K073091

FEB 2 9 2008

## 510(k) SUMMARY

## VIDAS® NT-proBNP Assay

A. Submitter Information

Submitter's Name:

bioMérieux, Inc.

Address:

595 Anglum Road

Hazelwood, MO 63042

Contact Person:

Nikita S. Mapp

Phone Number:

314-731-7474

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314-731-8689

Date of Preparation:

October 2007 (revised February 2008)

B. Device Name

Trade Name:

VIDAS® NT-proBNP

Common Name:

Endotoxin Assay

Classification Name:

21 CFR 862.1117 Product Code NBC B-type natriuretic peptide test system

C. Predicate Device Name

Trade Name:

Elecsys proBNP Assay

#### D. Device Description

The VIDAS® NT-proBNP assay is an automated quantitative test for use on the VIDAS instruments for the determination of N terminal fragment of B-type natriuretic peptide in human serum or plasma (lithium heparin) using the ELFA (Enzyme-Linked Fluorescent Assay) technique. The VIDAS NT-proBNP test is used as an aid in the diagnosis of suspected congestive heart failure.

The assay principle combines a one-step immunoassay sandwich method with a final fluorescent detection (ELFA). The Solid Phase Receptacle (SPR), a pipette tip-like device, serves as the solid phase as well as the pipetting device for the assay. The assay reagents are ready-to-use and pre-dispensed in the sealed reagent strips (STRs). The individual kit components are described in detail in the 510(k) and in the package insert.

All of the assay steps are performed automatically by the VIDAS instrument. The sample is transferred into the well containing anti-NT-proBNP antibody (conjugate) labeled with alkaline phosphatase. The sample/conjugate mixture is cycled in and out of the SPR several times. This operation enables the antigen to bind with the immunoglobulins fixed to the interior wall of

the SPR and the conjugate to form a sandwich. Unbound compounds are eliminated during washing steps.

Two detection steps are performed successively. During each step, the substrate (4-Methyl-umbelliferyl phosphate) is cycled in and out of the SPR. The conjugate enzyme catalyzes the hydrolysis of this substrate into a fluorescent product (4-Methyl-umbelliferone) the fluorescence of which is measured at 450 nm. The intensity of the fluorescence is proportional to the concentration of antigen present in the sample.

At the end of the assay, results are automatically calculated by the VIDAS instrument in relation to two calibration curves corresponding to the two detection steps stored in memory, and then printed out.

#### E. Intended Use

The VIDAS® NT-proBNP assay is an automated quantitative test for use on the VIDAS instruments for the determination of N terminal fragment of B-type natriuretic peptide in human serum or plasma (lithium heparin) using the ELFA (Enzyme-Linked Fluorescent Assay) technique. The VIDAS NT-proBNP test is used as an aid in the diagnosis of suspected congestive heart failure.

### F. Technological Characteristics Summary

A general comparison of the similarities and differences of the assays is presented in the table below.

Item	Device [VIDAS NT-proBNP]	Predicate [Elecsys proBNP]	
General Comparison			
Intended Use	Quantitative determination of N terminal fragment of B-type natriuretic peptide in human serum or plasma (lithium heparin). The VIDAS NT-proBNP test is used as an aid in the diagnosis of suspected congestive heart failure.	Same as initial claim [K022516].  Roche obtained additional claims via other 510(k)s, "risk stratification" and "risk assessment" which bioMerieux is not pursuing at this time.	
Specimen	Human serum or plasma	Same	
Analyte	Measures NT-proBNP	Same	
Antibody	Anti-NT-proBNP antibody (polyclonal sheep)	Same	
Assay Principle	Immunoassay based on sandwich principle	Same	
Automated	Automated assay	Same	
Assay Technique	Enzyme-Linked Fluorescent Assay (ELFA)	Electrochemiluminescent assay	
Sample Volume	200 µl	20 µl	
Assay Time	~20 minutes	18 minutes	
Traceability/ Standardization	Traceable to proBNP Roche	Reference standard – purified synthetic NTG-proBNP (1-76) in human serum matrix	
Measurement range	20-25,000 pg/mL	5-35,000 pg/mL	

### G. Performance Data

A summary of the non-clinical and clinical test results is presented in the table below.

