

PIC/S Revision of Annex 1

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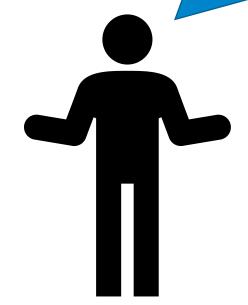
Department of Health and Aged Care, TGA



Common concerns with Annex 1

The new Annex 1 is a significant increase in requirements!

No, we simply clarified existing requirements, and provided new guidance where there wasn't any before!

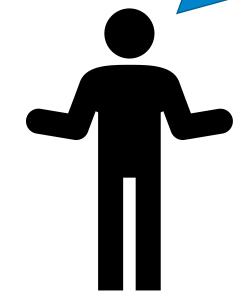




Common concerns with Annex 1

The new Annex will render my existing site non-compliant!

No, the changes to the Annex have been specifically written to allow existing technologies

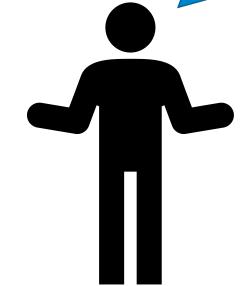




Common concerns with Annex 1

Annex 1 now applies to non-sterile goods!

No, it doesn't* (I need to explain)





Annex 1 and non-sterile medicines What does that This room is mean? grade D TABLET 10000 === Grade D? • Construction? • Gowns? Classification? • Filtration? • Monitoring? ΔP? • Etc?

Annex 1 and non-sterile medicines This room is controlled in accordance with the classification, gowning and monitoring requirements of Grade D as specified in this document What does that mean? TABLET 10000 === Deficiencies for non-sterile goods cannot be raised using Annex 1 clauses!

Principles - QRM

2.2 "Processes, equipment, facilities and manufacturing activities should be managed in accordance with QRM"



QRM applies to this document in its entirety and will not, normally, be referred to in specific paragraphs. Where specific limits or frequencies or ranges are specified, these should be considered as a minimum requirement. They are stated due to historical regulatory experience of issues that have been identified and have impacted the safety of patients.

Contamination Control Strategy elements

Quality Risk Management

Organisational and Technical Measures



Personnel Cultural considerations

- Appropriate education
- Suitable knowledge and experience
- Clothing considerations
- Gowning processes
- Training strategy
- Qualification for aseptic processing



quipment&

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Premises

Location

- Design
- Capability Capacity
- Authorisations
- Validation life cycle
- Operating conditions
- Planned Preventative maintenance
- Monitoring and controls
- Cleaning and disinfection
- Consumables
- Water Sources
- Steam (s)
- •HVAC design
- Gases



Process design

- Sterility Assurance
- •In-process controls
- Process risk assessments
- Process Validation
- Intermediate specifications
- PUPSIT

Production

- Operating conditions
- Cleaning and disinfection
- Materials Management



Quality

8

Materials

- Specifications
- Materials management
- Parameters & attributes of
- API
- Excipients
- Components
- Process aids
- Packaging
- Intermediates
- Bulk
- Finished product



activities

Outsourced

Vendor assurance

- Materials management
- Component suppliers
- Sterilisation steps
- Validation experts
- Contracts
- Access to data
- Performance monitoring

eview

Risk

assessments;

Monitoring;

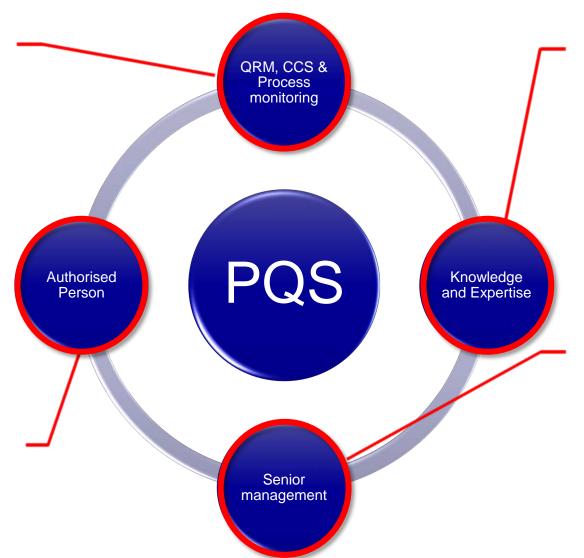
Data

Pharmaceutical Quality System

Pharmaceutical Quality System

+3.1 i) An effective <u>risk</u> <u>management</u> system is integrated into all areas of the product life cycle

