

# The Need for Regulatory Flexibility to Support Flexible Manufacturing

NASEM Workshop on Technical and Regulatory Barriers  
to Innovations in Pharmaceutical Manufacturing

June 2, 2020

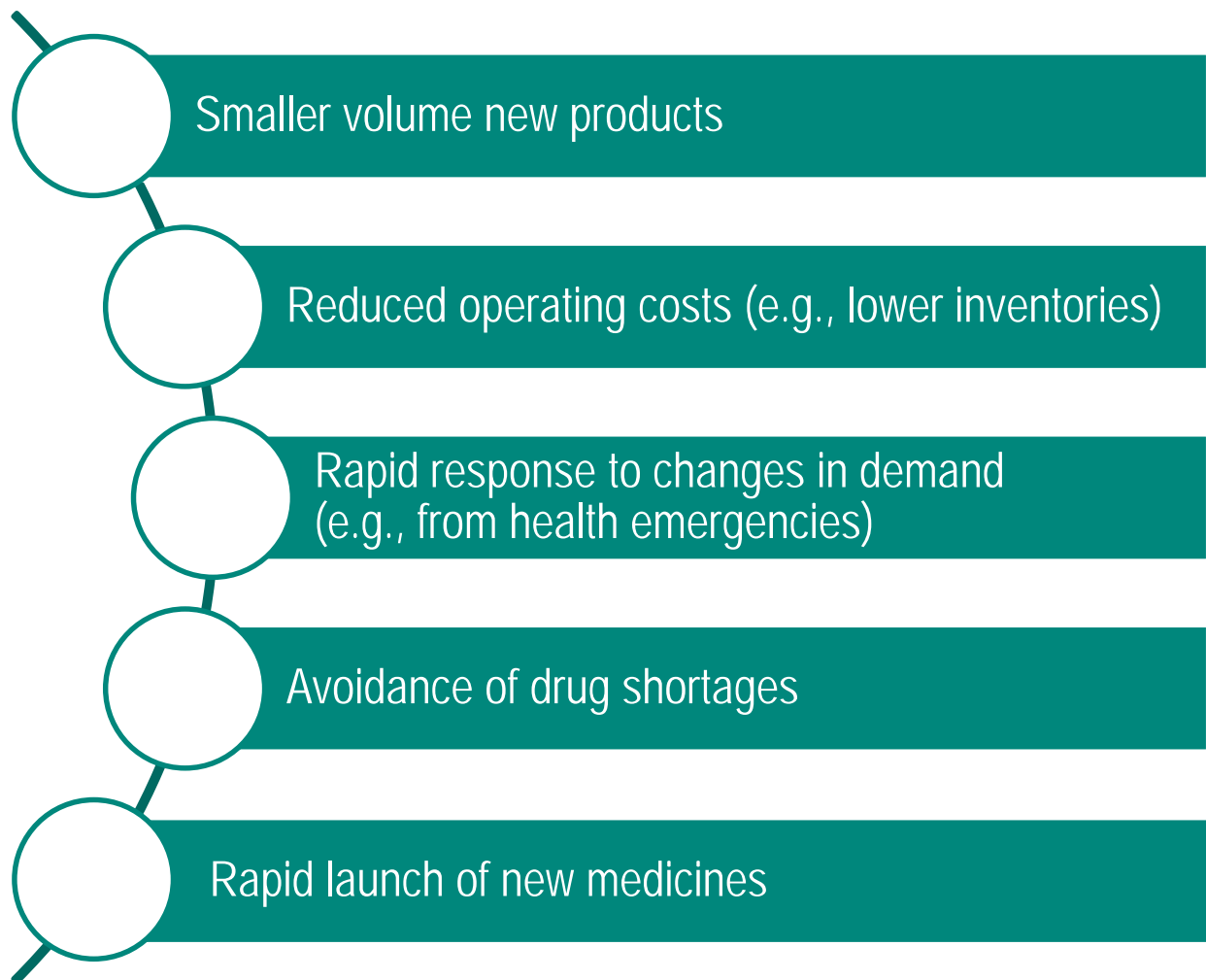


Christine M. V. Moore, PhD

Global Head & Executive Director, GRACS CMC-Policy

Merck & Co., Inc., Kenilworth, NJ, USA

# Drivers for Flexible Manufacturing



*Ultimate Goal: Availability of quality medicines for patients*

# FDA Desired State



CDER's Office of Pharmaceutical Quality created the **Emerging Technology Program** to promote the adoption of innovative approaches to pharmaceutical product design and manufacturing.

## Desired State for Pharmaceutical Quality

*A maximally efficient, agile, flexible pharmaceutical manufacturing sector that reliably produces high quality drug products without extensive regulatory oversight*

*Janet Woodcock, CDER/FDA - 2005 and today*



The **CATT** was established to promote dialogue, education, and input among CBER staff and between CBER and prospective innovators/developers of advanced manufacturing technologies.



