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4 **UNITED STATES DISTRICT COURT**
5 **SOUTHERN DISTRICT OF CALIFORNIA**

6 IRENA MICHAJLUN and JAY
7 MARKOFF,

8 Plaintiffs,

9 vs.

10 BAUSCH & LOMB, INC.,

11 Defendant.

CASE NO. 14-cv-1365 JM (JMA)

ORDER GRANTING IN PART
AND DENYING IN PART BAUSCH
& LOMB'S MOTION TO DISMISS
PLAINTIFFS' FIRST AMENDED
COMPLAINT

12 This order addresses Defendant Bausch & Lomb's ("B&L's") motion
13 to dismiss Plaintiffs' first amended complaint, (Doc. No. 15), and its request for
14 judicial notice, (Doc. No. 16). The matters were fully briefed and were found
15 suitable for resolution without oral argument pursuant to Local Civil Rule 7.1.d.1.
16 For the reasons set forth below, the court grants B&L's request for judicial notice;
17 denies B&L's motion to dismiss Plaintiffs' claims for strict liability for failure to
18 warn, negligent failure to warn, and loss of consortium; and dismisses, without
19 leave to amend, Plaintiffs' claims for deceptive advertising and deceptive business
20 practices.

21 **BACKGROUND**

22 **I. Plaintiffs' Allegations¹**

23 This case involves a medical device manufactured by B&L called Crystalens.
24 (FAC ¶ 2.) Crystalens is an artificial lens that is surgically implanted in the eye
25 to replace a person's natural lens after it is removed during cataract surgery. (Id.)

26
27 ¹ Except where noted, the facts in this section are drawn from Plaintiffs' first
28 amended complaint ("FAC") and the attached exhibits, (Doc. No. 14, Exhs. A–F).
For purposes of this motion, Plaintiffs' allegations are taken as true to the extent
that they are well pleaded.

1 Plaintiff Michajlun had cataract surgery on April 10, 2012, and had a Crystalens
2 implanted in her left eye. (Id. ¶ 29.) Soon after the surgery, she experienced a
3 condition called “Z syndrome.” (Id. ¶ 30.) According to Plaintiffs, Z syndrome
4 occurs when one of Crystalens’s arms that attach to the eye muscle detaches and
5 folds forward inside the eye, causing the lens to assume a “Z” shape and to stop
6 functioning. (Id. ¶ 17.) Plaintiffs allege that Michajlun suffered pain, discomfort,
7 and various financial losses, including the cost of surgical procedures to try to
8 correct the problem, and that her husband, Plaintiff Markoff, suffered a loss of
9 consortium. (Id. ¶¶ 30–32.) Michajlun claims that if she and her doctor had
10 known of the risk of Z syndrome, she would not have agreed to having Crystalens
11 implanted, and, on information and belief, her doctor would not have recommended
12 it. (Id. ¶ 46.)

13 Plaintiffs filed their initial complaint in San Diego Superior Court.
14 (Doc. No. 1.) After B&L removed the case to this court on the basis of diversity
15 jurisdiction, Plaintiffs filed the instant first amended complaint, asserting five
16 causes of action under California law: (1) strict liability for failure to warn;
17 (2) negligent failure to warn; (3) deceptive advertising in violation of California’s
18 False Advertising Law (“FAL”), California Business & Professions Code § 17500;
19 (4) deceptive business practices in violation of California’s Unfair Competition
20 Law (“UCL”), California Business & Professions Code § 17200; and (5) loss of
21 consortium. (FAC ¶¶ 33–66.) Plaintiffs seek to litigate the third and fourth claims,
22 under the FAL and UCL, as class claims on behalf of individuals who had
23 Crystalens implanted in their eye(s) between April 7, 2010, and April 8, 2014.²
24 (Id. ¶¶ 67–69.) Plaintiffs seek money damages on the first, second, and fifth claims,
25 and restitution or disgorgement on the third and fourth claims. (Id. ¶¶ 47, 51, 56,
26 62, 66.)

27
28 ² Plaintiffs do not identify the significance of these dates.

1 Plaintiffs set forth the following general allegations: Crystalens is a Class III
2 medical device subject to regulation by the Food and Drug Administration (“FDA”).
3 (Id. ¶ 12.) The FDA’s initial premarket approval (“PMA”) for Crystalens required
4 B&L, as a condition of continued approval to distribute Crystalens, to submit an
5 adverse-reaction report to the FDA within ten days after receiving information
6 concerning any injury attributable to the device if the injury was not addressed by
7 the device’s labeling, or if it was addressed by the labeling, if the injury was
8 occurring with unexpected severity or frequency. (Id. ¶ 22.) Similarly, the FDA
9 requires device manufacturers to establish internal procedures for reviewing
10 complaints and event reports, see 21 C.F.R. § 820.198(a),³ and to report to the FDA
11 within thirty days after becoming aware of information suggesting that one of the
12 manufacturer’s devices may have caused or contributed to a death or serious injury,
13 or has malfunctioned and would be likely to cause death or serious injury if the
14 malfunction were to recur, see 21 C.F.R. § 803.50(a).⁴ (Id. ¶ 39.)