+3.1 vii) Persons
responsible for the
certification/release of
sterile products have
appropriate access to
manufacturing and
quality information and
possess adequate
knowledge and
experience in the
manufacture of sterile
products

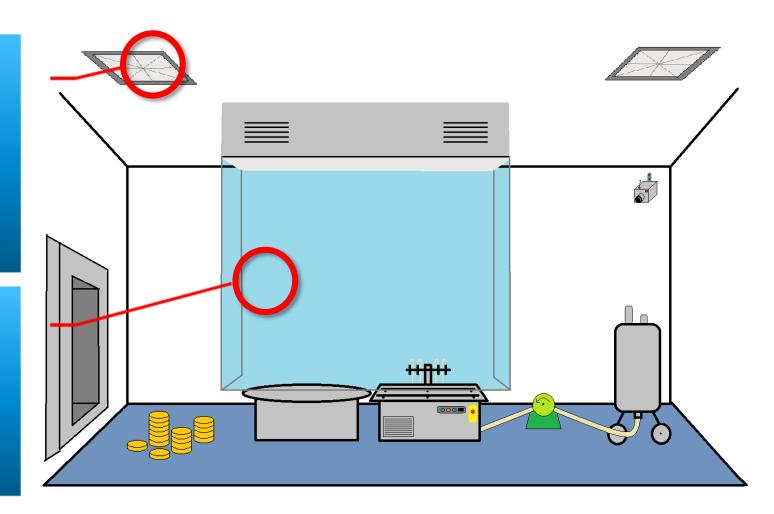


+3.1 ii) The manufacturer has sufficient knowledge and expertise in relation to the products manufactured

+3.1 v) Senior management should effectively oversee the state of control throughout the facility and product lifecycle.

+4.25 Cleanroom and clean air equipment qualification is the overall process of assessing the level of compliance of a classified cleanroom or clean air equipment with its intended use...

+4.27 classification, particles equal to or greater than 0.5 and 5 µm should be measured...both at rest and in simulated operations.

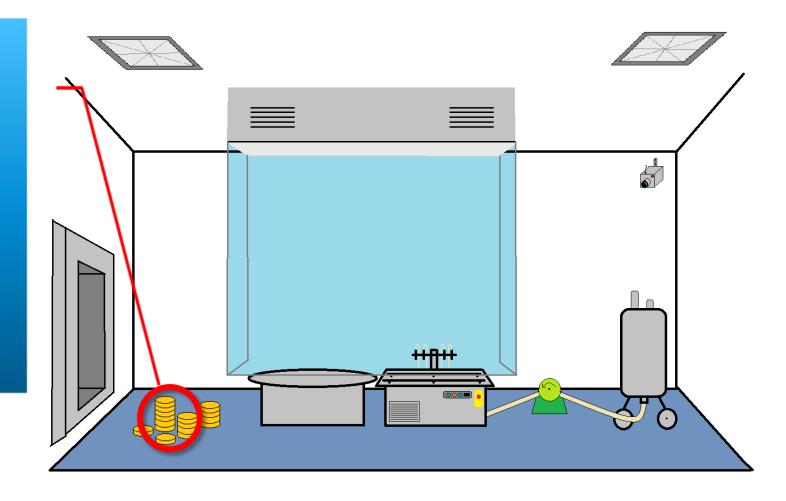


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Grade	Maximum limits for Total particle ≥ 0.5 µm/m ³		Maximum limits for Total particle ≥ 5.0 µm/m ³	
	at rest	in operation	at rest	in operation
А	3 520	3 520	Not specified	Not specified
В	3 520	352 000	Not specified	2 900
С	352 000	3 520 000	2 900	29 000
D	3 520 000	Not predetermined	29 000	Not predetermined