	Device	Predicate	
Test	[VIDAS NT-proBNP]	[Elecsys proBNP]	
Non-clinical (Analytical) C	Comparison		
Matrix Comparison	Serum similar to Plasma		
·	For patient follow-up, assays must be performed	Same	
	on the same type of sample tube.		
	5 samples tested in duplicate in 40 different	4 samples tested in 6 times daily for	
	runs (2 runs per day)	10 days	
Precision	repeatability (intra-run): 1.5 – 2.8 %CV	total precision: 2.2 – 3.2%CV	
	inter-site: 3.4 –5.1 %CV	within run precision: 1.8 – 2.7%CV	
	inter-lot: 3.5 – 8.4 %CV		
	< 20 pg/mL		
Detection Limits	(LoB = $3.4 \text{ pg/mL}$ , LoD = $6.7 \text{ pg/mL}$ , LoQ =	5 pg/ml	
	13.9 pg/mL)		
Interfering Substances	No significant interference	No significant interference	
Bilirubin	30 mg/dl (510 μmol/L)	35 mg/dl	
Hemoglobin	485 mg/dl (300 µmol/L)	1.4 g/dl	
Triglycerides	30 g/l	4000 mg/dl	
Albumin	100 g/L	Not tested	
Human IgG	17 g/L	Not tested	
Human IgM	6 g/L	Not tested	
	1500 IU/mL	1500 IU/mL	
Rheumatoid Factors	1300 10/IIIL	1300 16/11/2	
Analytical Specificity	-0.40/	<0.001%	
Adrenomedullin	<0.1%		
Aldosterone	<0.1%	<0.001%	
Angiotensin I	<0.1%	<0.001%	
Angiotensin II	<0.1%	<0.001%	
Angiotensin III	<0.1%	<0.001%	
ANP <sub>28</sub>	<0.1%	<0.001%	
Arg-Vasopressin	<0.1%	<0.001%	
BNP <sub>32</sub>	<0.1%	<0.001%	
CNP <sub>22</sub>	<0.1%	<0.001%	
Endothelin	<0.1%	<0.001%	
NT-proANP <sub>1-30</sub>	<0.1%	<0.001%	
NT-proANP <sub>31-67</sub>	<0.1%	<0.001%	
NT-proANP <sub>79-98</sub>	<0.1%	<0.001%	
Renin	<0.1%	<0.001%	
Urodilatin	<0.1%	<0.001%	
Drug Interference	No interference was observed on 39	No interference found on commonly	
g	frequently administered drugs tested in vitro	used pharmaceuticals	
	No hook effect found up to concentrations	No hook effect found up to	
Hook Effect	of 500,000 pg/mL	concentrations of 300,000 pg/mL	
Clinical Comparison	, o. o.o., pg		
•	105/ for noticeto <75 uporo old		
Cut-off	125 pg/mL for patients <75 years old	Same	
	450 pg/mL for patients ≥ 75 years old		
Clinical Sensitivity/Spec			
	Reference Group (without CHF		
Number of patients	411 patients	1411 patients	
Study Site(s)	US and Europe	unknown	
	· · · · · · · · · · · · · · · · · · ·		