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16 _____
17 ³ 21 C.F.R. § 820.198(a) provides:

18 (a) Each manufacturer shall maintain complaint files. Each
19 manufacturer shall establish and maintain procedures for receiving,
20 reviewing, and evaluating complaints by a formally designated unit.
Such procedures shall ensure that:

- 21 (1) All complaints are processed in a uniform and timely manner;
22 (2) Oral complaints are documented upon receipt; and
23 (3) Complaints are evaluated to determine whether the complaint
represents an event which is required to be reported to the FDA under
part 803 of this chapter, Medical Device Reporting.

24 ⁴ 21 C.F.R. § 803.50(a) provides:

25 (a) If you are a manufacturer, you must report to us no later than 30
26 calendar days after the day that you receive or otherwise become aware
27 of information, from any source, that reasonably suggests that a device
that you market:

- 28 (1) May have caused or contributed to a death or serious injury; or
(2) Has malfunctioned and this device or a similar device that you
market would be likely to cause or contribute to a death or serious
injury, if the malfunction were to recur.

1 In November 2008, an article called *Two Cases of Z Syndrome with*
2 *Crystalens After Uneventful Cataract Surgery* was published. (FAC ¶ 14; Exh. B.)
3 It reported that “[Z syndrome] is a unique complication with this type of hinged
4 accommodating [intraocular lens],” and it suggested steps that could be used to
5 minimize the risk of Z syndrome at the time of implantation. (Id.) According to
6 Plaintiffs, the article indicates that at least four incidents of Z syndrome had
7 occurred by the time the article was published. (Id. ¶ 24.)

8 In April 2009, B&L submitted an adverse-event report to the FDA reporting
9 an occurrence of Z syndrome. (FAC ¶ 19; Exh. D.)

10 In April 2010, an article called *Z Syndrome Still Possible with Newer*
11 *Generation Crystalens* was published. (FAC ¶ 23; Exh. C.) The article stated
12 that Z syndrome had been “reported in newer generations of the lens, including the
13 HD and 5-0,” and that one of the doctors quoted in the article, a Dr. Safran, was
14 “working with [B&L] to create an instrument to help aid the surgical correction
15 of Z syndrome.” (FAC ¶¶ 18, 23; Exh. C.)

16 In August 2010, B&L created an advertising circular to promote Crystalens.
17 (FAC ¶ 12; Exh. A.) The circular was placed in ophthalmologists’ offices throughout
18 California for potential Crystalens buyers to read. (FAC ¶ 21.) It contains two
19 statements that Plaintiffs contend were false or misleading.

20 First, the circular states: “The risks of implantation with Crystalens are
21 generally the same potential risks that exist for implanting all intraocular lenses.”
22 (Id. ¶ 14.) Plaintiffs claim that this statement was false and misleading because,
23 as the 2008 article indicates, Z syndrome is a risk unique to Crystalens. (Id.)
24 According to Plaintiffs, B&L knew that the statement was false because, by the time
25 it created the circular, it had submitted the 2009 adverse-event report to the FDA
26 and, as of 2010, it was working with Dr. Safran to create a surgical tool to correct
27 Z syndrome. (Id. ¶¶ 18–19.) Plaintiffs contend that this statement thus constituted

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1 misbranding,⁵ in violation of 21 U.S.C. § 352(q),⁶ 21 C.F.R. § 801.6,⁷ and the FAL
2 and UCL. (FAC ¶ 15.)

3 Second, the circular states: “Only your surgeon . . . can explain the
4 applicable risks.” (Id. ¶ 28; Exh. A.) Plaintiffs claim that this statement was false
5 and misleading because B&L had failed to comply with its duty to file adverse-
6 reaction reports for all known incidents of Z syndrome. (FAC ¶¶ 23–28.) Although
7 the 2008 article indicated that there had already been at least four incidents of
8 Z syndrome, and the 2010 article stated that Z syndrome had also occurred in newer
9 models of the lens, and Michajlun herself experienced Z syndrome, Plaintiffs’
10 search of B&L’s adverse-reaction reports for Crystalens uncovered only two
11 reports, one dated April 28, 2009 (before the 2010 article), and one dated December
12 13, 2010 (after the 2010 article).⁸ (Id. ¶¶ 23–25.) Plaintiffs contend that B&L’s
13 failure to comply with its reporting duty diminished physicians’ ability to assess
14 and warn of the risk of Z syndrome, so that this second statement also constituted
15 misbranding in violation of 21 C.F.R. § 801.6. (Id. ¶ 28.)

16
17 ⁵ Plaintiffs do not identify what the effect of misbranding is under federal
18 law. Their claims appear to be related to 21 U.S.C. § 331(a), which prohibits
19 “[t]he introduction . . . into interstate commerce of any food, drug, device, tobacco
20 product, or cosmetic that is adulterated or *misbranded*.” (Emphasis added.)

21 ⁶ 21 U.S.C. § 352(q) provides in relevant part:

22 A drug or device shall be deemed to be misbranded . . . [i]n the case
23 of any restricted device distributed or offered for sale in any State, if
24 (1) its advertising is false or misleading in any particular

25 ⁷ 21 C.F.R. § 801.6 provides:

26 Among representations in the labeling of a device which render such
27 device misbranded is a false or misleading representation with respect
28 to another device or a drug or food or cosmetic.

