An Aseptic Processing Update: Industry and Regulatory Trends The Path Forward

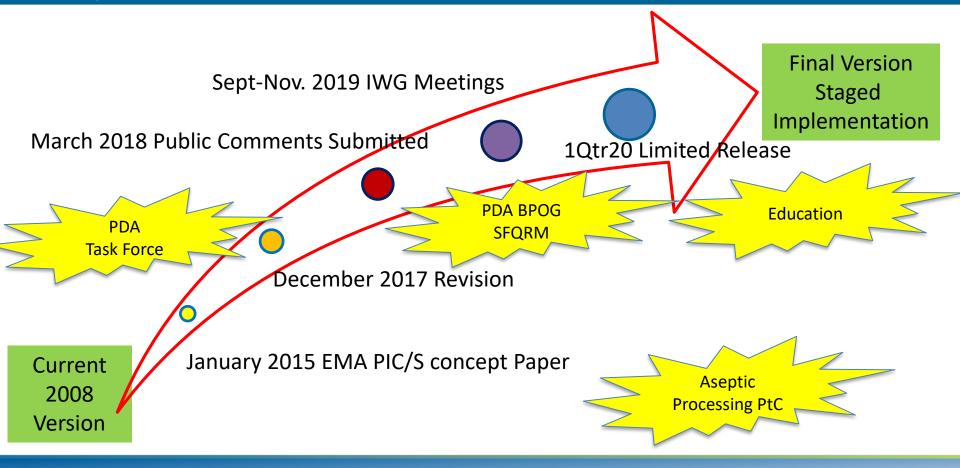
PDA Southern California Chapter Aseptic Processing and Sterilization Symposium November 2019

Hal Baseman Chief Operating Officer ValSource Inc. There is a need and opportunity for **improvement** in the manufacture of sterile biopharmaceutical products.

- 1. Aseptic processing is here to stay
- 2. Traditional process control methods may not be sufficient
- 3. We are not changing fast enough

Part 1: Updates

Update: Annex 1 Manufacture of Sterile Medicinal Products



Update: Annex 1 revision general highlights

- Improved document, but retains lower value control expectations
- Sets expectation for use of quality risk management principles, but needs to do more for alternative approaches
- Misses opportunity to modernize and harmonize terms

Update: Annex 1 revision specific highlights

- Sterile filtration: positioning and PUPSIT
- APS acceptance criteria, operator qualification, duration
- Isolator barriers: unidirectional airflow, settling plates, glove IT, sterilization of indirect contact surfaces
- 5 μ classification and monitoring
- Disinfectant rotation
- Container closure integrity testing
- WFI distribution temperature, steam generation, moist heat sterilization

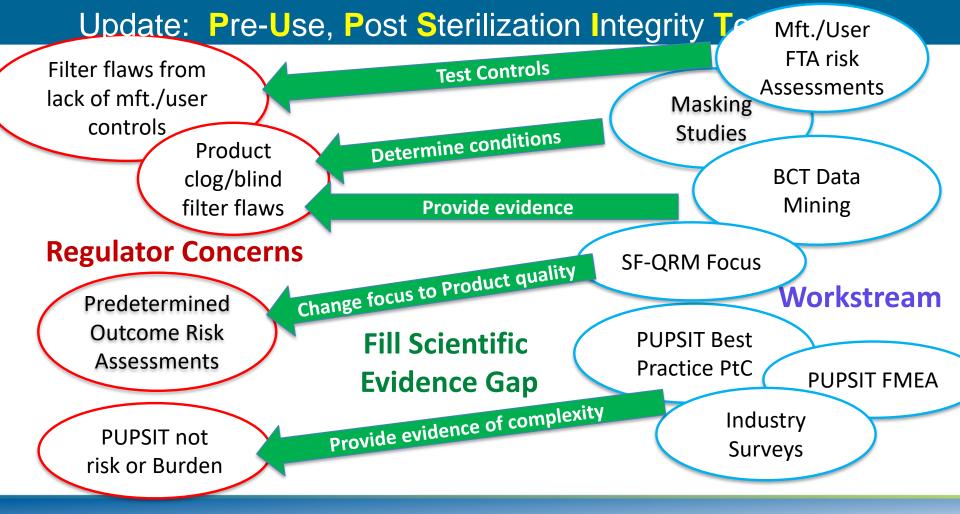
Why is the Annex 1 Revision Important?

