



EIPG Comments on EC Consultation Document

“Good Manufacturing Practice for Advanced Therapy Medicinal Products”

http://ec.europa.eu/health/human-use/advanced-therapies/developments/index_en.htm

General Comments

The European Industrial Pharmacists Group (EIPG) is a European association representing the national, professional organisations of pharmacists employed in the pharmaceutical or allied industries of the Member States of the EU, the EEA and European countries having a mutual recognition agreement with the EU on compliance control of regulated medicines. EIPG represents about 12,000 industrial pharmacists.

We have examined this latest version of the document and have focused on a number of details as we understand the objective of this consultation is a revision and refinement of the document. Our observations and suggestions are based on the practical experience of our members, mainly experts in quality and GMP.

We are satisfied that this document represents a solid foundation of guidance for those manufacturing ATMPs. We should like to re-emphasise, as shown in lines 167-170, that these rules should be applied not only to staff in industry but also to academic and hospital sites where ATMPs or their intermediates are manufactured. The issue is about the preparedness of these sites for GMPs and the awareness of Health Authorities (Drug Agency) in extending their inspection activity to these sites.

Detailed comments, observations and suggestions are reported with reference to the line(s) number(s)

- 167-170:** it is observed that inspections by Local Health Authorities will be required not only to industry but also to hospitals and academic sites when they participate in any step of the process
- 188-189:** examples would be helpful to clarify this requirement
- 240-241:** a guidance about suppliers qualification could be useful, to clarify the “acceptable level”
- 255-257:** examples should be helpful to clarify this requirement
- 280:** a definition of “*substantial manipulation*” would be useful



- 394-395:** in grade A/B, gloves should be regularly disinfected during operations and masks and gloves should be changed at least for every working session
- 417:** as protocols about vaccination vary from country to country, it would be better to define the minimum vaccination requirements
- 427-428:** QC responsibility should be extended to auxiliary materials, such as sterile clothing, disinfectants
- 441(a):** disinfection efficacy should be assessed
- 444(c):** pressure differentials should be appropriate as required by the different area grades (A, B, C and D)
- 447(d):** particle monitoring would be included
- 451-452:** examples of “*appropriate control measures should be applied*” would be useful
- 496:** it would be better to replace *sterilization* with “*terminal sterilization*”
- 499:** *sterility* should be changed in “*aseptic conditions*”
- 506 Note 5:** a closed system also protects the product from the personnel
- 527:** reference to EU GMP- Annex 1 should be made
- 529 Note 6:** the definition of “*at rest*” should be the following: the “at-rest” state is the condition where the installation is installed and operating, complete with production equipment but with no operating personnel present
- 530 table:** the criteria of the new (2016) ISO 14644-1 should be considered
- 534-535:** disinfectants rotation should be better described: the rotation is needed not only to avoid strain resistance, but also to achieve a broader range of bio decontamination activity
- 536:** the air lock should be validated
- 546-548:** in addition to alarm limits, a set of alert limits should be defined
- 551:** for grade A areas, the continuous monitoring is not referenced (only if and when possible)
- 560:** the term “*recommended*” could be misleading
- 591:** the methods should be validated



- 673:** the minimum requirements for computerized systems about security, user profiles, back-ups and audit trail should be mentioned. The electronic signature is never mentioned and considered
- 693:** documentation should be stored in a way to protect it from destruction (e.g.: fire)
- 701:** photographic and/or video recording
- 707-708:** the ALCOA concept could be mentioned
- 815:** the packaging integrity of the received materials should be documented
- 845:** manufacturing process and aseptic process (media-fill)
- 889:** the time of 30 years seems excessive
- 957-959:** minimum provisions about supplier/vendor selection, qualification and monitoring are missing
- 962-964:** it would be better to report “*BSE/TSE*”
- 977 and 1028-1029:** it would be better to add a foot note about the use of “*barcodes*”
- 1000-1006:** minimum requirements about quality agreement should be reported
- 1197:** the current standard is normally from 80 to 85°C
- 1199:** alert limits are not mentioned
- 1200-1202:** for this material the supplier qualification is of paramount importance
- 1313:** it could be useful to insert provisions about the depyrogenation of primary packaging
- 1322-1324:** provisions for the maximum time for filtration should also be given
- 1331:** no provisions are given for the use of gases (nitrogen, CO₂ etc.) in the simulation (growth inhibition)
- 1348:** the identification should be done to species level
- 1354:** it is suggested to challenge the areas and process with the maximum number of persons (including maintenance personnel)
- 1438 & 1349:** re-qualification at appropriate intervals, according to a Risk Based Approach
- 1724-1725:** this is in agreement with supplier’s certification



- 1800:** it would be better to use the term “deviation” for unexpected events and “changes (temporary or permanent)” for planned initiatives (the term: unplanned deviation is not the current industry standard)
- 1834:** when QC activities (all or some) are outsourced, the contact lab should be qualified and suitable formal agreements established
- 1846:** also mention hospitals and investigational sites
- 1863:** it would be beneficial to have the definition of “Reference samples” and “Retain samples” together with the relevant requirements (taken from Annex 19)
- 1932-1934:** including primary packaging
- 1939:** paper and electronic raw-data should be considered and kept
- 2002-2004:** one should do every reasonable effort to execute specialized tests under GMP (e.g.: PCR)
- 2046:** a recall simulation should be executed periodically
- 2179-2178:** more details or clarification about “the operating room” in the hospital and responsibilities towards Health Authorities should be reported

26th September, 2016