29 ⁸ B&L asserts that “additional reports were submitted,” and it refers the
30 court to the FDA’s Manufacturer and User Facility Device Experience (“MAUDE”)
31 database, at <http://www.accessdata.fda.gov/scripts/cdrh/cfdocs/cfmaude/search.cfm>.
32 (Doc. No. 15-1 at 11 n.5.) However, B&L did not provide the court (or Plaintiffs)
33 with copies of the reports or any means of identifying them, and did not explain
34 what the additional reports demonstrate. Accordingly, the court does not address
35 them here.

1 **II. B&L’s Motion to Dismiss and Request for Judicial Notice**

2 B&L moved to dismiss Plaintiffs’ amended complaint on October 22, 2014,
3 (Doc. No. 15), and filed a separate request for judicial notice, (Doc. No. 16). The
4 hearing, which was initially scheduled for December 15, 2014, was continued for
5 good cause until February 9, 2015. (Doc. No. 20.) Plaintiffs filed an opposition on
6 January 26, 2015, (Doc. No. 22), and B&L replied on February 2, 2015, (Doc. No.
7 23). Neither party requested oral argument, and the court took the matter under
8 submission on February 3, 2015. (Doc. No. 24.)

9 **DISCUSSION**

10 **I. Request for Judicial Notice**

11 B&L asks the court to take judicial notice of two items: (1) the FDA
12 webpage containing links to the original PMA for Crystalens and all applicable
13 supplements; and (2) the FDA-approved patient labeling for Crystalens, which can
14 be downloaded from the FDA’s website. (Doc. No. 16 & Exhs. A & B.)

15 Federal Rule of Evidence 201 provides that courts may take judicial notice
16 of facts that are not subject to reasonable dispute because they are generally known
17 or are capable of accurate and ready determination. See Fed. R. Evid. 201(b). The
18 court may take notice of such facts on its own, and “must take judicial notice if a
19 party requests it and the court is supplied with the necessary information.” Fed. R.
20 Evid. 201(c). Matters of public record are proper subjects of judicial notice, but a
21 court may take notice only of the existence and authenticity of an item, not the truth
22 of its contents. See Lee v. City of Los Angeles, 250 F.3d 668, 689–90 (9th Cir.
23 2001). Under these rules, courts may take judicial notice of “the records and reports
24 of administrative bodies,” United States v. Ritchie, 342 F.3d 903, 909 (9th Cir.
25 2003) (quotation marks omitted), including documents and information posted on
26 the FDA’s public website, see Eidson v. Medtronic, Inc., 981 F. Supp. 2d 868,
27 878–79 (N.D. Cal. 2013) (collecting cases).

28 Plaintiffs do not oppose B&L’s request, and the documents are available

1 on the FDA’s public website and not subject to reasonable dispute. Accordingly,
2 the court grants B&L’s request for judicial notice of these items.

3 **II. Motion to Dismiss**

4 B&L contends that Plaintiffs’ claims must be dismissed for failure to state
5 a claim because they are expressly preempted by the express-preemption provision
6 of the Medical Device Amendments of 1976 (“MDA”), 21 U.S.C. § 360k(a).
7 (Doc. No. 15-1 at 4–13.) Plaintiffs counter that their claims fall within the narrow
8 exception for “parallel” state and federal claims. (Doc. No. 22 at 3–6.) As set forth
9 below, one of Plaintiffs’ theories is preempted, but the other is not. Following that
10 discussion, the court addresses B&L’s additional arguments and the implications for
11 each of Plaintiffs’ causes of action.

12 **A. Legal Standards**

13 A motion to dismiss for failure to state a claim under Federal Rule of Civil
14 Procedure 12(b)(6) challenges the legal sufficiency of the pleadings. To overcome
15 such a motion, the complaint must contain “enough facts to state a claim to relief
16 that is plausible on its face.” Bell Atl. Corp. v. Twombly, 550 U.S. 544, 570 (2007).
17 “A claim has facial plausibility when the plaintiff pleads factual content that allows
18 the court to draw the reasonable inference that the defendant is liable for the
19 misconduct alleged.” Ashcroft v. Iqbal, 556 U.S. 662, 678 (2009). Factual
20 pleadings merely consistent with a defendant’s liability are insufficient to survive
21 a motion to dismiss because they establish only that the allegations are possible
22 rather than plausible. See id. at 678–79. The court should grant relief under Rule
23 12(b)(6) if the complaint lacks either a cognizable legal theory or facts sufficient to
24 support a cognizable legal theory. See Balistreri v. Pacifica Police Dep’t, 901 F.2d
25 696, 699 (9th Cir. 1990).

26 When ruling on a Rule 12(b)(6) motion, the court “must take all of the
27 factual allegations in the complaint as true,” but is “not bound to accept as true a
28 legal conclusion couched as a factual allegation.” Iqbal, 556 U.S. at 678. Further,

1 the court “need not accept as true . . . allegations that contradict facts that may be
2 judicially noticed by the court, and may consider documents that are referred to in
3 the complaint whose authenticity no party questions.” Shwarz v. United States,
4 234 F.3d 428, 435 (9th Cir. 2000) (citations omitted). A court may look beyond
5 the complaint to matters of public record, including administrative records, without
6 converting the Rule 12(b)(6) motion into one for summary judgment. See Shawn
7 v. Hahn, 56 F.3d 1128, 1129 n.1 (9th Cir. 1995).