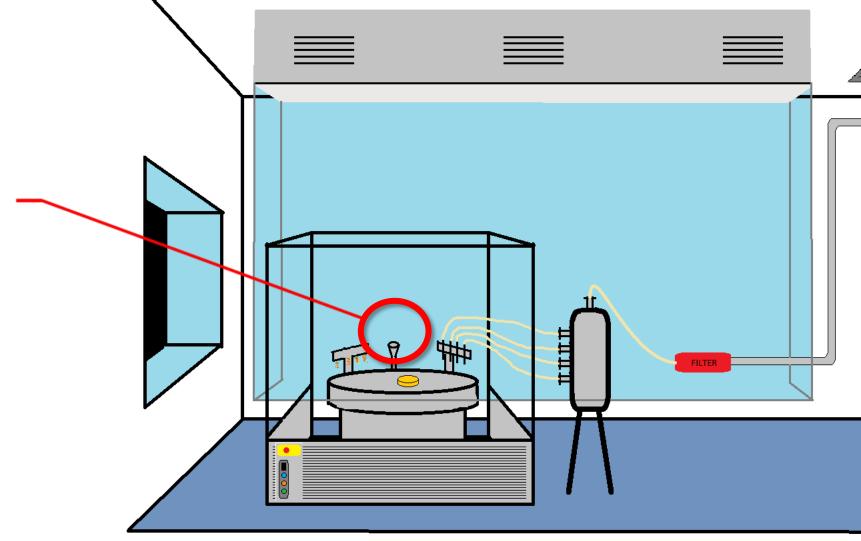
+4.25 v) microbial airborne and surface contamination + 4.31 sampling locations based on risk assessment and the results obtained from room classification, air visualization studies and process knowledge + both "at rest" and "in operation" states need to be qualified



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Grade	Air sample CFU/m ³	Settle plates (diameter 90 mm) CFU/4 hours ^(a)	Contact plates (diameter 55 mm) CFU/plate
A	No growth		
В	10	5	5
С	100	50	25
D	200	100	50

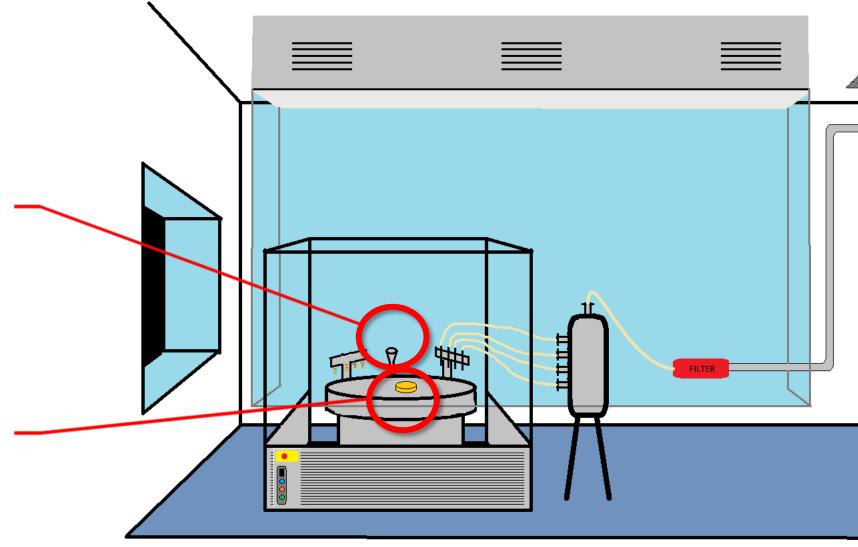
- +9.9 Total particle monitoring +9.17
- Both ≥0.5 and ≥5 μm monitored
- Sample rate at least 28L/min +9.20 If contaminants present: frequency sufficient to demonstrate compliance pre and post exposure



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- +9.25 Viable particle monitoring
 Includes personnel
 +9.31 All A&B isolates identified
 to species level
 C&D isolates ID when >limit or
 problematic organisms

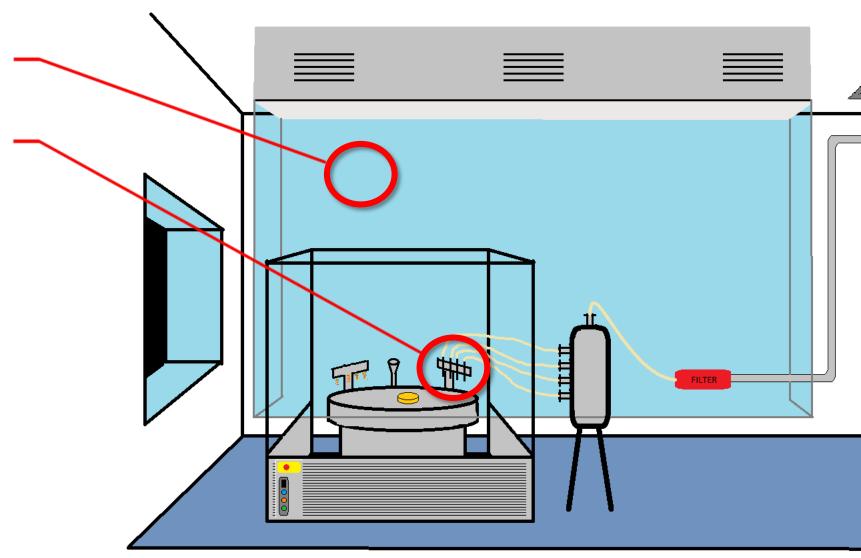


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+9.2 Temperature, %RH and 'other specific characteristics'

+9.2 Aseptic Processing Simulation (APS) ...



