

# International **Standard**

**ISO 584** 

# Cardiovascular implants — Cardiac valve prostheses —

Part 1:

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**AMENDMENT 1** 2025-03

Implants cardiovasculaires — Prothèses valvulaires — the full Partie 1: Exigences générales
AMENDEMENT 1

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# Cardiovascular implants — Cardiac valve prostheses —

# Part 1:

# **General requirements**

# AMENDMENT 1

Clause 3, Terms and definitions

3.1

Replace the definition in the term entry as follows:

#### 3.1

#### accessory

,05840-1:2021 Amd 1:2025 device-specific tool that is required to assist in the implantation and/or adjustment of the heart valve tand the full PDF *substitute* (3.30), excluding the delivery system

3.2

Replace the term entry with the following:

#### 3.2

#### adverse event

AE

untoward medical occurrence, disease or injury, or clinical signs (including abnormal laboratory findings) in patients, whether or not related to the investigational medical device and whether anticipated or unanticipated

Note 1 to entry: For users or other persons, this definition is restricted to events related to the use of investigational medical devices or comparators, whether anticipated or unanticipated.

Note 2 to entry. This definition includes events related to the investigational medical device or the comparator, when applicable.

Note 3 to entry: This definition includes events related to the procedures involved.

3.49

Replace the definition in the term entry as follows:

#### 3.49

### regurgitant volume

volume of fluid that flows through and around a heart valve substitute (3.30) in the reverse direction during one cycle (3.13) and is the sum of the closing volume (3.9) and the leakage volume (3.35)

## ISO 5840-1:2021/Amd.1:2025(en)

Note 1 to entry Clinically, it can only be possible to measure the leakage volume and does not always include the closing volume.

Note 2 to entry See Figure 2.

#### 7.2.2.2, Table 3

Replace the entire table with the following:

	Aortic peak	Aortic peak Aortic end Diffe		Differential pressure across closed valveb	
	systolic pressure	diastolic pressure	Aortic	Mitral	
	mmHg	mmHg	mmHg	mmHg	
normotensivea	120	80	100	120	
hypotensive	60	40	50	60	
mild hypertensive	150	95	125	150	
moderate hypertensive	170	105	140	170	
severe hypertensive	195	115	155	195	
very severe hypertensive	210	120	165	210	

For in vitro hydrodynamic minimum performance device testing (i.e. Table 1 and Table 2 of 150 5840-2:2021 and ISO 5840-3:2021), the aortic peak systolic pressure and aortic end diastolic pressure shall be the control pressures.

#### 7.2.2.2, Table 4

Replace the entire table with the following:

	Pulmonary artery peak		Differential pressure across closed valve <sup>a</sup>	
	systolic pressure	diastolic pressure	Pulmonary	Tricuspid
	mmHg	mmHg	mmHg	mmHg
normotensive	25	10	20	25
hypotensive	15	5	10	15
mild hypertensive	45	17	30	45
moderate hypertensive	55	22	40	55
severe hypertensive	75	30	50	75
very severe hypertensive	85	35	60	85

<sup>&</sup>lt;sup>a</sup> With durability testing the "differential pressure across closed valve" shall define the differential pressure condition that shall be maintained for at least 5 % of the cycle.

Annex E, Table E.2

Replace the entire table with the following:

b With durability testing, the "differential pressure across closed valve" shall define the differential pressure condition that shall be maintained for at least 5 % of the cycle.

# ISO 5840-1:2021/Amd.1:2025(en)

Paediatric subpopulation	Systolic duration	MAP	Beat rate <sup>a</sup>	Cardiac output <sup>a</sup>
	%	mmHg	bpm	l/min
newborn	50	45	60; 150; 200	0,3; 0,5; 1; 1,5
infant	50	55	60; 120; 200	0,5; 1; 2; 3
toddler	45	65	60; 100; 160	1,5; 3; 4,5
child	40	80	60; 80; 140	2; 3,5; 5
adolescent	35	100	45; 70; 120	2; 5; 7
<sup>a</sup> See Reference [35].			-	

### Annex E, Table E.3

Replace the entire table with the following:

Paediatric subpopulation	Systolic duration	MAP	Beat rate <sup>a</sup>	Cardiac output <sup>a</sup>
	%	mmHg	bpm 0	l/min
newborn	50	20	60; 150; 200	0,3; 0,5; 1; 1,5
infant	50	20	60; 120, 200	0,5; 1; 2; 3
toddler	45	20	60, 100; 160	1,5; 3; 4,5
child	40	20	60; 80; 140	2; 3,5; 5
adolescent	35	20	45; 70; 120	2; 5; 7
<sup>a</sup> See Reference [35].		,0		

### Annex E, Table E.4

Replace the entire table with the following:

Paediatric subpopulation	Steady back pressure <sup>a</sup>	Steady forward flow rates <sup>a</sup>	
	mmHg	l/min	
newborn	40; 80	1,5; 3; 5; 10	
infant	40; 80; 120	3; 5; 10; 15	
toddler	40; 80; 120	5; 10; 15; 20	
child	40; 80; 120; 160	5; 10; 15; 20; 25	
adolescent	40; 80; 120; 160; 200	5; 10; 15; 20; 25; 30	
<sup>a</sup> See Reference [35].			

# Annex E, Table E,5

Replace the entire table with the following:

<u>Y</u> ,			
Paediatric subpopulation	Steady back pressure <sup>a</sup>	Steady forward flow ratesa	
	mmHg	l/min	
newborn	5; 10; 20	1,5; 3; 5; 10	
infant	5; 10; 20	3; 5; 10; 15	
toddler	5; 10; 20	5; 10; 15; 20	
child	5; 10; 20; 30	5; 10; 15; 20; 25	
adolescent	5; 10; 20; 30; 40	5; 10; 15; 20; 25; 30	
a See Reference [35]			

### ISO 5840-1:2021/Amd.1:2025(en)

Annex H

Replace the title of Figure H.2 with the following:

Figure H.2 — Example of imaging planes (axial view) for symmetric tri-leaflet (left) and a symmetric bi-leaflet design (right) valve

1.2.2.2

Replace the entire subclause with the following text.

A simplified valve test fixture can be used rather than the aortic and mitral transcatheter valve test fixtures as prescribed in ISO 5840-3:2021, Annex C.

I.2.2.7

Replace the Note with the following:

NOTE Figure I.2 reference data was obtained using physiological saline with specific gravity of 1,005 g/ml and viscosity of 1,0 cP.

*I.2.3* 

Replace the entire subclause with the following text.

The pressure difference across the test valve and the standard nozzle shall be measured over a flow rate range of 5 l/min to 30 l/min in 5 l/min increments. At least five measurements at each flow rate shall be collected.

I.3.2.3

Replace the entire subclause with the following text.

For transcatheter valves, the heart valve substitute should be deployed within simplified fixturing/simulated conduits representative of the intended implant site and nominal deployed device diameters. For ViV and ViR indications, the heart valve substitute should be deployed into simulated operating configurations representative of the intended pre-existing prosthetic device.

I.3.2.4

Replace the Note with the following:

MOTE Figure I.4 reference data was obtained using physiological saline with specific gravity of 1,005 g/ml and viscosity of 1,0 cP.

*I.3.3* 

Replace the entire subclause with the following text.

The leakage across the test valve and the standard nozzle shall be measured at five equidistant back pressures appropriate for the intended device application in accordance with Tables 3 and 4. At least