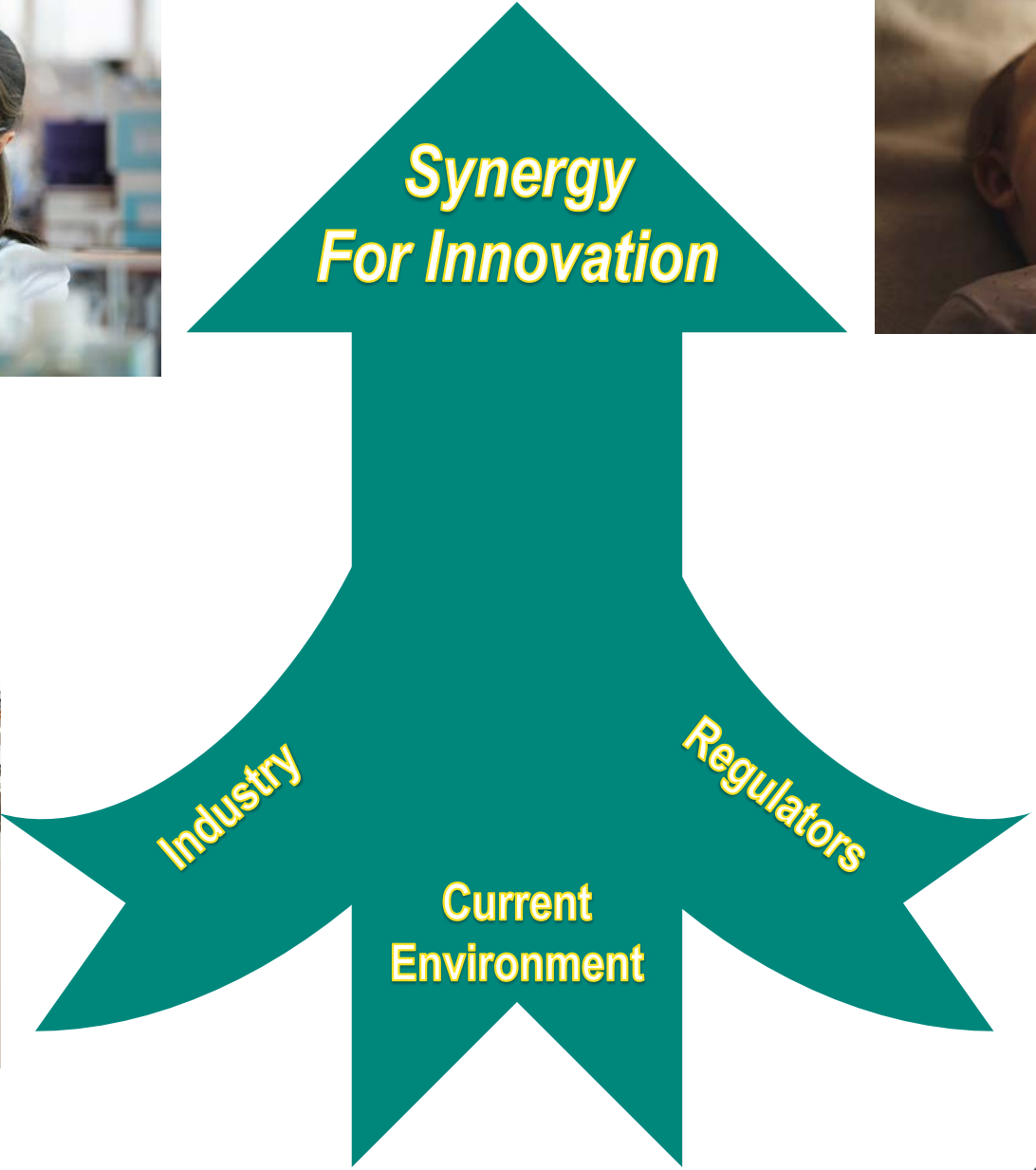
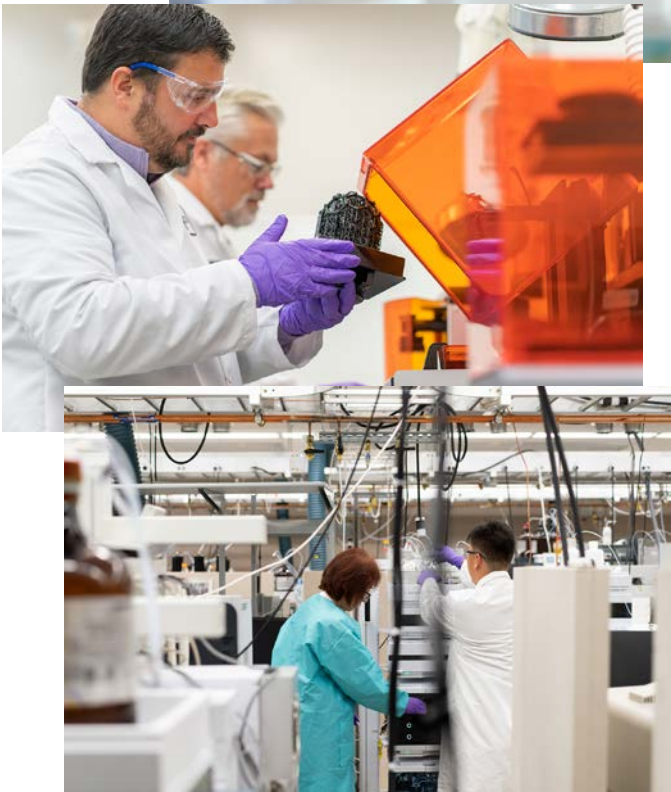
Innovation Office



