

(ENDORSED)  
**FILED**

NOV 18 2013

DAVID H. YAMASAKI  
Chief Executive Officer/Clerk  
Superior Court of CA County of Santa Clara  
BY \_\_\_\_\_ DEPUTY

SUPERIOR COURT OF CALIFORNIA  
COUNTY OF SANTA CLARA

CHRISTINE COOK,

Plaintiff,

vs.

JEFFREY C. COE, M.D., MEDTRONIC, INC.,  
MEDTRONIC SOFAMOR DANEK USA, INC.,  
et al.

Defendants.

Case No. 1-13-CV-245210

ORDER RE: DEMURRERS TO FIRST  
AMENDED COMPLAINT BY  
DEFENDANTS MEDTRONIC, INC., AND  
MEDTRONIC SOFAMOR DANEK USA,  
INC.

The demurrers to the First Amended Complaint by Defendants Medtronic, Inc., and Medtronic Sofamor Danek USA, Inc. came on for hearing before the Honorable Mary E. Arand on November 12, 2013, at 9:00 a.m. in Department 6. The matter having been submitted, the Court orders as follows:

According to the allegations of the first amended complaint (“FAC”), “[t]his case involves a spinal fusion surgery in which a bio-engineered bone graft device, known as InFUSE® Bone Graft [] was implanted in [plaintiff Christine Cook’s (“Plaintiff”)] spine by Defendant Dr. Jeffrey Coe [ (“Coe”)] in an unconsented and off-label manner wrongfully promoted by Defendants Medtronic, Inc. and Medtronic Sofamor Danek USA, Inc. [(collectively, “Medtronic”)], thereby causing the Plaintiff to suffer from permanent and debilitating injuries and damages.” (FAC, ¶ 1.) “InFUSE® is a surgically implanted medical

1 device containing a genetically engineered protein—rhBMP-2—designed to stimulate bone  
2 growth.” (FAC, ¶ 3.) “In 2002, the Food and Drug Administration (‘FDA’) approved InFuse®  
3 for use in limited surgical applications to treat degenerative disc disease in the lumbar spine.”  
4 (FAC, ¶ 4.) “Specifically, InFUSE ® was approved only in Anterior Lumbar Interbody Fusion  
5 (‘ALIF’) procedures involving a single-level fusion from the L4 to S1 region of the lumbar spine  
6 using the LT-CAGE® Lumbar Tapered Fusion Device Component (‘LT-CAGE’).” (*Id.*)

7 FDA-approved labeling for InFUSE® indicates in bold underlined formatting:

8           These components must be used as a system. The InFuse® Bone  
9           Graft component must not be used without the LT-CAGE Lumbar  
          Tapered Fusion Device component.

10 (FAC, ¶ 5.)

11           “[U]se of InFUSE® in any manner inconsistent with FDA approval, such as the manners  
12 by which it was used in the Plaintiff, is termed ‘off-label.’” (FAC, ¶ 6.) “On or about July 1,  
13 2008, the FDA disseminated a Public Health Notification to physicians warning them of severe  
14 adverse events associated with the off-label use of bone morphogenetic proteins (‘BMPs’),  
15 including InFUSE®, in the cervical spine.” (FAC, ¶ 8.) “Despite actual knowledge of adverse  
16 patient events caused by off-label uses of the product, despite being warned to guard against such  
17 uses, and despite limited FDA approval, Medtronic fraudulently promoted off-label uses of the  
18 InFUSE®, downplayed the risks of adverse events known to be associated with such uses, and  
19 overstated risks associated with traditional spinal fusion techniques to further promote the  
20 product for off-label applications.” (FAC, ¶ 9.) “Medtronic’s fraudulent scheme to promote off-  
21 label uses of InFUSE® was so extensive that it caught the attention of, among others, the FDA  
22 (on numerous occasions)... [since] Medtronic was obligated by law to obtain FDA approval for  
23 each use for which it intended to promote and promoted its product.” (FAC, ¶¶ 12-13.)