APS

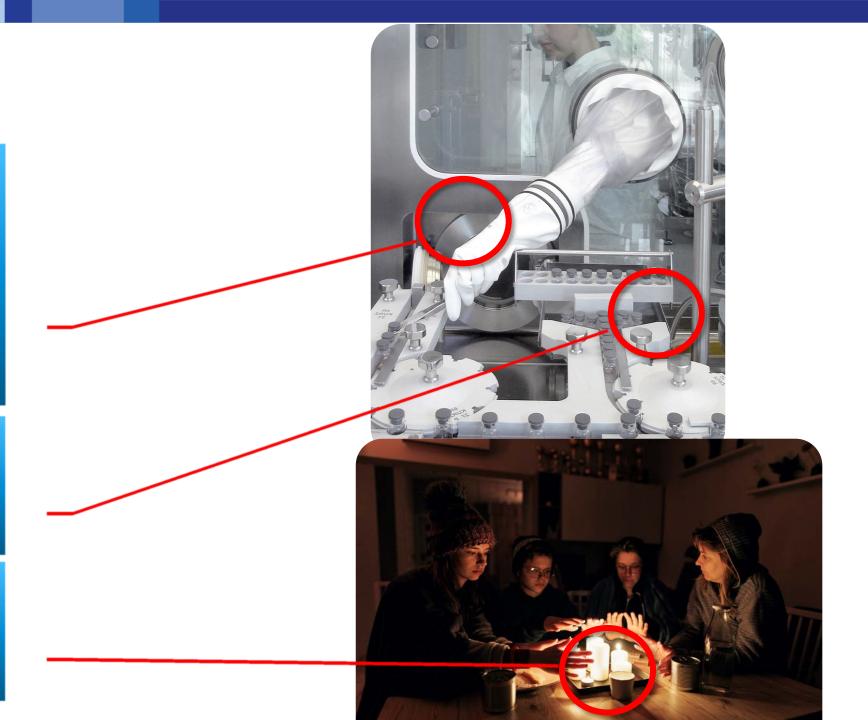
+9.34 Interventions:

- Known inherent interventions
- Include worst-case interventions
- Frequency and manner reflective of routine operations
- Based on design of process and risk to sterility

+9.36 Design of APS:

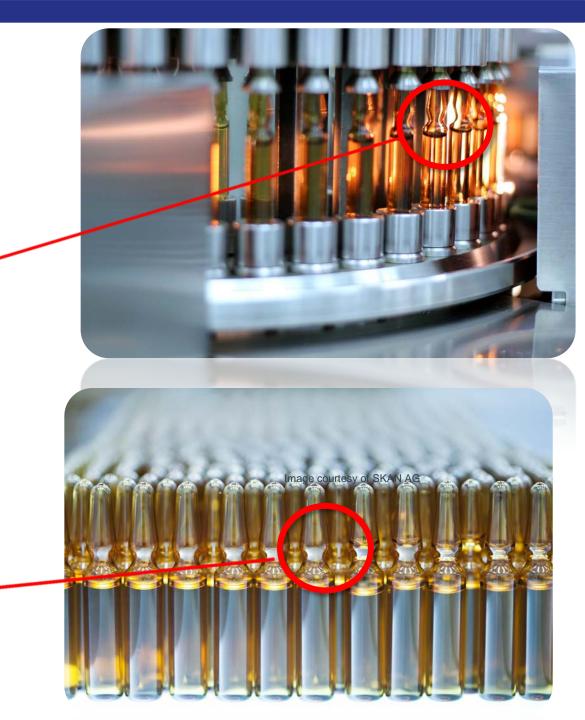
- Shifts
- Campaign operations
- Use of chaser fills

+9.35 APS should not be used to justify practices that pose unnecessary contamination risks.



