

November 18, 2021

M.I.Tech Co., Ltd. % Heidi Busz Regulatory Consultant Namsa 00 Highway 169 South, Suite 500 Minneapolis, MN 55426

Re: K213251

Trade/Device Name: HANAROSTENT Esophagus Asymmetric (CCC)

Regulation Number: 21 CFR 878.3610 Regulation Name: Esophageal prosthesis

Regulatory Class: Class II Product Code: ESW Dated: October 15, 2021 Received: October 19, 2021

Dear Heidi Busz:

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. Although this letter refers to your product as a device, please be aware that some cleared products may instead be combination products. The 510(k) Premarket Notification Database located at https://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfpmn/pmn.cfm identifies combination product submissions. 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. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. 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

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requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803) for devices or postmarketing safety reporting (21 CFR 4, Subpart B) for combination products (see https://www.fda.gov/combination-products/guidance-regulatory-information/postmarketing-safety-reporting-combination-products); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820) for devices or current good manufacturing practices (21 CFR 4, Subpart A) for combination products; and, if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to https://www.fda.gov/medical-device-problems.

For comprehensive regulatory information about medical devices and radiation-emitting products, including information about labeling regulations, please see Device Advice (https://www.fda.gov/training-and-continuing-education/cdrh-learn). Additionally, you may contact the Division of Industry and Consumer Education (DICE) to ask a question about a specific regulatory topic. See the DICE website (https://www.fda.gov/medical-devices/device-advice-comprehensive-regulatory-assistance/contact-us-division-industry-and-consumer-education-dice) for more information or contact DICE by email (DICE@fda.hhs.gov) or phone (1-800-638-2041 or 301-796-7100).

Sincerely,

Shanil P. Haugen, Ph.D.
Assistant Director
DHT3A: Division of Renal, Gastrointestinal,
Obesity and Transplant Devices
OHT3: Office of GastroRenal, ObGyn,
General Hospital and Urology Devices
Office of Product Evaluation and Quality
Center for Devices and Radiological Health

Enclosure

DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

510(k) Number (if known)

Form Approved: OMB No. 0910-0120

Expiration Date: 06/30/2023 See PRA Statement below.

K213251
Device Name HANAROSTENT® Esophagus Asymmetric (CCC)
Indications for Use (Describe)
The HANAROSTENT® Esophagus Asymmetric (CCC) is intended for maintaining esophageal luminal patency in esophageal strictures caused by intrinsic and/or extrinsic malignant tumors, and occlusion of concurrent esophageal fistula
Type of Use (Select one or both, as applicable)
Prescription Use (Part 21 CFR 801 Subpart D) Over-The-Counter Use (21 CFR 801 Subpart C)

This section applies only to requirements of the Paperwork Reduction Act of 1995.

CONTINUE ON A SEPARATE PAGE IF NEEDED.

DO NOT SEND YOUR COMPLETED FORM TO THE PRA STAFF EMAIL ADDRESS BELOW.

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"An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB number."



5 510(k) Summary

Preparation Date:	September 29, 2021		
Submitter:	M.I.Tech Co., Ltd.		
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Subject Devices:	Trade Name:	HANAROSTENT® Esophagus	
		Asymmetric (CCC)	
	Device:	Prosthesis, Esophageal	
	Regulation Description:	Esophageal prosthesis	
	Review Panel:	Gastroenterology/Urology	
	Regulation Number:	21 CFR 878.3610	
	Device Class:	Class II	
	Product Code:	ESW	
	Regulation Medical Specialty:		
Intended Use /	The HANAROSTENT® Esophagus Asymmetric (CCC) is intended for		
Indications for Use:	maintaining esophageal luminal patency in esophageal strictures cause		
	by intrinsic and/or extrinsic	malignant tumors, and occlusion of	
	concurrent esophageal fistula.		