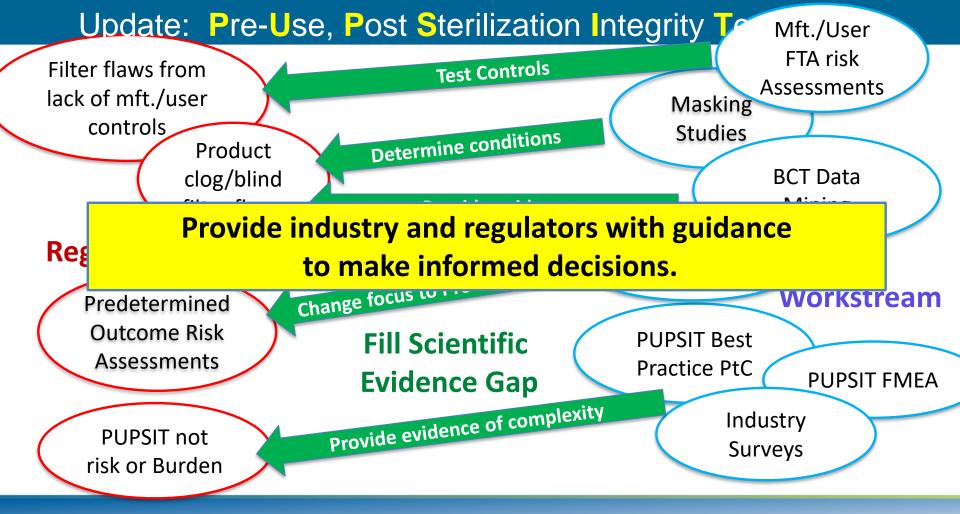
First new discussion on aseptic processing in a while

Proposed revision to EMA Annex 1 contained 43 recommendations for risk-based approaches to sterile product manufacturing and control.

K. Waldron, 2017

If regulators expect industry to use QRM to justify current approaches ... then QRM can be used to justify new approaches.





Sterile Biopharmaceutical Manufacturing Today and Tomorrow

Part 2: Moving Forward

- 1. New therapies
- 2. Drug supply and public health
- 3. Business aspects of quality and manufacturing reliability
- 4. New technology
- 5. Competition for technical talent

Attracting new talent

	%	%	%	
Restaurant industry	66	25	8	+58
Computer industry	61	28	11	+50
Grocery industry	58	27	15	+43
Farming and agriculture	58	24	17	+41
Travel industry	52	35	13	+39
Accounting	45	45	9	+36
Automobile industry	53	29	18	+35
Retail industry	50	28	19	+31
Real estate industry	49	31	19	+30
Banking	50	25	25	+25
Electric and gas utilities	47	28	24	+23
Sports industry	45	29	25	+20
Airline industry	42	32	23	+19
Telephone industry	42	32	26	+16
Publishing industry	39	36	24	+15
Internet industry	43	26	30	+13
Movie industry	41	31	28	+13
Education	45	18	35	+10
Television and radio industry	40	27	32	+8
The legal field	35	34	30	+5
Oil and gas industry	39	25	36	+3
Advertising and public relations industry	33	32	34	-1
Healthcare industry	38	14	48	-10
The federal government	25	23	52	-27
(Pharmaceutical industry)	27	15	58	-31
GALLUP, AUG. 1-14, 2019				



2019 PDA Annual Meeting | March 11-13 | San Diego, CA

Desired state: What if we were able to ...

continuously manufacture aseptically processed sterile products,

- without reliance on human intervention, unidirectional airflow, viable environmental monitoring,
- release those products parametrically, in real time, without sterility testing,
- based on ...
 - ✓ well engineered process design,
 - ✓ fully automated equipment,
 - ✓ contamination-protected critical zones,
 - ✓ complete process understanding,
 - \checkmark indisputable correlation of data and outcome

Suppose we call it a 100 year project

Sterile Biopharmaceutical Manufacturing Today and Tomorrow

KEY ELEMENTS	YESTERDAY & TODAY	TOMORROW
Process	Batch driven, single shift, intervention laden, personnel dependent, environment constrained	Continuous, small closed environment, automated, data driven and controlled, standardized
Control	Test, monitor, demonstrate, lagging, excursion and deviation investigation, reactive, corrective	Design driven, line of sight, risk-based, scientific, data, leading, predictive, preventive
Sterility Assurance	Parameter based, anecdotal, product and process testing, compliance risk, subjective	Quality attribute based, statistical evaluation, trend analysis, science/risk awareness, unbiased, objective
Communication	Lack of transparency, reluctance to share experience, failures, criteria for success	Exchange of ideas, information, results, failures, remedies, criteria for success
Cooperation	Conflict relationship between manufacturers, suppliers, and regulators, blurring roles and responsibilities, regulatory risk concern	Partnership of manufacturers, suppliers, and regulators with defined roles and responsibilities

Part 3: Thoughts to consider ...