24           “Because the off-label applications promoted by Medtronic were not, and have not been,  
25 subjected to FDA analysis and approval, Medtronic’s labeling, instructions, and warnings also  
26 failed to adequately inform consumers of the risks associated with such uses... [and a]s a result  
27 of the Medtronic and Dr. Coe’s wrongful conduct, Plaintiff was caused to undergo an off-label  
28 InFUSE® surgery, which directly and proximately caused her to suffer permanent and

1 debilitating injuries and damages.” (FAC, ¶¶ 13-14.) On June 3, 2013, Plaintiff filed the 53-  
2 page FAC containing 223 paragraphs against Coe, Medtronic, Inc. and Medtronic Sofamor  
3 Danek USA, Inc. (collectively, “Defendants”) for the following causes of action: negligence;  
4 negligence per se; strict liability—manufacturing defect; strict liability—design defect; failure to  
5 warn; breach of express warranty; breach of implied warranty; fraud; constructive fraud; unfair  
6 business practices; and, medical malpractice. Defendants Medtronic, Inc. and Medtronic  
7 Sofamor Danek USA, Inc. (collectively, “Medtronic defendants”) demur to each of the claims of  
8 the FAC.

9 In opposition, Plaintiff “agrees to the voluntary dismissal of her Negligence Per Se  
10 (Count Two), Strict Liability—Manufacturing Defect (Count Three), and Breach of Implied  
11 Warranty (Count Seven) claims.” (Pl.’s opposition to Defs.’ demurrer to Pl.’s FAC  
12 (“Opposition”), p.1:4-7.) Accordingly, the demurrer to the second, third and seventh causes of  
13 action is SUSTAINED without leave to amend.

14 Medtronic demurs to each of the remaining causes of action on the ground that they are  
15 both expressly preempted by the Medical Device Amendments to the Food, Drug and Cosmetic  
16 Act (21 U.S.C. § 360k(a)) as well as impliedly preempted. Medtronic also argues that the fourth  
17 cause of action fails to state sufficient facts to constitute a claim because California law  
18 precludes strict liability for design defect claims for manufacturers of prescription medical  
19 devices.

20  
21 **1. The Demurrer to the Fourth Cause of Action for Strict Liability—Design Defect**  
22 **is Sustained Without Leave to Amend.**

23 “[A] manufacturer of prescription drugs cannot be strictly liable for a design defect and  
24 that the appropriate test for determining a prescription drug manufacturer’s liability for a design  
25 defect involves an application of the ordinary negligence standard.” (*Garrett v. Howmedica*  
26 *Osteonics Corp.* (2013) 214 Cal.App.4<sup>th</sup> 173, 182 (also stating that “a manufacturer is liable for a  
27 design defect only if it failed to warn of a defect that it either knew or should have known  
28 existed”).) Here, Plaintiff already has a claim for strict liability—failure to warn. The demurrer

1 to the fourth cause of action for strict liability—design defect is SUSTAINED without leave to  
2 amend. The Court will not address the preemption issue as to this claim.

3 **2. Plaintiff’s Argument that Medtronic Has Not and Cannot Demonstrate that the**  
4 **Claims are Preempted Due to a Presumption Against Preemption Lacks Merit.**

5 In opposition, Plaintiff asserts that “there is a ‘basic presumption against preemption of  
6 state laws’ operating traditional state domains... [and, i]n arguing Cook’s claims are preempted,  
7 Medtronic has not, and cannot, demonstrate Congress, when enacting § 360k, clearly and  
8 manifestly intended to supplant California’s long-standing concern with protecting the health and  
9 welfare of its citizenry from unreasonably dangerous products.” (See Pl.’s opposition to Defs.’  
10 demurrer to FAC (“Opposition”), p.5:12-26.)

