# CGMP for 21<sup>st</sup> Century : A Risk-based Approach (Quality by Design)

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• Men : Organization & Personnel



- Qualification
- Training
- Personnel Responsibilities
- Independence

- Materials
  - Raw materials
    - Receipt
    - Quarantine
    - Sampling
    - Testing
    - Release
    - Retesting
  - Cell Banking
  - Products
  - Container & Closures
  - Labels



- Machinery
  - Building Design
  - HVAC System
  - PW/WFI System
  - Clean Steam System
  - Washing & Toilet Facilities
  - Laminar Flow Hoods











# 3 Occupancy States

- As-Built condition
  - Where the installation is complete with all services connected and functioning but with no equipment & personnel present.
- At-Rest condition (Static)
  - Where the installation is complete with equipment installed and operating but with no personnel present.
- Operational condition (Dynamic)
  - Where the installation is functioning with the specified No. of personnel present & equipment operating.

# Comparison of Air Cleanliness Classifications

FDA	Descriptive		Class 100	Class 10,000	Class 100,000	ND	
	In Operation	≥ 0.5µm /ft <sup>3</sup>	100	10,000	100,000	ND	
		Action Level CFU/m <sup>3</sup>	1	10	100	ND	
EU, WHO, PIC/S	Descriptive		А	В	С	D	ND
	At Rest	≥ 0.5µm /m <sup>3</sup>	3,520	3,520	352,000	3,520,000	
		≥ 5µm /m <sup>3</sup>	20	29	2,900	29,000	
	In Operation	≥ 0.5µm /m <sup>3</sup>	3,520	352,000	3,520,000	ND	
		≥ 5µm /m³	20	2,900	29,000	ND	
		CFU/m <sup>3</sup>	< 1	< 10	< 100	< 200	
ISPE	Descriptive		Grade 5	Grade 7	Grade 8	CNC+	CNC
ISO	Descriptive		ISO. 5	ISO. 7	ISO. 8	ISO. 9	
	In Operation	≥ 0.5µm /m <sup>3</sup>	3,520	352,000	3,520,000	35,200,000	
		≥ 5µm /m³	20	2,930	29,300	293,000	

- Methods
  - Production
  - Sampling & Testing
  - Environmental Monitoring
  - Packaging & Labeling
  - Validation
  - Documentation
  - Storage



# Testing for adventitious agents

- In vivo tests
  - Test methods

Test Systems		Observation Period(days)	Number of Animals	Route Inoculation	Inoculation Per Animal(mL)
	Suckling mouse	14 14(subpass)	20 5(subpass)	i.c./ i.p.	0.01/0.1
	Adult mouse	21	20	i.c./ i.p.	0.03/0.5
	Guinea pig	42	5	i.c./ i.p.	0.1/5.0
	Rabbit	30	5	i.d./ s.c.	1.0/2.0
	Embryonated chicken egg	3 3(subpass) 9	10 10(subpass) 10	allantoic yolk sac	0.5 0.5
		9(subpass)	10(subpass)		

## **Process Validation**

- Validated Support Systems/Processes
  - HVAC, WFI/PW, Steam, Compressed air, Dust collection...
  - Cleaning, Sterilization, Depyrogenation, Decontamination...
- Manufacturing Processes
  - Critical production processes impacting on :
    - Product quality
    - Reproducibility of the process
  - Parameters
  - Range of variability
  - Justified sampling plan
  - Testing via validated methods
  - Consistency : 3 consecutive lots (full production scale)

- Introduction
  - 2002 : Pharmaceutical CGMP Initiative for the 21<sup>st</sup> Century-A Risk Based Approach

The Pharmaceutical Quality for the 21<sup>st</sup> Century-A Risk Based Approach

- The Goals of the Initiative
  - To encourage the early adoption of new technological advances by the pharmaceutical industry
  - To facilitate industry application of modern quality management techniques including implementation of quality systems approaches, to pharmaceutical production & quality assurance
  - To encourage implementation of risk-based approaches for both industry & agency (NRA)
  - To ensure that regulatory review, compliance & inspection policies are based on state-of-the-art pharmaceutical science
  - To enhance the consistency & coordination of FDA's drug quality regulatory programs, by integrating quality systems approaches into Agency's review & inspection activities

