOOGILINE HINDAMINE.
OSA 23: KONTAKTÄRRITUSKATSED

Biological evaluation of medical devices - Part 23: Tests
for irritation (ISO 10993-23:2021)

EESTI STANDARDI EESSÕNA

NATIONAL FOREWORD

See Eesti standard EVS-EN ISO 10993-23:2021 sisaldab Euroopa standardi EN ISO 10993-23:2021 ingliskeelset teksti.	This Estonian standard EVS-EN ISO 10993-23:2021 consists of the English text of the European standard EN ISO 10993-23:2021.
Standard on jõustunud sellekohase teate avaldamisega EVS Teatajas.	This standard has been endorsed with a notification published in the official bulletin of the Estonian Centre for Standardisation and Accreditation.
Euroopa standardimisorganisatsioonid on teinud Euroopa standardi rahvuslikele liikmetele kättesaadavaks 31.03.2021.	Date of Availability of the European standard is 31.03.2021.
Standard on kättesaadav Eesti Standardimis-ja Akrediteerimiskeskusest.	The standard is available from the Estonian Centre for Standardisation and Accreditation.

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English Version

Biological evaluation of medical devices - Part 23: Tests for
irritation (ISO 10993-23:2021)

Évaluation biologique des dispositifs médicaux - Partie
23: Essais d'irritation (ISO 10993-23:2021, Version
corrigée inclus 2021-02)

Biologische Beurteilung von Medizinprodukten - Teil
23: Prüfungen auf Irritation (ISO 10993-23:2021)

This European Standard was approved by CEN on 1 October 2020.

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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.

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EUROPEAN COMMITTEE FOR STANDARDIZATION
COMITÉ EUROPÉEN DE NORMALISATION
EUROPÄISCHES KOMITEE FÜR NORMUNG

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European foreword

This document (EN ISO 10993-23:2021) has been prepared by Technical Committee ISO/TC 194 "Biological and clinical evaluation of medical devices" in collaboration with Technical Committee CEN/TC 206 "Biological and clinical evaluation of medical devices" 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 September 2021, and conflicting national standards shall be withdrawn at the latest by September 2021.

Attention is drawn to the possibility that some of the elements of this document may be the subject of patent rights. CEN 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 the relationship with EU Directive(s) see informative Annex ZA, ZB and ZC, which are integral parts of this document.

The following referenced documents are indispensable for the application of this document. For undated references, the latest edition of the referenced document (including any amendments) applies. For dated references, only the edition cited applies. However, for any use of this standard 'within the meaning of Annex ZA', the user should always check that any referenced document has not been superseded and that its relevant contents can still be considered the generally acknowledged state-of-art.

When an IEC or ISO standard is referred to in the ISO standard text, this shall be understood as a normative reference to the corresponding EN standard, if available, and otherwise to the dated version of the ISO or IEC standard, as listed below.

NOTE The way in which these referenced documents are cited in normative requirements determines the extent (in whole or in part) to which they apply.

Table — Correlations between undated normative references and dated EN and ISO standards

Normative references as listed in Clause 2 of the ISO standard	Equivalent dated standard	
	EN	ISO or IEC
ISO 10993-1	EN ISO 10993-1:2021 ^a	ISO 10993-1:2018
ISO 10993-2	EN ISO 10993-2:2006	ISO 10993-2:2006
ISO 10993-9	EN ISO 10993-9:2021 ^a	ISO 10993-9:2019
ISO 10993-12	EN ISO 10993-12:2021 ^a	ISO 10993-12:2020
ISO 10993-13	EN ISO 10993-13:2010	ISO 10993-13:2010
ISO 10993-14	EN ISO 10993-14:2001	ISO 10993-14:2009
ISO 10993-15	EN ISO 10993-15:2021 ^a	ISO 10993-15:2019
ISO 10993-18	EN ISO 10993-18:2021 ^a	ISO 10993-18:2020
ISO 14155	EN ISO 14155:2020	ISO 14155:2020
^a Under preparation at European level.		