11 As to the first part of Plaintiff’s argument, the United States Supreme Court explained in  
12 *Buckman Co. v. Plaintiffs’ Legal Committee* (2001) 531 U.S. 341 (hereinafter, “*Buckman*”), that  
13 there is “no presumption against preemption” regarding a state-law cause of action involving  
14 Class III medical devices for fraud-on-the-FDA claims because “the relationship between a  
15 federal agency and the entity it regulates is inherently federal in character because the  
16 relationship originates from, is governed by, and terminates according to federal law.” (*Id.* at  
17 pp.347-348.) Moreover, the United States Supreme Court, Ninth Circuit and California District  
18 Courts have frequently found claims regarding medical devices to be expressly or impliedly  
19 preempted. Here, Plaintiff is incorrect that “Medtronic has not, and cannot” demonstrate that the  
20 claims are preempted due to any presumption against preemption.

21 As to Plaintiff’s contention that “Medtronic has not, and cannot, demonstrate Congress,  
22 when enacting § 360k, clearly and manifestly intended to supplant California’s long-standing  
23 concern with protecting the health and welfare of its citizenry from unreasonably dangerous  
24 products,” the United States Supreme Court specifically addressed this point in *Riegel v.*  
25 *Medtronic, Inc.* (2008) 552 U.S. 312. In *Riegel*, the plaintiff had a medical device—an  
26 Evergreen Balloon Catheter marketed by Medtronic—inserted into his coronary artery that was  
27 diffusely diseased and heavily calcified, although the device’s labeling stated that use was  
28 contraindicated for patients with diffuse or calcified stenoses. (*Riegel, supra*, 552 U.S. at p.320.)

1 The label also warned that the catheter should not be inflated beyond its rated burst pressure of  
2 eight atmospheres; however, Riegel’s doctor inflated the catheter five times, to  
3 a pressure of 10 atmospheres and on its fifth inflation, the catheter ruptured, resulting in a heart  
4 blockage requiring emergency coronary bypass surgery. (*Id.*) In determining whether Riegel’s  
5 state based claims were preempted, the Court first noted the language of the Federal Food, Drug,  
6 and Cosmetic Act (FDCA)—21 U.S.C. §301, et seq., as amended by the Medical Device  
7 Amendments of 1976 (MDA)<sup>1</sup>—21 U.S.C. § 360c, et seq., which includes an express preemption  
8 provision that states:

9           Except as provided in subsection (b) of this section, no State or  
10           political subdivision of a State may establish or continue in effect  
11           with respect to a device intended for human use any requirement—  
12           (1) which is different from, or in addition to, any requirement  
13           applicable under this chapter to the device, and  
14           (2) which relates to the safety or effectiveness of the device or to  
15           any other matter included in a requirement applicable to the  
16           device under this chapter.

17 (*Riegel, supra*, 552 U.S. at p.316, quoting 21 U.S.C. § 360k(a).)

18           In determining whether Riegel’s common law were preempted, the *Riegel* court  
19           referenced *Medtronic, Inc. v. Lohr* (1996) 518 U.S. 470 (hereinafter “*Lohr*”), a decision cited by  
20           Plaintiff in her opposition. (See *Riegel, supra*, 552 U.S. at pp.315-325.) Nevertheless, the  
21           *Riegel* court affirmed the Second Circuit’s decision that Riegel’s claims were indeed preempted  
22           by the MDA, noting that the argument that “it is ‘difficult to believe that Congress would,  
23           without comment, remove all means of judicial recourse’ for consumers injured by FDA-  
24           approved devices [is without merit because]... this is exactly what a pre-emption clause for  
25           medical devices does by its terms.” (*Id.* at p.326 (also noting that “the text of the statute--  
26           suggests that the solicitude for those injured by FDA-approved devices... was overcome in  
27           Congress’s estimation by solicitude for those who would suffer without new medical devices if

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28 <sup>1</sup> The United States Supreme Court noted that the MDA were passed in response to the adoption of regulatory  
measures by several states, including California, requiring premarket approval of medical devices. (*Riegel, supra*,  
552 U.S. at p.315.)

1 juries were allowed to apply the tort law of 50 States to all innovations”).) Plaintiff’s first  
2 argument is without merit.