• Traditional vs. New Enhanced Approach



• Ishikawa (Fishbone) Diagram (risk assessment tool)



- CQA of the product
- Input variables : materials etc.
- Process parameters : temp., time, humidity etc.
- Multidimensional combination & interaction  $\rightarrow$  Design Space
- Real time release (test)
- Quality by Design → Regulatory flexibility

• Design Space



- US FDA's Guidances with Enhanced Approach (QbD)
  - Sterile Drug Products Produced by Aseptic Processing –CGMP (Sept., 2004)
  - Process Analytical Technology (PAT) : A Framework for Innovative Pharmaceutical Development, Manufacturing & Quality Assurance (Sept., 2004)
  - Quality Systems Approach to Pharmaceutical CGMP Regulations (Sept., 2006)
  - Process Validation : General Principles & Practices (Jan., 2011)

- Sterile Drug Products Produced by Aseptic Processing CGMP (Updated version of 1987 Aseptic processing guideline)
  - Personnel qualification
  - Cleanroom design
  - Process design
  - Quality control
  - Environmental monitoring
  - Review of production records

- Process Analytical Technology(PAT)
  - Introduction / Scope / Background
  - PAT framework
    - Process understanding
    - Principles & tools
      - PAT tools
      - Risk-based approach
      - Integrated systems approach
      - Real time release
    - Strategy for implementation
  - PAT regulatory approach

- Quality Systems Approach to Pharmaceutical CGMP Regulations
  - Introduction / Background/CGMP vs. modern Quality Systems
  - Quality systems model
    - Management responsibility
    - Resources
    - Manufacturing operations
    - Evaluation activities
  - Conclusion
    - Implementation of a quality systems model will facilitate compliance with CGMP

- Process Validation : General Principles & Practices
  - Introduction / Background/Regulatory Requirements
  - Recommendations
    - General considerations for process validation
    - Process design
    - Process qualification
    - Process verification
  - Concurrent release of PPQ batches
  - Documentation
  - Analytical methodology

- ICH Harmonized Tripartite Guidelines
  - Pharmaceutical Development (ICH Q8:R2) (Aug., 2009)
  - Quality Risk Management (ICH Q9) (Nov., 2005)
  - Pharmaceutical Quality System (ICH Q10) (June, 2008)
  - Development & Manufacture of Drug Substances (ICH Q11) (Nov., 2012)
  - Technical & Regulatory Considerations for Pharmaceutical Product Lifecycle Management (ICH Q12) (July, 2014)

- Pharmaceutical Development (ICH Q8:R2)
  - This guideline describes the content for pharmaceutical development section of a regulatory submission in the ICH M4 Common Technical Document (CTD) format.
  - This section provides the knowledge gained through the application of scientific approaches & quality risk management to the development of a product & its manufacturing process.
  - The degree of regulatory flexibility is predicated on the level of relevant scientific knowledge provided.
  - Scope
    - This guideline does not apply to IND products but the principles in this guideline are important to consider.

- Pharmaceutical Development (ICH Q8:R2)
  - Development
    - The aim of pharmaceutical development is to design a quality product and its manufacturing process to consistently deliver the intended performance of the product.
    - The knowledge gained from pharmaceutical development studies & manufacturing experience provides scientific understanding to support the establishment of the design space, specifications, & manufacturing controls.

- Pharmaceutical Development (ICH Q8:R2)
  - Development
    - Information from pharmaceutical development studies can be a basis for quality risk management.
    - Quality cannot be tested into products ; i.e., quality should be built by design (Quality by Design).
    - Design space is proposed by the applicant & is subject to regulatory assessment & approval. Working within the design space is not considered as a change.