NOTE This part of EN ISO 10993 refers to ISO 10993-1 which itself refers to ISO 14971. In Europe, it should be assumed that the reference to ISO 14971 is to EN ISO 14971:2012.

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, France, Germany, Greece, Hungary, Iceland, Ireland, Italy, Latvia, Lithuania, Luxembourg, Malta, Netherlands, Norway, Poland, Portugal, Republic of North Macedonia, Romania, Serbia, Slovakia, Slovenia, Spain, Sweden, Switzerland, Turkey and the United Kingdom.

Endorsement notice

The text of ISO 10993-23:2021 has been approved by CEN as EN ISO 10993-23:2021 without any modification.

Annex ZA (informative)

Relationship between this European Standard and the essential requirements of Directive 93/42/EEC [OJ L 169] aimed to be covered

This European Standard has been prepared under a Commission's joint standardization request M/BC/CEN/89/9 concerning harmonized standards relating to horizontal aspects in the field of medical devices to provide one voluntary means of conforming to essential requirements of Council Directive 93/42/EEC of 14 June 1993 concerning medical devices [OJ L 169].

Once this standard is cited in the Official Journal of the European Union under that Directive, compliance with the normative 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.

NOTE 1 Where a reference from a clause of this standard to the risk management process is made, the risk management process needs to be in compliance with Directive 93/42/EEC as amended by 2007/47/EC. This means that risks have to be reduced 'as far as possible', 'to a minimum', 'to the lowest possible level', 'minimized' or 'removed', according to the wording of the corresponding essential requirement.

NOTE 2 The manufacturer's policy for determining acceptable risk must be in compliance with Essential Requirements 1, 2, 5, 6, 7, 8, 9, 11 and 12 of the Directive.

NOTE 3 This Annex ZA is based on normative references according to the table of references in the European foreword, replacing the references in the core text.

NOTE 4 When an Essential Requirement does not appear in Table ZA.1, it means that it is not addressed by this European Standard.

Table ZA.1 — Correspondence between this European Standard and Annex I of Directive 93/42/EEC [OJ L 169]

Essential Requirements of Directive 93/42/EEC	Clause(s)/sub-clause(s) of this EN	Remarks/Notes
7.1 (First and second indent)	4, 5, 6, 7, 8 and Annex A, D and E	ER 7.1 is only partly covered by this standard, since the standard does not provide requirements on design and manufacture. However, this standard provides a means to assess potential irritancy induced by chemical and/or physical properties of substances used in the manufacture of medical devices. Other forms of toxicity and flammability are not covered.
7.2	4, 5, 6, 7, 8 and Annex A, D and E	ER 7.2 is only partly covered by this standard, since the standard does not provide requirements on design, manufacture and packaging and does not oblige to minimize risk. However, this standard provides a means to assess irritancy to contaminants and

		residues in medical devices.
7.5 (First paragraph)	4, 5, 6, 7, 8 and Annex A, D and E	<p>ER 7.5 is only partly covered by this standard, since the standard does not provide requirements on design and manufacture. However, this standard provides a means to assess irritancy to substances leaking from medical devices. This evaluation can be a preliminary step for risk minimization.</p> <p>Other forms of toxicity are not dealt with in this standard.</p>

General Note: Presumption of conformity depends on also complying with the relevant parts of the ISO 10993 series.

WARNING 1 — Presumption of conformity stays valid only as long as a reference to this European Standard is maintained in the list published in the Official Journal of the European Union. Users of this standard should consult frequently the latest list published in the Official Journal of the European Union.

WARNING 2 — Other Union legislation may be applicable to the products falling within the scope of this standard.

Annex ZB (informative)

Relationship between this European Standard and the essential requirements of Directive 90/385/EEC [OJ L 189] aimed to be covered

This European Standard has been prepared under a Commission's joint standardization request M/BC/CEN/89/9 concerning harmonized standards relating to horizontal aspects in the field of medical devices to provide one voluntary means of conforming to essential requirements of Council Directive 90/385/EEC of 20 June 1990 on the approximation of the laws of the Member States relating to active implantable medical devices [OJ L 189].

Once this standard is cited in the Official Journal of the European Union under that Directive, compliance with the normative clauses of this standard given in Table ZB.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.