### 3 4 **3. Preemption and the MDA**

5 The United States Supreme Court has decided three preemption cases under the MDA:  
6 *Lohr, Buckman, and Riegel*. “*Lohr* and *Riegel* involved the MDA’s express preemption  
7 provision, and *Buckman* involved implied preemption.” (*Perez v. Nidek Co.* (9th Cir. Cal. 2013)  
8 711 F.3d 1109, 1117.) “[T]he ‘rule that emerges from these cases is that the MDA does  
9 not preempt a state-law claim for violating a state-law duty that parallels a federal-law duty  
10 under the MDA.’” (*Id.*, quoting *Stengel v. Medtronic Inc.* (9<sup>th</sup> Cir. 2013) 704 F.3d 1224, 1228;  
11 see also *Carrelo v. Advanced Neuromodulation Systems, Inc., et al.* (D.P.R. 2011) 777 F.Supp.2d  
12 303, 309 (stating that “[i]n *Riegel*... [t]he Supreme Court held that... state-law tort actions that  
13 are based upon negligence, breach of warranty and strict liability... were preempted by the  
14 MDA... [although it also] held that the MDA does not bar a state from imposing a damages  
15 remedy for a claim that is premised on a violation of federal law because the state duties in such  
16 a case parallel rather than add to federal requirements”; also stating that “[t]hus, state-law claims  
17 against Class III medical manufacturers are effectively preempted... [h]owever, there exists a  
18 narrow back door through which a plaintiff may still advance state-law tort claims as a parallel  
19 action, if the claim alleges that a manufacturer failed to comply with existing federal regulations,  
20 such as those established by a device’s PMA”).)

21 “In order for a state requirement to be parallel to a federal requirement, and thus not  
22 expressly preempted under § 360k(a), the plaintiff must show that the requirements are  
23 ‘genuinely equivalent.’” (*Wolicki-Gables v. Arrow Int’l, Inc.* (11th Cir. 2011) 634 F.3d 1296,  
24 1300, quoting *McMullen v. Medtronic, Inc.* (7th Cir. 2005) 421 F.3d 482, 489; see also  
25 *Caplinger v. Medtronic, Inc.* (W.D. Okla. 2013) 921 F.Supp.2d 1206, 1214; see also *Houston v.*  
26 *Medtronic, Inc.* (C.D. Cal. July 30, 2013) 2013 U.S. Dist. LEXIS 108996 \*1, \*15-\*16.) “State  
27 and federal requirements are not genuinely equivalent if a manufacturer could be held liable  
28 under the state law without having violated the federal law.” (*Id.*) “To properly plead parallel

1 claims that survive preemption, a plaintiff must allege facts (1) showing an alleged violation of  
2 FDA regulations or requirements related to the device, and (2) establishing a causal nexus  
3 between the alleged injury and the violation.” (*Houston, supra*, 2013 U.S. Dist. LEXIS 108996  
4 at pp.\*15-\*16, quoting *Erickson v. Boston Scientific Corp.* (C.D. Cal. 2011) 846 F. Supp. 2d  
5 1085, 1092; see also *Cohen v. Guidant Corp.* (C.D. Cal. Feb. 15, 2011) 2011 U.S. Dist. LEXIS  
6 18786 \*1, \*3 (also stating that “[a]bsent factual support and details, general allegations that  
7 Defendants failed to comply with federal requirements are inadequate to plead parallel claims  
8 under *Riegel*”); see also *Eidson v. Medtronic, Inc.* (N.D. Cal. Oct. 3, 2013) 2013 U.S. Dist.  
9 LEXIS 144179 \*1, \* 21.)

10  
11 **A. The claims at issue, generally**

12 Plaintiff’s opposition identifies “three primary areas of Medtronic’s federal violations:  
13 (1) Medtronic’s off-label promotion of the bone growth component of Infuse alone, and for use  
14 in cervical fusion surgeries, for which the device was both unapproved and known by Medtronic  
15 to be unsafe... (2) Medtronic’s failure to submit a PMA supplement despite its awareness  
16 (indeed promotion) of new indications of Infuse and knowledge of device failures necessitating  
17 modification of the device or its labeling... and (3) Medtronic’s failures to submit adverse events  
18 reports to the FDA when it learned of information reasonably suggesting that Infuse may have  
19 caused or contributed to a death or serious injury....” (Opposition, p.6:1-11.)