8 Federal Rule of Civil Procedure Rule 15 provides that courts should freely
9 grant leave to amend when justice requires it. Accordingly, when a court dismisses
10 a complaint for failure to state a claim, “leave to amend should be granted unless
11 the court determines that the allegation of other facts consistent with the challenged
12 pleading could not possibly cure the deficiency.” DeSoto v. Yellow Freight Sys.,
13 Inc., 957 F.2d 655, 658 (9th Cir. 1992) (internal quotation marks omitted).

14 Amendment may be denied, however, if amendment would be futile. See id.

15 **B. Preemption Under the MDA**

16 Congress enacted the MDA to extend the coverage of the Food, Drug,
17 and Cosmetic Act (“FDCA”) to medical devices, after various states enacted laws
18 requiring premarket approval of medical devices. See Riegel v. Medtronic, Inc.,
19 552 U.S. 312, 315–16 (2008). The MDA “imposed a regime of detailed federal
20 oversight.” Id. at 316. To that end, the MDA expressly preempts state requirements
21 that are “different from, or in addition to” federal requirements applicable to a
22 device:

23 Except as provided in subsection (b) of this section, no State or
24 political subdivision of a State may establish or continue in effect
25 with respect to a device intended for human use any requirement—

26 (1) which is *different from, or in addition to, any requirement*
applicable under this chapter to the device, and

27 (2) which relates to the safety or effectiveness of the device or to
28 any other matter included in a requirement applicable to the device
under this chapter.

1 21 U.S.C. § 360k(a) (emphasis added).⁹

2 In Riegel v. Medtronic, Inc., the Supreme Court specified a two-step
3 framework for determining whether a state-law claim is preempted under § 360k(a).
4 See 552 U.S. at 321–22. First, the court must determine “whether the Federal
5 Government has established requirements applicable to [the device at issue].” Id.
6 at 321. If it has, the court must then determine whether the plaintiff’s claims would
7 impose requirements “different from, or in addition to” the federal requirements.
8 Id. at 322. The MDA’s reference to state “requirements” includes not just duties
9 imposed by statute and regulation, but also those imposed by common-law tort
10 doctrines. See id. at 324–25.

11 Under this framework, the only state-law claims that are not expressly
12 preempted are claims premised on violations of state duties that “parallel” duties
13 imposed by the FDA. Stengel v. Medtronic, Inc., 704 F.3d 1224, 1228 (9th Cir.
14 2013) (en banc). The MDA thus “provides immunity for manufacturers of new
15 Class III medical devices to the extent that they comply with federal law, but it does
16 not protect them if they have violated federal law.” See Bausch v. Stryker Corp.,
17 630 F.3d 546, 553 (7th Cir. 2010).

18 Claims related to medical devices may also be impliedly preempted by
19 the MDA if they seek to enforce a violation of the medical device provisions and
20 do not rely on traditional state tort law. See Buckman Co. v. Plaintiffs’ Legal
21 Comm., 531 U.S. 341 (2001); Perez v. Nidek Co., 711 F.3d 1109 (9th Cir. 2013).
22 Because only the FDA is authorized to enforce violations of the FDCA, “private
23 enforcement of the statute is barred.” Perez, 711 F.3d at 1119. Consequently, to
24 escape express and implied preemption under the MDA, “[t]he plaintiff must be
25 suing for conduct that *violates* the FDCA (or else his claim is expressly preempted
26

27 ⁹ The exception in subsection (b) allows the FDA to exempt some state and
28 local requirements from preemption. See Riegel, 552 U.S. at 316. Plaintiffs do not
contend that any exception in subsection (b) is relevant to the present analysis.

1 by § 360k(a)), but the plaintiff must not be suing *because* the conduct violates the
2 FDCA (such a claim would be impliedly preempted under *Buckman*).” Id. at 1120
3 (internal quotation marks omitted).

4 **C. Preemption in This Case**

5 **1. Federal Requirements Applicable to Crystalens**

6 As noted above, the first step is to ask whether the federal government has
7 established requirements applicable to the device at issue. See Riegel, 552 U.S.
8 at 321. In this case, there is no doubt that it has. Both parties agree that Crystalens
9 is a Class III device that was approved through the premarket approval process.
10 Because the premarket approval process entails a rigorous examination of nearly
11 every aspect of a device’s safety, and approval subjects a device to numerous post-
12 approval requirements, it necessarily establishes federal requirements applicable to
13 the device, thus allowing for preemption of state requirements that are “different
14 from, or in addition to” the federal requirements. See Riegel, 552 U.S. at 322–23.

15 **2. Comparison of State and Federal Requirements**

16 The next step is to ask whether Plaintiffs’ state-law claims would impose
17 requirements “different from, or in addition to” the federal requirements. See
18 Riegel, 552 U.S. at 322. Plaintiffs’ claims rest on two theories. (See Doc. No. 22
19 at 4.) The court takes each of them in turn.