APS

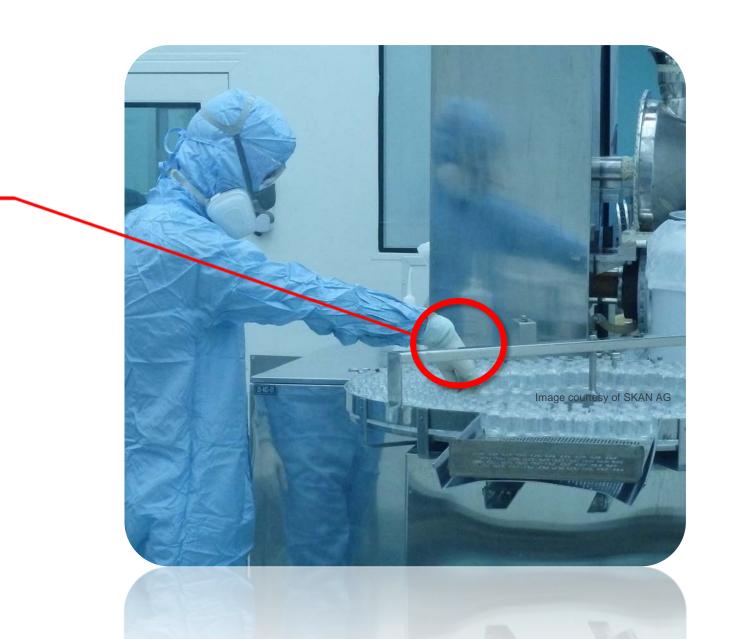
- +9.41 Unit inclusion/exclusion
- Only reject units typically rejected during normal operations
- Process knowledge Units rejected during set-up or line clearance incubated – but not included in acceptance criteria
- + 9.46 Target now ZERO...any growth = failed APS.
- Normally 3 repeat APS required
- +9.47 APS can only be aborted where similar circumstances would result in batch cancellation + investigation



APS

+9.39 Manual filling:

- Each process and operator 3 APS
- APS each operator every 6 months
- APS = routine batch size



Barrier technologies

- + 4.21 System integrity: Isolators:
- Regular system and glove leak testing
- At least at the beginning and end of each batch/campaign
- Systematic visual inspection during use



Images courtesy of SKAN AG

Barrier technologies

- + 4.21 System integrity: RABS:
- Sterilisation of gloves before installation
- Sterilisation or biodecontamination prior to each manufacturing campaign
- Disinfection after exposure to background environment, e.g. door opening
- Systematic visual inspection during use, integrity testing periodically

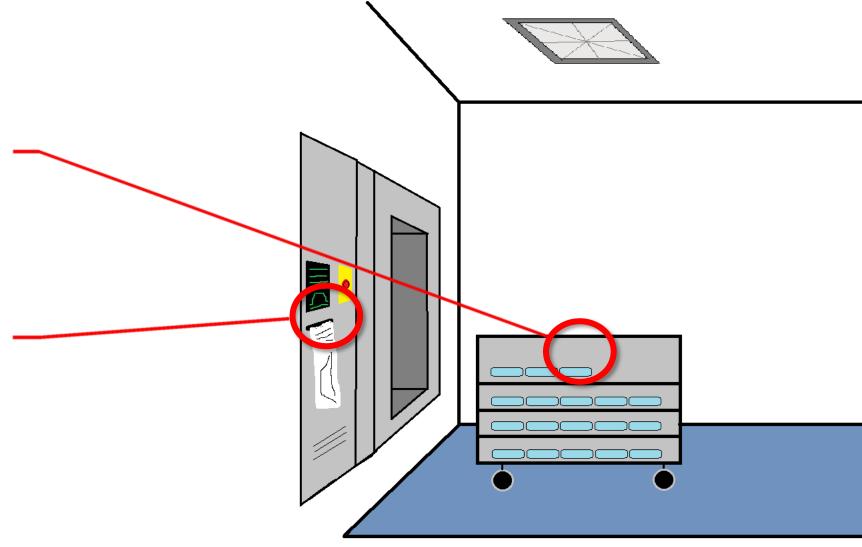


Barrier technologies

- +4.22 Validated decontamination methods sporicidal
- + Evidence that cleaning agent doesn't affect product produced
- +Automated decontamination for isolators, validated for RABS



- + 8.38 min/max load sterilisation validated + 8.39 Annual revalidation of worst case load patters...other loads revalidated based on CCS
- + 8.50 redundancy in control and monitoring systems + 8.52 Load probe temperature control prior to cycle commencement