- Quality Risk Management (ICH Q9)
  - Quality risk management is a valuable component of an effective quality system.
  - Risk is defined as the combination of the probability of occurrence of harm & the severity of that harm.
  - In relation to pharmaceuticals the protection of the patient by managing the risk to quality should be considered of prime importance.

- Quality Risk Management (ICH Q9)
  - An effective quality risk management approach can ensure the high quality of the drug product to the patient by providing a proactive means to identify & control potential issues during development & manufacturing.
  - Effective quality management can provide regulators with greater assurance of a company's ability to deal with potential risks, & can beneficially affect the extent of direct regulatory oversight.

- Quality Risk Management (ICH Q9)
  - This document is to offer a systematic approach to quality risk management & to provide guidance on the principles & some of the tools of quality risk management that can enable more effective & consistent risk-based decisions by both regulators & industry.
  - The use of informal risk management processes can also be considered acceptable. (vs. formal processes)

- Quality Risk Management (ICH Q9)
  - Risk management methodology
    - Basic risk management facilitation methods : flow charts, check sheets
    - Failure mode effects analysis (FMEA)
    - Failure mode effects, and criticality analysis (FMECA)
    - Fault tree analysis(FTA)
    - Hazard analysis & critical control points(HACCP)
    - Hazard operability analysis (HAZOP)
    - Preliminary hazard analysis(PHA)
    - Risk ranking & filtering
    - Supporting statistical tools

- Pharmaceutical Quality Management System (ICH Q10)
  - To describe a model for an effective quality management system for the pharmaceutical industry
  - Based upon International Organization for Standardization (ISO) quality concepts
  - Includes GMP regulations
  - Complements pharmaceutical development (ICH Q8) & quality risk management (ICH Q9)

- Pharmaceutical Quality Management System (ICH Q10)
  - Can be implemented throughout the different stages of a product lifecycle.
  - ICH Q10 applicable to manufacturing sites is currently specified by GMP requirements.
  - The content of ICH Q10 that is additional to current GMP requirements is optional.
  - Implementation of ICH Q10 throughout the product lifecycle should facilitate innovative & continual improvement and strengthen the link between pharmaceutical development & manufacturing activities.

- Pharmaceutical Quality Management System (ICH Q10)
  - Scope
    - Applies to the systems supporting the development & manufacture of
      - Drug substances : ex) APIs
      - Drug products including biotechnology & biological products
    - Throughout the product lifecycle :
      - Pharmaceutical development
      - Technology transfer
      - Commercial manufacturing
      - Product discontinuation

- Pharmaceutical Quality Management System (ICH Q10)
  - Relationship to other guidelines
    - Foundation of QC10
      - GMP requirements
      - ICH Q7 (GMP for APIs)
      - ISO quality management system guidelines
    - Q10 augments GMPs.
    - Q10 provides a harmonized model for a pharmaceutical quality system throughout the lifecycle of a product.
    - GMPs do not address all stages of the product lifecycle (e.g., development).
    - Q10 intends to encourage the use of science-and risk-based approaches at each lifecycle stage to promote continual improvement across the entire product lifecycle.

• Differing Approaches to Pharmaceutical Development

Aspect	Minimal Approaches	Enhanced, Quality by Design Approaches
Overall Pharmaceutical Development	<ul> <li>Mainly empirical</li> <li>Developmental research often conducted one variable at a time</li> </ul>	<ul> <li>Systematic, relating mechanistic understanding of material attributes and process parameters to drug product CQAs</li> <li>Multivariate experiments to understand product and process</li> <li>PAT tools utilized</li> </ul>
Manufacturing Process	<ul> <li>Fixed</li> <li>Validation primarily based on initial full-scale batches</li> <li>Focus on optimization and reproducibility</li> </ul>	<ul> <li>Adjustable within design space</li> <li>Lifecycle approach to validation and, ideally, continuous process verification</li> <li>Focus on control strategy and robustness</li> <li>Use of statistical process control methods</li> </ul>