20 The first theory is that the advertising circular was false and misleading
21 because of the statements Plaintiffs take issue with: “The risks of implantation
22 with Crystalens are generally the same potential risks that exist for implanting all
23 intraocular lenses,” and, “Only your surgeon . . . can explain the applicable risks.”
24 (FAC ¶¶13, 28 & Exh. A.) As explained below, any claims premised on this theory
25 are expressly preempted under § 360k(a).

26 As part of the premarket approval process, the FDA “must determine that
27 the proposed labeling is neither false nor misleading.” See Riegel, 552 U.S. at 318.
28 Once approval has been granted, manufacturers may not make changes to the

1 labeling without the FDA’s permission, see id. at 319, and all advertising must
2 be consistent with the approved labeling, see 21 C.F.R. § 814.80.¹⁰ Although
3 manufacturers may issue additional post-approval safety warnings, they are not
4 required to do so. See 21 C.F.R. § 814.39(d);¹¹ Stengel, 704 F.3d at 1234 (Watford,
5 J., concurring).

6 In this case, the FDA-approved patient labeling for Crystalens says essentially
7 what the circular says. As to the comparative risks of Crystalens, it states: “The
8 complications and side effects experienced during the clinical study were similar to
9 those experienced with other intraocular lenses and with routine cataract surgery,”
10 and, “The risks of implantation with the Crystalens are the same risks that exist for
11 all intraocular lenses.” (Doc. No. 16, Exh. A at 9.) And, regarding surgeons’ ability
12 to advise patients of the risks, the approved labeling states, among other things,
13 “Your doctor will perform a thorough examination and fully inform you of any
14 increased risk of a complication.” (Id., Exh. A at 14.)

15 Thus, the only way that Plaintiffs can prevail on the theory that the circular
16 was false and misleading is by showing that B&L had a duty to provide warnings or
17 advisories “different from, or in addition to,” those the FDA approved. Such claims

18
19 ¹⁰ 21 C.F.R. § 814.80 reads:

20 A device may not be manufactured, packaged, stored, labeled,
21 distributed, or advertised in a manner that is inconsistent with any
22 conditions to approval specified in the PMA approval order for the
23 device.

24 ¹¹ 21 C.F.R. § 814.39(d) reads in relevant part:

25 (d)(1) After FDA approves a PMA, any change described in paragraph
26 (d)(2) of this section to reflect newly acquired information that
27 enhances the safety of the device or the safety in the use of the device
28 may be placed into effect by the applicant prior to the receipt . . . of a
written FDA order approving the PMA supplement

(d)(2) The following changes are permitted by paragraph (d)(1) of this
section:

(i) Labeling changes that add or strengthen a contraindication,
warning, precaution, or information about an adverse reaction for
which there is reasonable evidence of a causal association. . . .

1 are expressly preempted by § 360k(a) because “[p]remarket approval established
2 the warning requirements applicable to the device and Defendants cannot be made
3 to go beyond those warning requirements.” Hawkins v. Medtronic, Inc., 2014 WL
4 346622, at *14 (E.D. Cal. Jan. 30 2014); see also Eidson, 981 F. Supp. 2d at 883–90
5 (same); Houston v. Medtronic, Inc., 957 F. Supp. 2d 1166, 1177–78 (C.D. Cal.
6 2013) (same).

7 Plaintiffs appear to contend that the PMA has no preemptive effect in this
8 case because the PMA stated that “failure to comply with the conditions of approval
9 invalidates the approval order.” (Doc. No. 22 at 6.) But they do not offer any
10 argument or citation to authority to explain why this should affect the analysis.

11 The court, therefore, concludes that Plaintiffs’ claims are expressly
12 preempted to the extent that they rest on the theory that the Cyrstalens advertising
13 should have said something other than what it said.

14 Plaintiffs’ second theory is that B&L failed to comply with its duty to report
15 all adverse events to the FDA. To the extent that Plaintiffs’ claims rely on this
16 theory, they are not preempted, as explained below, because they fit within the
17 exception for parallel state and federal claims.

18 In Stengel v. Medtronic, Inc., the Ninth Circuit held that a claim for negligent
19 failure to warn under Arizona law was not expressly or impliedly preempted
20 because it was premised on the manufacturer’s failure to report adverse events to
21 the FDA. See 704 F.3d at 1233. The plaintiff had been paralyzed after receiving
22 treatment with a Class III medical device that had been approved through the
23 premarket approval process. See id. at 1226. He alleged that the manufacturer
24 “had violated a state-law duty of care by failing to report known risks associated
25 with use of its medical device to the [FDA].” Id. His failure-to-warn claim was not
26 preempted because Arizona products-liability law paralleled the FDA’s reporting
27 requirement, in that it required manufacturers to warn consumers of known dangers,
28 and a warning to a third party, such as the FDA, would satisfy the duty. See id.

1 at 1233.