	% < cut-off (males and <45 yrs: 92.4%	females)	% < 125 pg/mL (all) <45 yrs: 95.7%
	45-54 yrs: 90.3%		45-54 yrs: 93.3%
	55-64 yrs: 95.4%		55-64 yrs: 83.3%
Results	65-74 yrs: 89.5%		65-74 yrs: 69.8% <75 yrs: 82.4%
	<75 yrs: 92.2% ≥75+ yrs: 95.7%		~75 yrs. 62.476
	2731 yis. 33.170		% < 450 pg/mL (all)
			75+ yrs: 88.9%
		Group (with CHF)	
Number of patients	407 patients		721 patients
Study Site(s)	US and Europe		unknown
	% ≥ cut-off (males and	fomalos	% < 125 pg/mL (all) <45 yrs: 82.8%
	45 yrs: 85.0%	lemales)	45-54 yrs: 88.5%
	45-54 yrs: 85.3%		55-64 yrs: 89.5%
Populte	55-64 yrs: 88.1%		65-74 yrs: 92.2%
Results	65-74 yrs: 100.0%		75+ yrs: unknown
	<75 yrs: 92.3%		<75 yrs: 89.3%
	≥75+ yrs: 91.5%		% < 450 pg/mL (all)
			75+ yrs: 84.7%
	Sensitivity and Spe	ecificity vs. gender and	
European Site 1	- Auto-		
Statistics	All patients	< 75 yrs.	≥ 75 yrs.
Statistics Sensitivity (%)	All patients 94.63 (89.64-97.29)	< 75 yrs. 100 (94.81-100)	≥ 75 yrs. 89.47 (80.36-94.64
			89.47 (80.36-94.64
Sensitivity (%)	94.63 (89.64-97.29)	100 (94.81-100)	89.47 (80.36-94.64
Sensitivity (%)	94.63 (89.64-97.29)	100 (94.81-100)	89.47 (80.36-94.64
Sensitivity (%) Specificity (%)	94.63 (89.64-97.29)	100 (94.81-100)	89.47 (80.36-94.64
Sensitivity (%) Specificity (%)  European Site 2	94.63 (89.64-97.29) 97.39 (93.36-99.00)	100 (94.81-100) 97.27 (92.14-99.09)	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs.
Sensitivity (%) Specificity (%)  European Site 2 Statistics	94.63 (89.64-97.29) 97.39 (93.36-99.00) All patients	100 (94.81-100) 97.27 (92.14-99.09) < 75 yrs.	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs. 95.4 (88.58-98.23)
Sensitivity (%) Specificity (%)  European Site 2  Statistics Sensitivity (%) Specificity (%)	94.63 (89.64-97.29) 97.39 (93.36-99.00) All patients 94.96 (89.84-97.57)	100 (94.81-100) 97.27 (92.14-99.09 < 75 yrs. 94.23 (84.08-98.06	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs. 95.4 (88.58-98.23)
Sensitivity (%) Specificity (%)  European Site 2 Statistics Sensitivity (%) Specificity (%)  US Site	94.63 (89.64-97.29) 97.39 (93.36-99.00) All patients 94.96 (89.84-97.57) 96.69 (92.37-98.6)	100 (94.81-100) 97.27 (92.14-99.09) < 75 yrs. 94.23 (84.08-98.06) 96.36 (90.87-98.6)	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs. 95.4 (88.58-98.23) 97.56 (87.09-99.58)
Sensitivity (%) Specificity (%)  European Site 2 Statistics Sensitivity (%) Specificity (%)  US Site Statistics	94.63 (89.64-97.29) 97.39 (93.36-99.00)  All patients 94.96 (89.84-97.57) 96.69 (92.37-98.6)  All patients	100 (94.81-100) 97.27 (92.14-99.09 < 75 yrs. 94.23 (84.08-98.06 96.36 (90.87-98.6) < 75 yrs.	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs. 95.4 (88.58-98.23) 97.56 (87.09-99.58) ≥ 75 yrs.
Sensitivity (%) Specificity (%)  European Site 2 Statistics Sensitivity (%) Specificity (%)  US Site Statistics Sensitivity (%)	94.63 (89.64-97.29) 97.39 (93.36-99.00)  All patients 94.96 (89.84-97.57) 96.69 (92.37-98.6)  All patients 84.87 (77.18-90.3)	100 (94.81-100) 97.27 (92.14-99.09) < 75 yrs. 94.23 (84.08-98.06) 96.36 (90.87-98.6) < 75 yrs. 82.86 (72.14-90.02)	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs. 95.4 (88.58-98.23) 97.56 (87.09-99.58) ≥ 75 yrs. ≥ 75 yrs.
Sensitivity (%) Specificity (%)  European Site 2 Statistics Sensitivity (%) Specificity (%)  US Site Statistics	94.63 (89.64-97.29) 97.39 (93.36-99.00)  All patients 94.96 (89.84-97.57) 96.69 (92.37-98.6)  All patients	100 (94.81-100) 97.27 (92.14-99.09 < 75 yrs. 94.23 (84.08-98.06 96.36 (90.87-98.6) < 75 yrs.	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs. 95.4 (88.58-98.23) 97.56 (87.09-99.58) ≥ 75 yrs. ≥ 75 yrs.
Sensitivity (%) Specificity (%)  European Site 2 Statistics Sensitivity (%) Specificity (%)  US Site Statistics Sensitivity (%)	94.63 (89.64-97.29) 97.39 (93.36-99.00)  All patients 94.96 (89.84-97.57) 96.69 (92.37-98.6)  All patients 84.87 (77.18-90.3)	100 (94.81-100) 97.27 (92.14-99.09) < 75 yrs. 94.23 (84.08-98.06) 96.36 (90.87-98.6) < 75 yrs. 82.86 (72.14-90.02)	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs. 95.4 (88.58-98.23) 97.56 (87.09-99.58) ≥ 75 yrs. ≥ 75 yrs.
Sensitivity (%) Specificity (%)  European Site 2 Statistics Sensitivity (%) Specificity (%)  US Site Statistics Sensitivity (%) Specificity (%)	94.63 (89.64-97.29) 97.39 (93.36-99.00)  All patients 94.96 (89.84-97.57) 96.69 (92.37-98.6)  All patients 84.87 (77.18-90.3)	100 (94.81-100) 97.27 (92.14-99.09) < 75 yrs. 94.23 (84.08-98.06) 96.36 (90.87-98.6) < 75 yrs. 82.86 (72.14-90.02)	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs. 95.4 (88.58-98.23) 97.56 (87.09-99.58) ≥ 75 yrs. ≥ 75 yrs.
Sensitivity (%) Specificity (%)  European Site 2 Statistics Sensitivity (%) Specificity (%)  US Site Statistics Sensitivity (%) Specificity (%)  All Sites Combined	94.63 (89.64-97.29) 97.39 (93.36-99.00)  All patients 94.96 (89.84-97.57) 96.69 (92.37-98.6)  All patients 84.87 (77.18-90.3) 81.31 (72.69-87.67)	100 (94.81-100) 97.27 (92.14-99.09) < 75 yrs. 94.23 (84.08-98.06) 96.36 (90.87-98.6) < 75 yrs. 82.86 (72.14-90.02) 81.82 (72.88-88.28)	89.47 (80.36-94.64) 97.67 (87.63-99.6) ≥ 75 yrs. 95.4 (88.58-98.23) 97.56 (87.09-99.58) ≥ 75 yrs. ) 87.76 (75.46-94.35) 75 (40.31-93.02) ≥ 75 yrs.