#### • Differing Approaches to Pharmaceutical Development

Aspect	Minimal Approaches	Enhanced, Quality by Design Approaches
Process Controls	<ul> <li>In-process tests primarily for go/no go decisions</li> <li>Off-line analysis</li> </ul>	<ul> <li>PAT tools utilized with appropriate feed forward and feedback controls</li> <li>Process operations tracked and trended to support continual improvement efforts post- approval</li> <li>at-, on- &amp; in-line analysis</li> </ul>
Product Specifications	<ul> <li>Primary means of control</li> <li>Based on batch data available at time of registration</li> </ul>	<ul> <li>Part of the overall quality control strategy</li> <li>Based on desired product performance with relevant supportive data</li> </ul>
Control Strategy	<ul> <li>Drug product quality controlled primarily by intermediates (in-process materials) and end product testing</li> </ul>	<ul> <li>Drug product quality ensured by risk-based control strategy for well understood product and process</li> <li>Quality controls shifted upstream with the possibility of real-time release testing or reduced end-product testing</li> </ul>
Lifecycle Management	<ul><li>Reactive to problems</li><li>Post-approval changes needed</li></ul>	<ul> <li>Proactive</li> <li>Continual improvement within design space</li> </ul>

#### Hazard & Risk Analysis in Pharmaceutical Products

(Application of HACCP Methodology to Pharmaceuticals)



- 1. The Hazard Analysis and Critical Control Point (HACCP)
- 2. Preventive-based food safety system
- 3. Pioneered by the "Pillsbury Company" in early 1960's
- 4. Assurance against contamination by bacterial & viral pathogens, toxins, chemical or physical hazards
- 5. FDA recommends the implementation of HACCP in food establishments
- 6. The National Advisory Committee on Microbiological Criteria for Foods(NACMCF) was established in 1988



#### 1. Safety Hazard

- a. Identification
- b. Assessment
- c. Control

#### 2. Elements of HACCP Methodology

- a. Develop a flow diagram of the process
- b. Verify the flow diagram on site
- c. Analyse the critical quality variables
- d. Assess the hazards
- e. Identify measures for their control



#### **1. Critical Control Point**

A step at which control can be applied and is essential to prevent or eliminate a pharmaceutical quality hazard or reduce it to an acceptable level

#### 2. Hazard

Any circumstances in the production, control and distribution of a pharmaceutical which can cause an adverse health effect

#### 3. Risk

An estimate of the likely occurrence of a hazard



#### 4. Critical limit

The maximum or minimum value to which a physical, biological, or chemical parameter must be controlled at a critical control point to minimize the risk that the identified product safety hazard may occur

#### 5. Monitoring

A planned sequence of observations or measurements of critical limits designed to produce an accurate record and intended to ensure that the critical limit maintains product safety



#### 1. The HACCP system is based on 7 principles

- a. Conduct a hazard analysis
- b. Determine the critical control points (CCPs)
- c. Establish target levels & critical limits
- d. Establish a system to monitor the CCPs
- e. Establish the corrective action to be taken
- f. Documentation
- g. Establish the procedures to verify that the HACCP is working



#### In applying 7 principles 12 stages are recommended.

#### 1. Assemble a HACCP team (stage 1)

- a. Research & development
- b. Production
- c. Quality control/assurance
- d. Microbiology
- e. Engineering
- f. Distribution



#### 2. Team members should be able to:

- a. Conduct a hazard analysis
- b. Identify potential hazards
- c. Identify hazards which should be controlled
- d. Recommend controls & critical limits
- e. Devise procedures for monitoring & verification
- f. Recommend appropriate corrective action where deviations occur
- g. Verify the HACCP plan



#### 3. Describe the product & process (stage 2)

- a. Composition
- b. Physical / Chemical properties
- c. Structure
- d. pH
- e. Temperatures
- f. Method of cleaning
- g. Bactericidal / Bacteriostatic treatment



#### 3. Describe the product & process (stage 2)

- h. Drying
- i. Screening
- j. Mixing
- k. Blending
- I. Packaging
- m. Storage condition
- n. The method of distribution & transport where products are thermolabile