The manufacturing intelligence revolution is here ...

- 1. Digital clone facilities and modeling
- 2. Predictive maintenance and machine learning
- 3. Data linked environmental and process trending
- 4. Data driven parametric release
- 5. Virtual reality training
- 6. Visual SOPs and instructions
- 7. Mission control centers

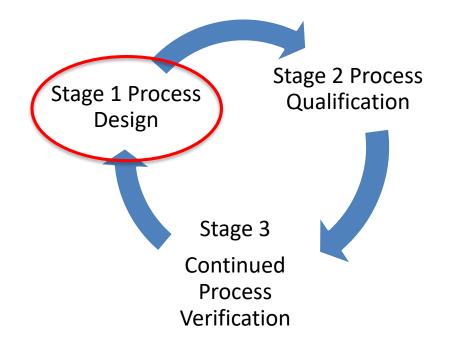
- Will the increase in data outpace process understanding?
- How will we react to increased data and process awareness?
- How will validation change?

Smaller, scalable, standardized critical area are less complex, less variable, lower the cost, with less contamination risk

... design better isolator processes

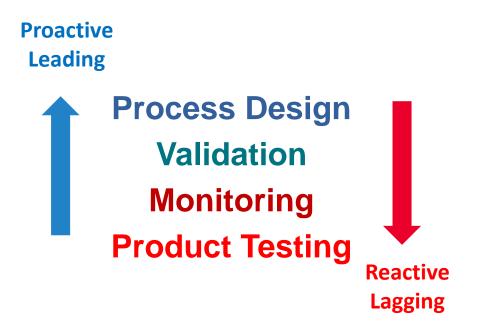
- 1. Aseptic technique and practice remain important
- 2. Re-define decontamination
- 3. Establish operations based design and control criteria

... change emphasis of validation



... challenge testing as a contamination control strategy

- Excursions have different risks
- Evaluation of the trend more useful than detecting excursions
- Understand capability and limitations of control strategies
- Improper reaction can desensitize or distract



... think critically about aseptic process validation

Does the aseptic process simulation _____?

- X Judge if process effective
- X Qualify personnel or demonstrate proficiency
- X Validate interventions
- X Establish holding times, filling durations or conditions
- X Simulate effect of fatigue on performance
- X Allow for disruptions
- X Verify decontamination process
- X Confirm filling system acceptability
 - Uncover weakness in the process

- Why are doing this? Validate the aseptic process
- What is the objective? Sterility assurance
- How does it accomplish the objective?
- Is it scientifically valid and useful?
- What is the harm?
- Is there a better way?

Efforts of no value divert resources from efforts of value.

... ponder APS questions

- Are interventions included at production frequency?
- Does APS establish production duration?
- Do media fills qualify filler parts?
- Should intervention rejects be incubated?
- Must personnel qualification involve APS participation?
 - Why?
 - Objective?
 - Accomplished?
 - Good science?
 - Harm?
 - Better way?

Traditional approach

• Personnel and interventions qualified with APS

Alternate approach

• Separate out personnel and process qualification

Quality and profit are not mutually exclusive, conflicting objectives

Technology and innovation based improvement <u>cannot</u> be realized without a partnership of manufacturers, regulators, and suppliers

- Each must accept its unique role
 - Manufacturers identify needs
 - Suppliers provide solution to need
 - Regulators judge acceptability of solution
 - Patients benefit

Update: PDA Related Efforts

Annex 1 Revision

Aseptic Process PtC Part 1 & 2 (3?) Isolator PtC and revisions to TR 13, 22, 34 QRM Standard for Aseptic Processing

December 2019 QRM Workshops Second round of Annex 1 commenting Interpretation of Annex 1 revision education

PDA/BPOG SFQRM collaboration

MSOP initiatives in RT release, manufacturing intelligence, and standardization

Aseptic

Processing

Future State

TRI C> education

Challenge the status quo. Ask WHY and WHY NOT?

If everyone is thinking the same way, then not everyone is thinking...