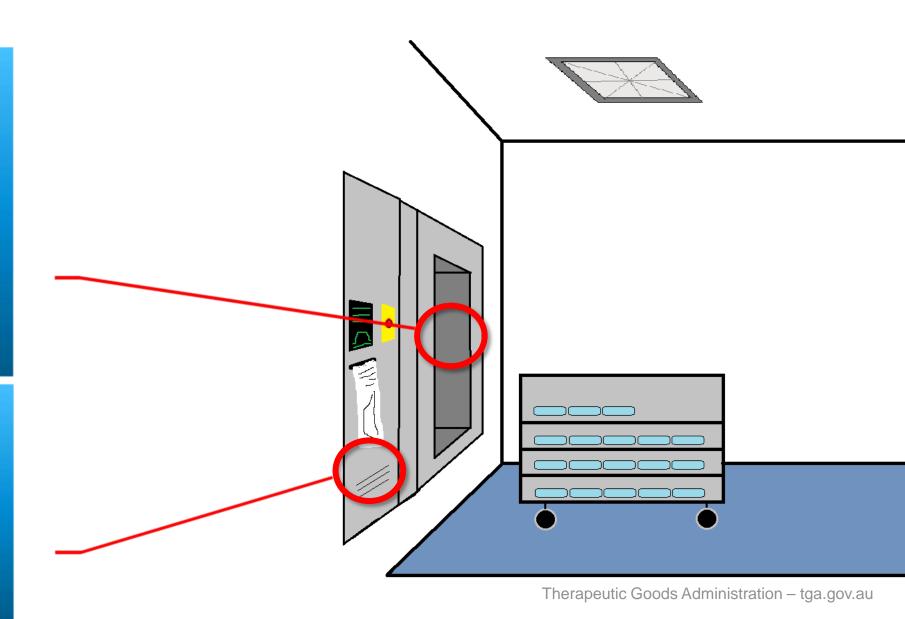


- + 8.59 Porous loads:
- equilibration time
- exposure time
- correlation of pressure and temperature
- minimum/maximum temperature range during
- exposure
- + 8.59 Liquids loads: temperature, time and/or F₀

Autoclaves:

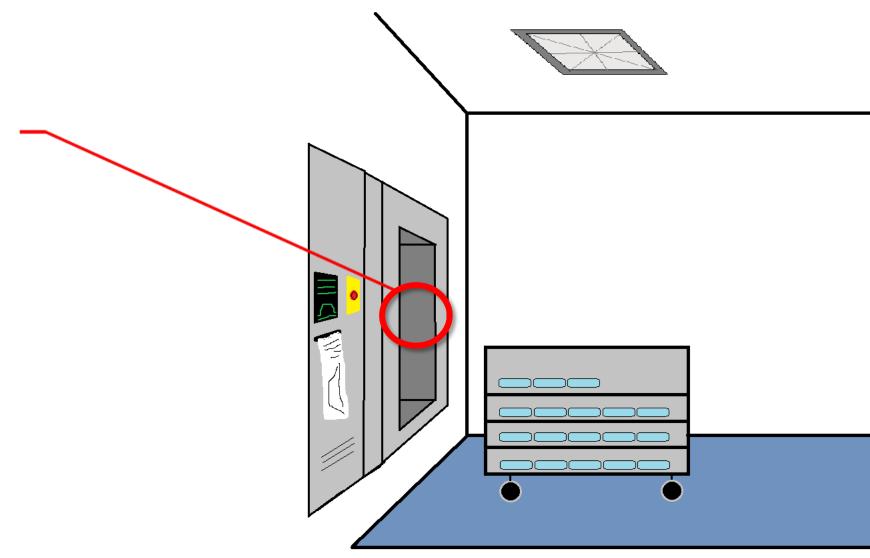
+ 8.60 Weekly leak test for vacuum phase cycles and when used to hold sterile equipment