20  
21 **B. To the extent that the claims are based on alleged misrepresentations and**  
22 **omissions contained in the actual warnings and labels accompanying the**  
23 **Infuse Device, they are expressly preempted.**

24 In the recent case, *Eidson v. Medtronic, Inc.* (N.D. Cal. Oct. 3, 2013) 2013 U.S. Dist.  
25 LEXIS 144179 \*1, the Northern District of California addressed this exact issue. The plaintiffs  
26 were patients whose physicians used the Infuse Device in an off-label manner and alleged that  
27 Medtronic encouraged the physicians to use the device in such a manner. (*Id.* at pp.\*3-\*8.) Like  
28

1 Plaintiff, the plaintiffs in *Eidson* alleged claims for negligence, strict liability—design defect,  
2 failure to warn, and fraud.<sup>2</sup> (*Id.* at pp.\*6-\*8.) The *Eidson* plaintiffs similarly alleged that:

3 ‘Defendants fraudulently concealed and misrepresented the health  
4 and safety hazards, symptoms, constellation of symptoms, diseases  
5 and/or health problems associated with the off-label use of  
6 Infuse®;’ 2) ‘Defendants fraudulently concealed and  
7 misrepresented their practice of promoting and marketing to  
8 physicians, including Plaintiff’s physician, the practice of using  
9 Infuse® off-label by utilizing a posterior-approach, using Infuse®  
10 for an off-label indication, and by using Infuse® without an LT  
11 Cage;’ 3) ‘Defendants fraudulently concealed and misrepresented  
12 information about the known comparative risks and benefits of the  
13 use of Infuse® and the relative benefits and availability of alternate  
14 products, treatments and/or therapies;’ and 4) ‘Plaintiffs’  
15 physicians were justified in relying, and did rely, on Defendants’  
16 concealment of information and misrepresentations about the  
17 safety risks related to Infuse® in deciding to make off-label use of  
18 Infuse for lumbar spine fusion surgery. As the direct, proximate  
19 and legal cause and result of the Defendants’ fraudulent  
20 concealment and misrepresentations . . . , Plaintiff has been  
21 injured.’

22 (*Id.* at pp.\*28-\*29.)

23 The *Eidson* court found that “[t]o the extent that *Eidson*’s fraudulent misrepresentation/  
24 fraudulent inducement claim is based upon alleged misrepresentations and omissions contained  
25 in the actual warnings and labels accompanying the Infuse Device, the claim is expressly  
26 preempted.” (*Id.* at pp.\*31-\*32.) The court reasoned that “requiring Defendants to alter the  
27 Infuse Device’s warnings and label in order to provide extra warnings beyond those already  
28 approved during the PMA process would impose labeling and warning requirements ‘different  
29 from, or in addition to’ federal requirements for the Infuse Device.” (*Id.* at p.\*32.)

30 Similarly, in *McGuan v. Endovascular Technologies, Inc.* (2010) 182 Cal.App.4<sup>th</sup> 974,  
31 the plaintiff’s claim for fraudulent concealment alleged that defendants “withheld from the FDA,  
32 surgeons and public, reports of serious failures and resulting problems caused by the device” and  
33 failed to disclose that a medical device “was dangerous, defective, and likely to cause serious  
34 consequences to users.” (*Id.* at pp.983-984.) The Sixth District determined that the claim was

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35 <sup>2</sup> Plaintiff additionally alleges claims for breach of express warranty, constructive fraud and unfair business  
36 practices.



1 expressly preempted because “the jury would be required to find that the warnings, which were  
2 approved by the FDA, were inadequate... [and thus] would impose ‘requirements’ that are  
3 ‘different from, or in addition to’ those imposed by the FDA.” (*Id.*)

4 Accordingly, any claim, to the extent that it is based on alleged misrepresentations and  
5 omissions contained in the actual warnings and labels accompanying the Infuse Device, are  
6 expressly preempted.