#### 4. Identify the intended use (stage 3)

- a. The expected uses of the product by the consumer
  - 1) Infants
  - 2) Immunocompromised patients
  - 3) Adults



#### 5. Construct a flow diagram (stage 4)



![](_page_46_Picture_0.jpeg)

#### 6. On-site confirmation of flow diagram (stage 5)

- a. During all stages & hours of operation
- b. Amendments may be made & should be documented

![](_page_47_Picture_0.jpeg)

- 7. List all potential hazards, conduct a hazard analysis & consider any measures to control identified hazards (stage 6) : Principle 1
  - a. List all the hazards from production, testing & distribution up to the point of use
  - b. A hazard analysis
    - 1) Step 1
      - a) Review :

materials, activities, equipment, storage, distribution, intended use of the product

![](_page_48_Picture_0.jpeg)

- b) Check:
- The probable occurrence of hazards & the severity of their adverse health effects
- The qualitative and/or quantitative evaluation of the presence of hazards
- The survival or multiplication of microorganisms of concern
- The production or persistence in drugs of toxins, chemicals or physical agents
- ✓The conditions leading to the above

![](_page_49_Picture_0.jpeg)

- b. A hazard analysis (continued)
  - 2) Step 2
    - a) A hazard evaluation
      - ex.) : severity, probability of occurrence
    - b) Decide which hazards should be addressed in the **HACCP** plan
    - c) Decide what control measures exist
    - d) Potential hazards to be considered
    - ✓ materials & ingredients
    - ✓ physical characteristic & composition of the product
    - ✓ processing procedures

    - ✓ premises

    - ✓ packaging
    - ✓ microbial limits✓ sanitation & hygiene
      - ✓ personnel
    - ✓ equipment
      ✓ risk of explosions
      - ✓ mix-ups

![](_page_50_Picture_0.jpeg)

#### 8. Determine critical control points (stage 7) : Principle 2

a. Use decision-tree (CCP Decision Tree Table)

![](_page_50_Figure_3.jpeg)

![](_page_50_Figure_4.jpeg)

![](_page_51_Picture_0.jpeg)

#### 9. Establish critical limits for each CCP (stage 8) : Principle 3

- a. Critical limits for each CCP
  - 1) Temperature
  - 2) Time
  - 3) Moisture level
  - 4) pH etc

![](_page_52_Picture_0.jpeg)

10. Establish a monitoring system for each CCP (stage 9) : Principle 4

- a. The scheduled measurement of a CCP relative to its critical limits
- b. Physical & Chemical measurements are often preferred
- c. The personnel conducting the monitoring : production line supervisors, maintenance staff, QC staff etc.
- d. Signatures by monitor & supervisor

![](_page_53_Picture_0.jpeg)

#### 11. Establish corrective actions (stage 10) : Principle 5

- a. Develop specific corrective action for each CCP
- b. Corrective actions include :
  - 1) Determination & correction of the course of non-compliance
  - 2) Determination of the disposition of the non-compliant product
  - 3) Record the corrective actions taken

![](_page_54_Picture_0.jpeg)

#### 12. Establish verification procedures (stage 11) : Principle 6

- a. To determine if the HACCP system is working correctly
- b. Verification includes :

1) Review of the HACCP system & its records

2) Review of deviations and product dispositions

3) Confirmation that CCPs are kept under control

c. A periodic comprehensive evaluation of the HACCP system by independent third party

![](_page_55_Picture_0.jpeg)

#### 13. Establish documentation & record keeping (stage 12): Principle 7.

- a. Hazard analysis
- b. CCP determination
- c. HACCP plan
- d. Critical limit determination
- e. CCP monitoring activities
- f. Process steps
- g. Associated hazards
- h. Critical limits
- i. Verification procedures & schedule
- j. Deviation
- k. Associated corrective actions
- I. Modifications to the HACCP system

![](_page_56_Picture_0.jpeg)

# Thank you~\*^/\*