+8.61 Daily air-removal test, or use of air detector



+8.62 prevention of container distortion

+8.64 super-heated water cycles – spray/drain checks



+8.63 SIP

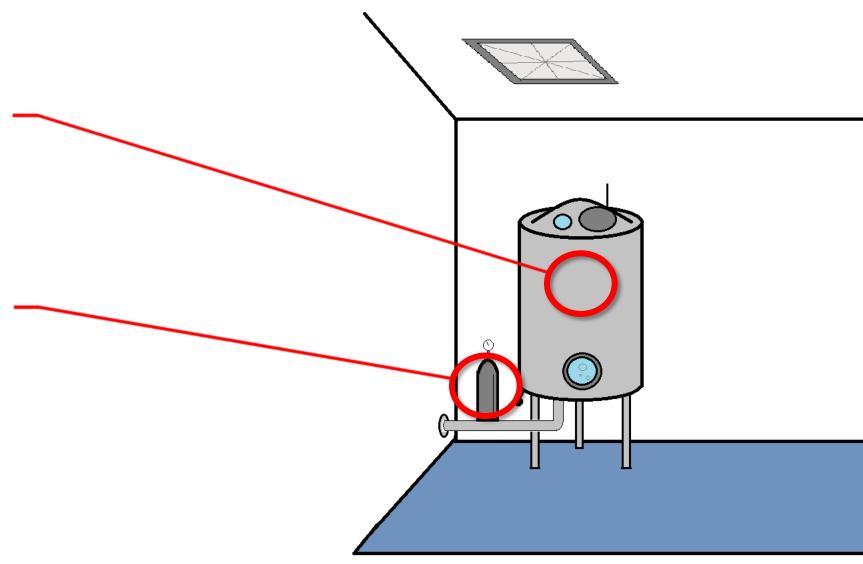
- Validated
- Cycles monitored
- +ve pressure maintained

+8.82 Design of filtration system

+8.85 Validated in line with ISO13408-2

+8.87 PUPSIT

+8.94 Single use of filters



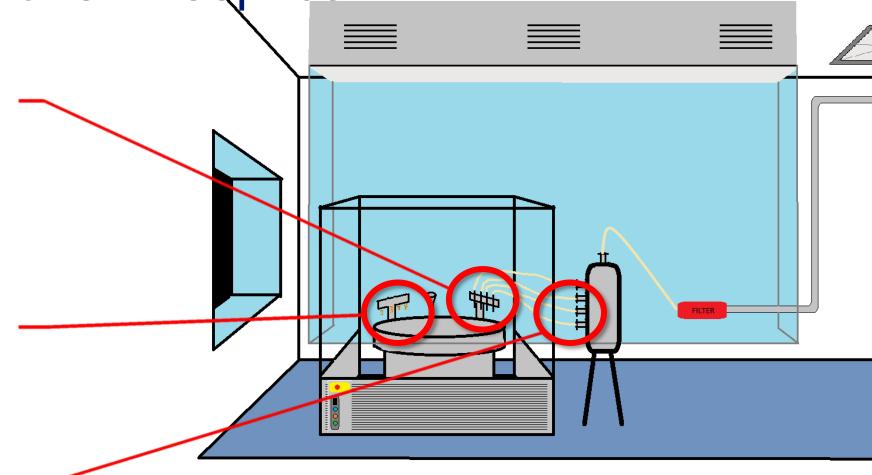
Critical Operations - Aseptics

+5.2 For aseptics - all direct and indirect contact parts sterilised

+8.16

- Authorised list of interventions
- Interventions designed –QRM Media fills
- Engineering solutions for all interventions/tools
- Non-qualified interventions managed as a deviation

+8.131
Single use systems



Critical Operations - Aseptics

SUS Risks

- Fragile bags
- Number and complexity of manual operations
- Complexity of assembly
- Risk of hole and leakage
- Risk of particulate contamination
- Extractables/leachables
- Potential for compromised system integrity during unpacking

SUS Mitigation

- Supplier qualification
- Sterilization qualification
- Design & validation
- Checking of each unit upon reception
- Manufacture conditions
- Correct handling &set up
- Visual inspection