7  
8 **C. To the extent that the first cause of action is based on Medtronic’s promotion  
of the off-label usage, it is impliedly preempted.**

9 The FAC alleges that “[a] manufacturer violates the FDCA if its conduct demonstrates  
10 intent to encourage product use inconsistent with or outside the scope of the product’s approved  
11 label... [and] it is illegal [under the FDCA] for device and drug manufacturers, such as  
12 Medtronic, to actively promote products for uses not approved by the FDA, which is precisely  
13 the conduct in which Medtronic engaged to drive sales of InFUSE®.” (FAC, ¶¶ 34-38.)

14 The *Eidson* court also addressed this issue. As with Plaintiff’s allegations, “the claim is  
15 in substance a claim for violating the FDCA and exists solely by virtue of the federal ban on off-  
16 label promotion.” (*Eidson, supra*, 2013 U.S. Dist. LEXIS 144179 at pp.\*54-\*55.) “The state  
17 law does not exist independently of federal requirements... [and the] negligence claim based on  
18 Defendants’ promotion of off-label use is impliedly preempted.” (*Id.*; see also *Houston, supra*,  
19 2013 U.S. Dist. LEXIS 108996 at p.\*27 (stating that “any negligence claim based solely on  
20 illegal off-label promotion is impliedly preempted under *Buckman* and §337(a)”).) Thus, to the  
21 extent that the first cause of action for negligence is based on Medtronic’s promotion of the off-  
22 label usage, it is impliedly preempted.

23  
24 **D. Similarly, to the extent that the first cause of action is based on Medtronic’s  
25 failure to submit a PMA supplement, it is likewise impliedly or expressly  
preempted.**

26 The second category of allegations asserted by Plaintiff in her opposition is premised on  
27 “Medtronic’s failure to submit a PMA supplement despite its awareness (indeed promotion) of  
28 new indications of Infuse and knowledge of device failures necessitating modification of the

1 device or its labeling.” Only the first cause of action alleges such a failure by Medtronic.<sup>3</sup> (See  
2 FAC, ¶ 134, subpara. (e) (alleging negligence for “failing to seek a PMA supplement or  
3 supplements”).)

4 The FAC does not allege that a medical device manufacturer has a continuing duty to  
5 submit a PMA supplement. (See FAC, ¶¶ 31-32.) Instead, the FAC alleges that it is a violation  
6 of the FDCA if a manufacturer introduces an adulterated device, such as a Class III device that  
7 does not comply with PMA requirements. (See FAC, ¶ 35.) As stated by the Fourth District’s  
8 explanation of the PMA process in *Blanco v. Baxter Healthcare Corp.* (2008) 158 Cal.App.4<sup>th</sup>  
9 1039, the FDA—as a specific federal requirement—approves a PMA application as to a  
10 particular device, approving of a specific product’s design, testing, intended use, manufacturing  
11 methods, performance standards, and labeling. (*Id.* at p.1052.) “Once the FDA approves a PMA  
12 application for a device, the manufacturer must comply with those conditions of approval in the  
13 PMA order.” (*Id.* at p.1053.) “Any deviation from those conditions of approval concerning  
14 safety and effectiveness must be approved by the FDA.” (*Id.*) Here, any state law claim based  
15 on a failure to seek a PMA supplement would impose requirements ‘different from, or in  
16 addition to’ federal requirements, and thus are expressly preempted. (See *Enlow v. St. Jude*  
17 *Med., Inc.* (W.D. Ky. 2003) 210 F. Supp. 2d 853, 858 (stating that “any of the plaintiff’s claims  
18 seeking to impose a state requirement that differs from, adds to, or impedes the implementation  
19 and enforcement of the design, manufacturing processes, or labeling contained in mechanical  
20 heart valve’s original PMA or PMA Supplement is preempted”); see also *Alfred v. Mentor Corp.*  
21 (W.D. Ky. Mar. 5, 2007) 2007 U.S. Dist. LEXIS 15535 \*1, \*8-\*15 (state law claims seeking to  
22 enforce additional requirements to PMA process are preempted); see also *Sprint Fidelis Leads*  
23 *Prods. Liab. Litig. v. Medtronic, Inc. (In re Medtronic, Inc.)* (8th Cir. 2010) 623 F.3d 1200, 1205  
24 (same).)