NOTE 1 Where a reference from a clause of this standard to the risk management process is made, the risk management process needs to be in compliance with Directive 90/385/EEC as amended by 2007/47/EC. This means that risks have to be reduced 'as far as possible', 'to a minimum', 'to the lowest possible level', 'minimized' or 'removed', according to the wording of the corresponding essential requirement.

NOTE 2 The manufacturer's policy for determining acceptable risk must be in compliance with Essential Requirements 1, 4, 5, 8, 9 and 10 of the Directive.

NOTE 3 This Annex ZB is based on normative references according to the table of references in the European foreword, replacing the references in the core text.

NOTE 4 When an Essential Requirement does not appear in Table ZB.1, it means that it is not addressed by this European Standard.

Table ZB.1 — Correspondence between this European Standard and Annex I of Directive 90/385/EEC [OJ L 189]

Essential Requirements of Directive 90/385/EEC	Clause(s)/sub-clause(s) of this EN	Remarks/Notes
9 (only first and second indent)	4, 5, 6, 7, 8 and Annex A, D and E	<p>ER 9 is only partly covered by this standard, since the standard does not provide requirements on design and manufacture.</p> <p>However, this standard provides a means to assess potential irritancy induced by chemical and/or physical properties of substances used in the manufacture of medical devices.</p> <p>Other forms of toxicity and flammability are not covered.</p>

General Note: Presumption of conformity depends on also complying with the relevant parts of the ISO 10993 series.

WARNING 1 — Presumption of conformity stays valid only as long as a reference to this European Standard is maintained in the list published in the Official Journal of the European Union. Users of this standard should consult frequently the latest list published in the Official Journal of the European Union.

WARNING 2 — Other Union legislation may be applicable to the products falling within the scope of this standard.

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Annex ZC (informative)

Relationship between this European standard and the General Safety and Performance Requirements of Regulation (EU) 2017/745 aimed to be covered

This European standard has been prepared under a Commission's standardisation request to provide one voluntary means of conforming to the General Safety and Performance Requirements of Regulation (EU) 2017/745 of 5 April 2017 concerning medical devices [OJ L 117].

Once this standard is cited in the Official Journal of the European Union under that Regulation, compliance with the normative clauses of this standard given in Table ZC.1 confers, within the limits of the scope of this standard, a presumption of conformity with the corresponding General Safety and Performance Requirements of that Regulation, and associated EFTA regulations.

NOTE 1 Where a reference from a clause of this standard to the risk management process is made, the risk management process needs to be in compliance with Regulation (EU) 2017/745. This means that risks have to be 'reduced as far as possible', 'reduced to the lowest possible level', 'reduced as far as possible and appropriate', 'removed or reduced as far as possible', 'eliminated or reduced as far as possible', 'removed or minimized as far as possible', or 'minimized', according to the wording of the corresponding General Safety and Performance Requirement.

NOTE 2 The manufacturer's policy for determining acceptable risk must be in compliance with General Safety and Performance Requirements 1, 2, 3, 4, 5, 8, 9, 10, 11, 14, 16, 17, 18, 19, 20, 21 and 22 of the Regulation.

NOTE 3 This Annex ZC is based on normative references according to the table of references in the European Foreword, replacing the references in the core text.

NOTE 4 When a General Safety and Performance Requirement does not appear in Table ZC.1, it means that it is not addressed by this European Standard.

**Table ZC.1 — Correspondence between this European Standard and
Annex I of Regulation (EU) 2017/745 [OJ L 117]**

General Safety and Performance Requirements of Regulation (EU) 2017/745	Clause(s)/sub-clause(s) of this EN	Remarks/Notes
10.1 a), b), g) and h)	4, 5, 6, 7, 8 and Annex A, D and E	10.1 is only partly covered by EN ISO 10993-23, since the standard does not provide requirements on design and manufacture. However, this standard provides a means to assess potential irritancy induced by chemical and/or physical properties of substances used in the manufacture of medical devices. Other forms of toxicity and flammability (10.1 a) and b) are not covered.