IPQC

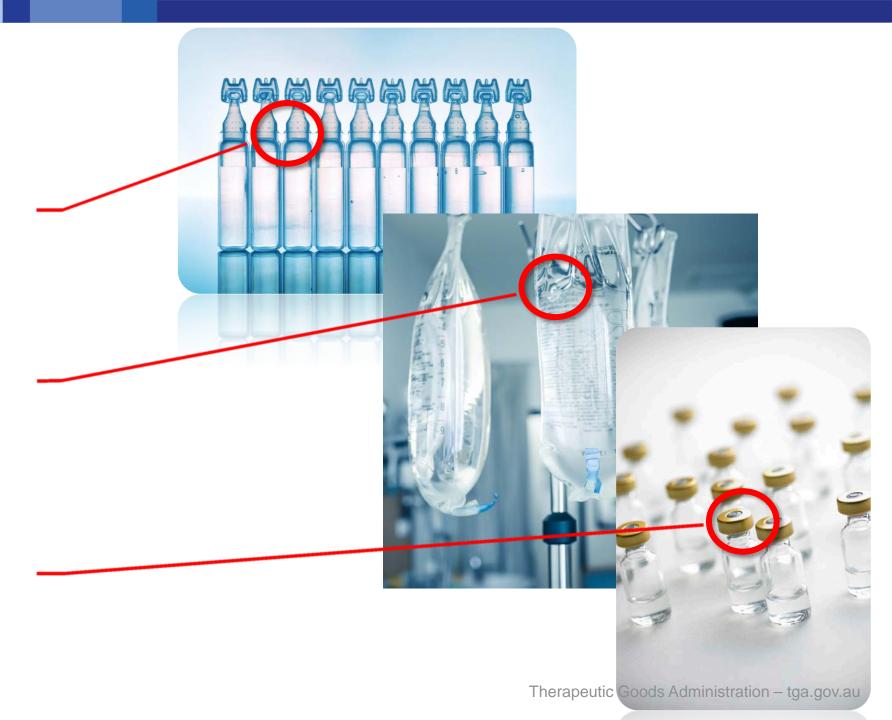
+8.22 Fusion sealed SVP – 100% integrity tested

+8.22 Fusion sealed LVP – Reduced sampling where justified:

- Consistency of process
- High level of process control

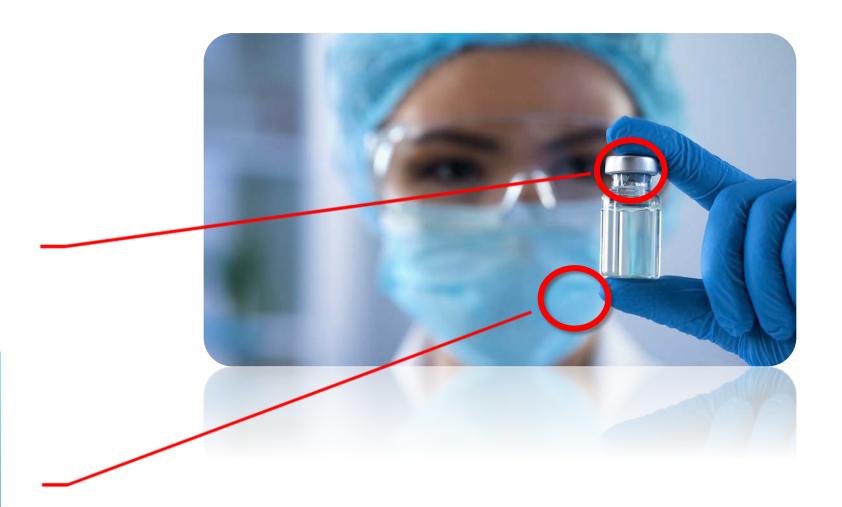
+8.23 Non-fusion sealed:

- Sampling where justified:
- Knowledge of CC system
- Supplier management and process knowledge
- High process control



IPQC

- +8.31 Visual inspection
- Controlled conditions
- Annual qualification
- +8.32 Automated systems
- Knapp testing
- Challenge units during setup
- +8.33 Monitoring, recording and trending of defects
- +8.30 Visual inspection
- Categorization of defects
- Investigation of OOT results
- If AQL is used, no critical defects permitted (addresses USP <790>)



IPQC

+10.3 Bioburden representative of worst case

+10.4 Organisms identified and impact on sterilisation process assessed



Next steps

- Adoption strategy
- Gap analysis
- Engagement with SM-TWG

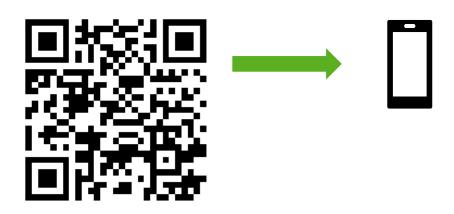
Participate in the Q&A

Verbal questions:

Raise your hand to ask a verbal question. A member of the GMP Forum staff will provide a roaming microphone.

Written questions:

Scan the QR code below or click the link in your calendar to access Slido via your mobile device. You can submit your question, and vote on other questions submitted.





Australian Government

Department of Health and Aged Care Therapeutic Goods Administration

Coming up next in this room



Lynn Talomsin
Senior GMP Inspector

Adoption of future PIC/S revisions