25 Other courts have noted that such claims are impliedly preempted as well as they are  
26 essentially fraud-on-the-FDA claims. (See *Purchase v. Advanced Bionics, LLC* (W.D. Tenn.  
27

28 <sup>3</sup> The second cause of action for negligence per se also alleges a failure to seek a PMA supplement (see FAC, ¶ 145, subpara. (a)); however, Plaintiff agreed to voluntary dismissal of that claim.

1 2011) 896 F. Supp. 2d 694, 696 (stating that “[t]o the extent that Plaintiffs’ claims are based on  
2 Advanced Bionics’ purported failure to submit a PMA Supplement Application and obtain PMA  
3 approval ..., the claims are impliedly preempted [because] claims premised on PMA approval  
4 are disguised fraud-on-the-FDA claims and, therefore, impliedly preempted”); see also *Littlebear*  
5 *v. Advanced Bionics, LLC* (N.D. Okla. 2012) 896 F. Supp. 2d 1085, 1092 (same).

6 Either way, to the extent that the first cause of action is based on Medtronic’s failure to  
7 submit a PMA supplement, it is preempted—be it expressly or impliedly.

8  
9 **E. To the extent that the claims are based on a failure to disclose that the Infuse  
10 Device has not been approved for off-label use, they are expressly preempted.**

11 In *Perez v. Nidek Co.* (9th Cir. Cal. 2013) 711 F.3d 1109, the plaintiff alleged that the  
12 defendant manufacturer obtained three PMAs for a laser eye-treatment medical device to treat  
13 nearsightedness, but the laser was not approved for treating nearsightedness at the time of his  
14 operation. (*Id.* at p.1112.) The plaintiff alleged a fraud by omission claim, asserting that the  
15 defendants misled patients “by failing to disclose that the Laser was not FDA approved for  
16 hyperopic surgeries, even though [defendant manufacturer] Nidek and the doctors knew or  
17 should have known that the [patients] believed the Laser was FDA approved for such surgeries.”  
18 (*Id.* at p.1117.) In holding that the “fraud by omission claim is expressly preempted by  
19 §360k(a),” the *Perez* court stated that the claim “effectively seeks to write in a new provision to  
20 the FDCA: that physicians and medical device companies must affirmatively tell patients when  
21 medical devices have not been approved for a certain use.” (*Id.* at pp.1118-1119.) “We do not  
22 pass judgment on whether this would be a wise rule for the FDA to adopt.” (*Id.* at p.1119.) “It is  
23 sufficient for our inquiry that it has not done so.” (*Id.*)

24 Here, the FAC similarly alleges that Medtronic failed to warn and/or disclose that off-  
25 label use of InFUSE® was not FDA approved and/or would not be approved in the future. (See,  
26 e.g., FAC, ¶¶ 134, subpara. (c).) To the extent that the claims are based on a failure to disclose  
27 that the Infuse Device has not been approved for off-label use, they are expressly preempted.

28

1           **F. To the extent that claims are based on alleged misrepresentations and**  
2           **omissions made while promoting the off-label use of the Infuse Device, or for**  
3           **Medtronic’s failure to report adverse events to the FDA, the claims are not**  
4           **preempted. However, the claims nevertheless fail to allege facts showing an**  
5           **alleged violation of FDA regulations or requirements related to the device,**  
6           **and establishing a causal nexus between the alleged injury and the violation.**