Males: All Sites Combine	<u>d</u>		
Statistics	Males	Males < 75 yrs.	Males ≥ 75 yrs.
Sensitivity (%)	92.92 (88.85-95.57)	94.07 (88.6-97.01)	91.43 (84.33-95.48)
Specificity (%)	95.67 (92.13-97.66)	95.31 (91.23-97.55)	97.44 (86.49-99.56)

Females: All Sites Combi	ned		
Statistics	Females	Females < 75 yrs.	Males ≥ 75 yrs.
Sensitivity (%)	90.42 (84.87-94.07)	88.33 (77.56-94.31)	91.59 (84.61-95.57)
Specificity (%)	89.44 (83.98-93.2)	87.4 (80.35-92.17)	94.34 (84.36-98.1)

## H. Conclusion The VIDAS® NT proPNB Accounts substantially equival

The VIDAS® NT-proBNP Assay is substantially equivalent to the Roche Elecsys proBNp Assay.

The 510(k) summary includes only information that is also covered in the body of the 510(k). The summary does not contain any puffery or unsubstantiated labeling claims. The summary does not contain any raw data, i.e., contains only summary data. The summary does not contain any trade secret or confidential commercial information. The summary does not contain any patient identification information.





Food and Drug Administration 2098 Gaither Road Rockville MD 20850

bioMerieux, Inc c/o Ms. Nikita Mapp Senior Regulatory Affairs Specialist 595 Anglum Road Hazelwood, MO 63042

FEB 2 9 2008

Re: k073091

Trade/Device Name: VIDAS NT-proBNP Assay

Regulation Number: 21 CFR 862.1117

Regulation Name: B-type natriuretic peptide test system

Regulatory Class: Class II Product Code: NBC

Dated: February 04, 2008 Received: February 05, 2008

Dear Ms. Mapp:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); and good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820).

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific information about the application of labeling requirements to your device, or questions on the promotion and advertising of your device, please contact the Office of In Vitro Diagnostic Device Evaluation and Safety at (240) 276-0490. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (240) 276-3150 or at its Internet address at <a href="http://www.fda.gov/cdrh/industry/support/index.html">http://www.fda.gov/cdrh/industry/support/index.html</a>.

Sincerely yours,

Jean M. Cooper, M.S., D.V.M. Jean M. Cooper, M.S., D.V.M.

Director

Division of Chemistry and Toxicology Office of *In Vitro* Diagnostic Device Evaluation and Safety Center for Devices and

Radiological Health

Enclosure

# **Indication for Use**

510(k) Number (if known): Not yet	assigned KO73	3091	
510(k) Number (if known): Not yet assigned \$\times 073091\$			
Device Name: VIDAS NT-proBNP	Assay		
Indication For Use: VIDAS® NT-proBNP assay is an automated quantitative test for use on the VIDAS instruments for the determination of N terminal fragment of B-type natriuretic peptide in human serum or plasma (lithium heparin) using the ELFA (Enzyme-Linked Fluorescent Assay) technique. The VIDAS NT-proBNP test is used as an aid in the diagnosis of suspected congestive heart failure.			
		·	
Prescription Use X (21 CFR Part 801 Subpart D)	And/Or	Over the Counter Use (21 CFR Part 801 Subpart C)	
(PLEASE DO NOT WRITE BELOW THIS LINE; CONTINUE ON ANOTHER PAGE IF NEEDED)			
Concurrence of CDRH, Office of In Vitro Diagnostic Device Evaluation and Safety (OIVD)			
Carof C. Benson	_		
Division Sign-Off Office of In Vitro Diagnostic Device	<u>a</u>		
Evaluation and Safety			
K M 2001			