2 Similarly, in this case, Plaintiffs allege that B&L failed to comply with its
3 duty under federal law to report all adverse events to the FDA and, by doing so, also
4 violated its duty under California law to warn consumers of the risk of Z syndrome.
5 Like Arizona, California requires medical-device manufacturers to warn of known
6 or knowable risks, and they can do so by “fil[ing] adverse event reports with the
7 FDA if that is the only available method to warn doctors and consumers.” Coleman
8 v. Medtronic, Inc., 223 Cal. App. 4th 413, 429 (2014) (employing this analysis
9 under Stengel).

10 B&L contends that Stengel is distinguishable because here, unlike in
11 Stengel, the FDA has not found any violation or taken any action against B&L.
12 (Doc. No. 23 at 3–4.) The court need not address the argument because it was
13 raised for the first time in B&L’s reply brief, and it is unsupported by any authority
14 or explanation. See Zamani v. Carnes, 491 F.3d 990, 997 (9th Cir. 2007) (“The
15 district court need not consider arguments raised for the first time in a reply brief.”).
16 Regardless, at least one circuit has expressly rejected the contention that FDA
17 action is an “implicit precondition” to this kind of suit. Hughes v. Boston Scientific
18 Corp., 631 F.3d 762, 772–73 (5th Cir. 2011). The court is not, therefore, persuaded
19 that this is a meaningful distinction.

20 Accordingly, the court concludes that under Stengel, Plaintiffs’ claims are
21 not expressly or impliedly preempted to the extent that they are premised on B&L’s
22 alleged failure to comply with its parallel state and federal duties to report adverse
23 events to the FDA. “Most lower courts—both federal and state—that have analyzed
24 and applied Stengel to [such claims] have held that the claims escape both express
25 and implied preemption.” Eidson v. Medtronic, Inc., — F. Supp. 2d —, 2014 WL
26 1996024, at *20 (N.D. Cal. May 13, 2014) (citing examples).

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1 **D. Causation**

2 Causation is an essential element of a products-liability claim, see Bunch
3 v. Hoffinger Indus., 123 Cal. App. 4th 1278, 1302 (2004), and a prerequisite for
4 standing to sue under the UCL and FAL, see Cal. Bus. & Prof. Code §§ 17204,
5 17535. Because the only unpreempted theory is that B&L failed to warn the FDA
6 (as opposed to warning consumers or doctors directly), there is a “causation hurdle
7 that would not otherwise exist.” Stengel, 704 F.3d at 1234 (Watford, J., concurring).
8 “To prevail, [Plaintiffs] will ultimately have to prove that if [B&L] had properly
9 reported the adverse events to the FDA as required under federal law, that
10 information would have reached [Michajlun’s] doctors in time to prevent [her]
11 injuries.” Id.

12 As to causation, Plaintiffs allege that if B&L had communicated the adverse-
13 event reports to the FDA as required, it “would have effectively warned surgeons,
14 including [Michajlun’s] surgeon of those adverse events . . . both directly and
15 through discussion of those events that would have followed in the literature and
16 at meetings [her] surgeon attended, as well as more complete information through
17 the FDA’s MAUDE database, which is available to the public at large.” (FAC
18 ¶ 44.) Further, she “would not have agreed to the Crystalens implant, and, upon
19 information and belief, [her] surgeon would not have recommended [it] but for
20 [B&L’s] underreporting adverse events with the Crystalens, *i.e.*, Z syndrome.”
21 (Id. ¶ 46.)

22 B&L contends that although Plaintiffs generally allege that the failure to
23 submit the additional adverse event reports caused the injury, they “do not state with
24 any specificity *how* it caused the injury.” (Doc. No. 15-1 at 11.) Specifically, they
25 contend, Plaintiffs “have not alleged how the four (at most) incidents that [B&L]
26 purportedly did not report had any causal effect on her injuries.” (Id.) As support,
27 B&L cites Hawkins, 2014 WL 346622, at *8, and Eidson, 981 F. Supp. 2d at 889,
28 which dismissed failure-to-report claims because the plaintiffs in those cases had

1 not identified the relevant dates of the failures to report, so that there was no way to
2 evaluate the causal connection.

3 This case does not suffer from a similar defect, as Plaintiffs have alleged
4 relevant date ranges for the allegedly unreported adverse events that occurred prior
5 to Michajlun's surgery. And B&L does not explain how these cases otherwise
6 inform the present analysis. Based on the court's own research, some courts have
7 found causal allegations resembling Plaintiffs' plausible. See Eidson, 2014 WL
8 1996024, at *20; Comella v. Smith & Nephew, Inc., 2013 WL 6504427, at *4 (N.D.
9 Ill. Dec. 11, 2013). In the court's view, the limited number of unreported incidents
10 alleged provides a thin causal connection, but a plausible connection nonetheless.
11 Perhaps these cases are distinguishable because they involved allegations of large-
12 scale failures to report, but that is an issue for a later date. At this point, construing
13 the allegations in the light most favorable to Plaintiffs, and in light of B&L's failure
14 to offer any authority to the contrary, the court declines to dismiss Plaintiffs' claims
15 for insufficient causal allegations.

16 **E. B&L's Additional Arguments**

17 In addition to the arguments addressed above, B&L contends that Plaintiffs'
18 claims must all be dismissed because the advertising circular's statements were
19 not misleading as a matter of law and because the allegations do not meet the
20 heightened pleading standards for averments of fraud under Federal Rule of Civil
21 Procedure 9(b). (Doc. No. 15-1 at 13–16.)