Device Description:	This self-expanding tubular prosthesis is designed to maintain patency in esophageal strictures caused by intrinsic and/or extrinsic malignant tumors, and occlusion of concurrent esophageal fistulas. It consists of a self-expandable metal stent and a delivery device. The self-expandable metal stent is made of nickel titanium alloy (Nitinol) wire with fully covered silicone membrane, and the delivery device is made of polymeric materials. The stent is loaded into the distal part of the delivery device, and expanded in the body by pulling the outer sheath of the delivery device. The HANAROSTENT® Esophagus Asymmetric (CCC) is		
	intended for single use only.		
Predicate Device:	Trade Name: Applicant: 510(k) Number: Clearance Date: Device: Regulation Description: Review Panel: Regulation Number: Device Class: Product Code: Regulation Medical Specialty:	HANAROSTENT® Esophagus (CCC) M.I.Tech Co., Ltd. K201160 July 23, 2021 Prosthesis, Esophageal Esophageal prosthesis Gastroenterology/Urology 21 CFR 878.3610 Class II ESW General & Plastic Surgery	
Reference Devices:			
Reference Devices.	Boston Scientific's WallFlex™ Esophageal Stents (K091510) Boston Scientific's Ultraflex ™ Esophageal Stents (K955347)		
Comparison to the	Both the subject and predicate devices are designed to maintain patency		
Predicate:	in esophageal strictures caused by intrinsic and/or extrinsic malignant		
	tumors, and occlusion of concurrent esophageal fistulas.		
	The subject device and the predicate device have the same mater manufacturing process, sterilization method, and operation method, have different stent diameters, dumbbell diameters and lengths.		



Technological	The intended use of the subject device, HANAROSTENT® Esophagus			
Characteristics:	Asymmetric (CCC), is identical to the predicate device,			
	HANAROSTENT® Esophagus (CCC).			
	The subject device is identical to the delivery device of predicate device			
	in working length, outer diameter, method of placement, and guidewire			
	compatibility.			
	The subject device has same stent materials as the predicate device and			
	is similar in terms of performance. The subject device is similar to the			
	reference device, Boston Scientific's WallFlex TM Esophageal Stents			
	(K091510) and Ultraflex TM Esophageal Stents (K955347), in terms of			
	stent diameter, dumbbell diameter and length.			
FDA Guidance	The following FDA guidance documents were consulted in preparing this			
Documents:	premarket submission:			
	• Guidance for The Special 510(k) Program, issued September 13, 2019			
	Shelf Life of Medical Devices, issued April 1991			
	Submission and Review of Sterility Information in Premarket			
	Notification (510(k)) Submissions for Devices Labeled as Sterile, issued January 2016			
	• Use of International Standard ISO 10993-1, "Biological evaluation of medical devices - Part 1: Evaluation and testing within a risk management process", issued June 16, 2016			
	 Guidance for The Content of Premarket Notifications for Esophageal and Tracheal Prostheses, issued April 28, 1998 			
	• Technical Considerations for Non-Clinical Assessment of Medical Devices containing Nitinol, draft issued April 2019			
	• Use of International Standard ISO 14971, "Medical devices— Application of risk management to medical devices", issued December, 2019			



Performance	Bench testing was performed to confirm the safety and effectiveness of			
Testing:	the proposed subject devices as compared to the predicate devices.			
	Performance testing was performed as per the design control system. The			
	following tests were conducted:			
	• Foreshortening			
	Expansion force			
	Compression force			
	Guidewire passage			
	Deployment force			
	Deploying accuracy			
	• Dimensions			
	No animal and clinical performance data is submitted in this 510(k).			
Substantial	The subject devices are substantially equivalent to the predicate devices			
Equivalence:	when evaluating intended use and technological characteristics.			
	• The subject device has exact same intended use/indications for use as the predicate.			
	• The subject devices and predicate device are substantially equivalent with only minor technological differences.			
	• These differences do not raise new questions of safety and effectiveness.			
Conclusion:	This comparison demonstrates the subject devices are substantially			
	equivalent to the predicate device. The subject devices are as safe and			
	effective as the predicate device and will perform as intended. Therefore,			
	M.I. Tech respectfully requests market clearance for the subject devices.			