7           There are two limited bases for Plaintiff’s claims that may not be preempted. However,  
8           as currently alleged the causes of action fail to state facts properly pleading parallel claims that  
9           survive preemption: the non-negligence claims based on Medtronic’s alleged misrepresentations  
10          and omissions made while promoting off-label uses of the Infuse Device; and, the claims based  
11          on Medtronic’s alleged failure to report adverse events to the FDA. (See *Eidson, supra*, 2013  
12          U.S. Dist. LEXIS 144179 at pp.\*43-\*48, \*54-\*56; see also *Stengel v. Medtronic, Inc.* (9<sup>th</sup> Cir.  
13          2013) 704 F.3d 1224, 1233; see also *Ramirez v. Medtronic Inc.* (D. Ariz. Oct. 24, 2013) 2013  
14          U.S. Dist. LEXIS 152977 \*1, \*5-\*7; see also *Alton v. Medtronic, Inc.* (D. Or. Sept. 6, 2013)  
15          2013 U.S. Dist. LEXIS 127190 \*1, \*75-\*78, \*84-\*87, \*91-\*94; but see *Caplinger v. Medtronic,*  
16          *Inc.* (W.D. Okla. 2013) 921 F. Supp. 2d 1206, 1219-1221 (stating that a claim “based upon  
17          alleged misrepresentations and omissions regarding defendants’ practice of promoting and  
18          marketing to physicians the off-label use of the Infuse Device in posterior-approach lumbar spine  
19          surgery... is impliedly preempted... [because t]he conduct plaintiff complains of – how  
20          defendants are promoting and marketing to physicians the off-label use of the Infuse Device in  
21          posterior-approach lumbar spine surgery – is governed by the FDCA... [and t]o determine  
22          whether said conduct is improper would require reliance on the requirements of the FDCA”; but  
23          also noting that whether a claim “based upon alleged misrepresentations and omissions  
24          defendants made while promoting and marketing to physicians the off-label use of the Infuse  
25          Device in posterior-approach lumbar spine surgery... is preempted, however, can not be  
26          determined due to the lack of specificity in plaintiff’s Amended Complaint”).)

27          The Court notes that the Sixth District case of *McGuan, supra*, 182 Cal.App.4<sup>th</sup> 974, is  
28          inapposite as to claims based on these limited bases because the facts in *McGuan* did not  
29          involve alleged misrepresentations and omissions made while promoting off-label uses, and the  
30          court in *McGuan* was addressing a motion for summary judgment, an evidentiary motion. In its

1 discussion of a claim for fraud on patients and their physicians, the *McGuan* court specifically  
2 stated that “[i]t is undisputed that the FDA found no violations of federal regulations after March  
3 2001... [t]hus, if plaintiffs were allowed to proceed with their state law fraud claims, a finding of  
4 liability would also ‘conflict with the FDA’s responsibility to police fraud consistently with the  
5 Administration’s judgment and objectives.’” (*McGuan, supra*, 182 Cal.App.4<sup>th</sup> at p.986.)


6 Nevertheless, as Medtronic argues, the claims fail to allege facts properly pleading  
7 parallel claims that survive preemption. (See *Houston, supra*, 2013 U.S. Dist. LEXIS 108996 at  
8 pp.\*15-\*16 (stating that “to properly plead parallel claims that survive preemption, a plaintiff  
9 must allege facts (1) showing an alleged violation of FDA regulations or requirements related to  
10 the device, and (2) establishing a causal nexus between the alleged injury and the violation”);  
11 see also *Cohen v. Guidant Corp.* (C.D. Cal. Feb. 15, 2011) 2011 U.S. Dist. LEXIS 18786 \*1, \*3  
12 (also stating that “[a]bsent factual support and details, general allegations that Defendants failed  
13 to comply with federal requirements are inadequate to plead parallel claims under *Riegel*”); see  
14 also *Eidson v. Medtronic, Inc.* (N.D. Cal. Oct. 3, 2013) 2013 U.S. Dist. LEXIS 144179 \*1, \* 21.)

15  
16 Based on the foregoing, it is ORDERED AS FOLLOWS:

17 The demurrer to the second, third, fourth, and seventh causes of action is SUSTAINED  
18 WITHOUT LEAVE TO AMEND. The demurrer to the first, fifth, sixth, and eighth through  
19 tenth causes of action of the FAC is SUSTAINED with 10 days leave to amend.

20 Plaintiff’s request for judicial notice and Medtronic’s requests for judicial notice were not  
21 the basis for the decision. Both parties’ requests for judicial notice are DENIED.

22  
23 Dated: November 15, 2013

  
\_\_\_\_\_  
Mary E. Arand  
Judge of the Superior Court