22 In light of the preemption analysis, however, it is unnecessary to address
23 these arguments. At this point, the remaining theory is completely uncoupled
24 from the advertising circular,¹² so whether the statements were misleading does not
25 matter. And, as set forth in the next section, simple products-liability claims for

27 ¹² Although it would not change the analysis, the court notes that Plaintiffs
28 do not allege that the circular would have read differently if B&L had reported the
adverse events as required, and, as B&L points out, they also do not allege that
Michajlun ever saw the circular or relied on it.

1 failure to warn are all that remain. These causes of action, which are for strict
2 liability and negligence, do not depend upon intentional deceit.

3 **F. Plaintiffs' Causes of Action**

4 With these discussions in mind, the court addresses each of Plaintiffs' causes
5 of action.

6 **1. Strict Liability for Failure to Warn**

7 To state a claim for strict products liability for failure to warn, a plaintiff
8 must allege that the defendant failed to adequately warn of a known or knowable
9 risk and that the failure caused the plaintiff's injuries. See Chavez v. Glock, Inc.,
10 207 Cal. App. 4th 1283, 1304 (2012).

11 On this claim, Plaintiffs allege that Crystalens was defective and
12 unreasonably dangerous because of inadequate post-PMA warnings; that B&L
13 had parallel duties to warn physicians and Michajlun about the risk of Z syndrome,
14 which were known to B&L; and that B&L breached those duties by failing to
15 submit adverse-reaction reports to the FDA as required. (FAC ¶¶ 36–38.) B&L
16 counters that this claim fails for the reasons addressed above.

17 This claim is expressly preempted to the extent that it rests on the theory that
18 Crystalens advertising should have said something other than what it said. It is not
19 preempted to the extent that it rests on the theory that B&L failed to comply with
20 its duty to file adverse-event reports with the FDA, and at the same time breached
21 its state-law duty to warn of dangerous product defects. The surviving aspect of
22 this claim is supported by plausible causal allegations, so B&L's motion to dismiss
23 it is denied.

24 **2. Negligent Failure to Warn**

25 To state a claim for negligent failure to warn, the plaintiff must allege "that
26 a manufacturer or distributor did not warn of a particular risk for reasons which fell
27 below the acceptable standard of care, *i.e.*, what a reasonably prudent manufacturer
28 would have known and warned about." Id. at 1305 (internal quotation marks

1 omitted). The same analysis that applies to Plaintiffs’ strict-liability claim applies
2 here. Accordingly, B&L’s motion to dismiss this claim is also denied.

3 **3. Deceptive Advertising**

4 California’s False Advertising Law prohibits any “unfair, deceptive, untrue,
5 or misleading advertising.” Cal. Bus. & Prof. Code § 17500. To prevail on this
6 claim, Plaintiffs would have to show that B&L should have provided warnings to
7 the public “different from, or in addition to” those approved by the FDA. This
8 claim is expressly preempted by the MDA, and nothing remains. It is, therefore,
9 dismissed without leave to amend.

10 **4. Deceptive Business Practices**

11 California’s Unfair Competition Law prohibits any “unlawful, unfair or
12 fraudulent business act or practice.” Cal. Bus. & Prof. Code § 17200. This claim
13 is subject to the same analyses that apply to Plaintiffs’ products-liability claims.
14 Here, however, two additional considerations not relevant to the common-law
15 claims compel the conclusion that this claim must be dismissed without leave
16 to amend.

17 First, B&L contends that this claim must be dismissed without leave to
18 amend¹³ because the equitable relief Plaintiffs seek is unavailable as a matter of law.
19 (Doc. No. 15-1 at 16–17.) It argues that the UCL provides only equitable relief;
20 equitable relief is available only when money damages are inadequate; California
21 courts have extended this principle to claims under the UCL; and Plaintiffs have not
22 shown that money damages would be inadequate. (*Id.*) In support, B&L cites a
23 case that dismissed a UCL claim because money damages would adequately redress
24 the plaintiffs’ injuries if they were to prevail on other causes of action. See Rhynes
25 v. Stryker Corp., 2011 WL 2149095, at *3–4 (N.D. Cal. May 31, 2011). That case,
26 in turn, relied on Prudential Home Mortgage Co. v. Superior Court, 66 Cal. App.

27
28 ¹³ B&L asserts that dismissal should be with prejudice, which the court
construes as a request for dismissal without leave to amend.

1 4th 1236 (1998), which held that statutory relief under the UCL “is subject to
2 fundamental equitable principles, including inadequacy of the legal remedy.”
3 Id. at 1249.

4 Plaintiffs counter only that B&L has mischaracterized Plaintiffs’ claims as
5 claims for money damages, when in reality they seek restitutionary disgorgement of
6 the profits B&L earned from its sales of Crystalens. (Doc. No. 22 at 12.) Plaintiffs
7 do not address Rhynes and do not attempt to explain why money damages on their
8 common-law claims will not adequately redress their injuries.

9 By failing to address B&L’s argument in any meaningful way, Plaintiffs have
10 effectively waived the issue. See Stichting Pensioenfonds ABP v. Countrywide
11 Fin. Corp., 802 F. Supp. 2d 1125, 1132 (S.D. Cal. 2011) (“[I]n most circumstances,
12 failure to respond in an opposition brief to an argument put forward in an opening
13 brief constitutes waiver or abandonment in regard to the uncontested issue.”
14 (internal quotation marks omitted)).

15 Second, although not raised by the parties, the court concludes that the
16 surviving theory cannot support a cognizable claim under the UCL. As discussed
17 above, all that remains is the theory that B&L violated its duty under California law
18 to warn the FDA (a common-law claim), and at the same time ran afoul of FDA
19 reporting requirements (a claim that B&L violated FDA regulations). Plaintiffs
20 assert that this theory “has nothing to do with false or misleading ad literature,”
21 and is brought under the “unlawful” prong of the UCL. (Doc. No. 22 at 9–10.)

22 At first glance, this approach should work. According to California courts,
23 the “unlawful” prong of the UCL proscribes “anything that can be properly called
24 a business practice and that at the same time is forbidden by law.” Farmers Ins.
25 Exchange v. Superior Court, 2 Cal. 4th 377, 383 (1992). It prohibits “any practices
26 forbidden by law, be it civil or criminal, federal, state, or municipal, statutory,
27 regulatory, or *court-made*.” Saunders v. Superior Court, 27 Cal. App. 4th 832,
28 838–39 (1994) (emphasis added).

1 But, despite this sweeping language, courts have held that common-law
2 claims unaccompanied by a violation of some other law cannot support a claim
3 under the “unlawful” prong of the UCL. See Shroyer v. New Cingular Wireless
4 Servs., Inc., 622 F.3d 1035, 1044 (9th Cir. 2010) (“[A] common law violation such
5 as breach of contract is insufficient [to allege a violation of the “unlawful” prong
6 of the UCL].”); TreeFrog Devs., Inc. v. Seidio, Inc., 2013 WL 4028096, at *5 (S.D.
7 Cal. Aug. 6, 2013) (“Because Defendant’s allegation of Plaintiff’s ‘unlawful’ act
8 rests entirely on common law theories, Defendant fails to sufficiently allege a UCL
9 claim under the ‘unlawful’ prong.”). For this reason, some courts have rejected
10 UCL “unlawful” claims premised on products-liability claims. See Hartless v.
11 Clorox Co., 2007 WL 3245360, at *5 (S.D. Cal. Nov. 2, 2007) (common-law
12 products-liability claim was insufficient to support a UCL claim); Klein v. Earth
13 Elements, Inc., 59 Cal. App. 4th 965, 969 (1997) (same).

14 Here, Plaintiffs combine products-liability claims with alleged violations
15 of FDA regulations. They thus appear to present the kind of allegations that can
16 support a claim under the “unlawful” prong of the UCL.

17 The problem, however, is that private claims to enforce violations of the
18 FDCA are impliedly preempted because the FDA alone is empowered to enforce it.
19 See Buckman Co. v. Plaintiffs’ Legal Comm., 531 U.S. 341 (2001); Perez v. Nidek
20 Co., 711 F.3d 1109 (9th Cir. 2013). “Although citizens may petition the FDA to
21 take administrative action, private enforcement of the statute is barred. . . .” Perez,
22 711 F.3d at 1119 (citation omitted).

23 Because common-law claims cannot be the basis of a UCL “unlawful” claim,
24 and private actions to enforce the FDCA are barred, combining them cannot result
25 in a viable claim under the “unlawful” prong of the UCL. See Cel-Tech Commc’ns,
26 Inc. v. Los Angeles Cellular Tel. Co., 20 Cal. 4th 163, 182 (1999) (“A plaintiff may
27 . . . not plead around an absolute bar to relief simply by recasting the cause of action
28 as one for unfair competition.”) (internal quotation marks omitted).

1 Accordingly, for both of the reasons discussed above, this claim is dismissed
2 without leave to amend.

3 **5. Loss of Consortium**

4 Markoff's claim for loss of consortium is contingent on Michajlun's claims.
5 See Tucker v. CBS Radio Stations, Inc., 194 Cal. App. 4th 1246, 1256 (2011).
6 Because two of Michajlun's claims remain, this claim also remains.


7 **CONCLUSION**

8 B&L's request for judicial notice, (Doc. No. 16), is GRANTED. Its motion
9 to dismiss Plaintiffs' first amended complaint, (Doc. No. 15), is GRANTED IN
10 PART AND DENIED IN PART as follows:

- 11 1. B&L's motion to dismiss Plaintiffs' claims for strict liability for
12 failure to warn, negligent failure to warn, and loss of consortium is
13 DENIED. These claims survive to the extent that they are premised
14 on B&L's alleged failure to warn the FDA.
- 15 2. B&L's motion to dismiss Plaintiffs' putative class claims under the
16 FAL and UCL is GRANTED. These claims are dismissed without
17 leave to amend.

18 IT IS SO ORDERED.

19 DATED: March 11, 2015

20 
21 Hon. Jeffrey T. Miller
22 United States District Judge
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