Process Analytical Technology Team  
Innovation Task Force



Innovative Manufacturing Technology Working Group



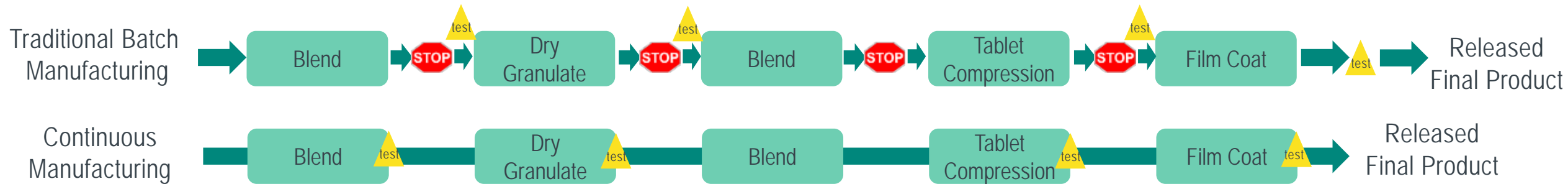
# Flexible Manufacturing under Current Regulatory Structure

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# Continuous Manufacturing

Continuous manufacturing is a process in which the input material(s) are continuously fed into and transformed within the process, and the processed output materials are continuously removed from a system which consists of a series of two or more unit operations.



## Features of Continuous Manufacturing:

- Shorter processing times
- Integrated unit operations
- Smaller equipment footprint
- Elimination of traditional scale-up
- Enabling of real time analytics & control

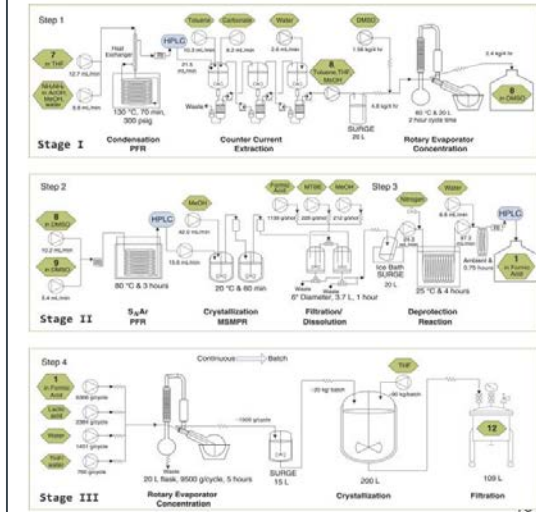
## Technical & Regulatory Challenges:

- Material traceability
- Effect of disturbances to homogeneity
- Segregation of potential non-conforming material
- Amenable to real time release testing and controls



# Progress in Continuous Manufacturing (CM)

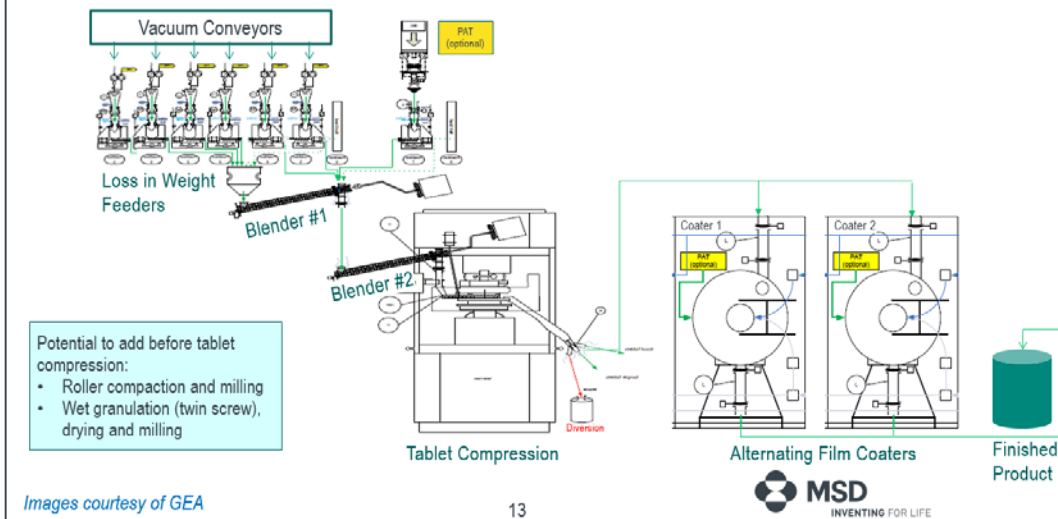
## Example of Multistep Small Molecule API Continuous Process



- Continuous preparation of multi-kilogram quantities of a cancer drug candidate
- CGMP operation for clinical trial material
- 5 step synthesis, 8 continuous unit operation
- Around 3 kg per day (total 24 kg)
- Online monitoring

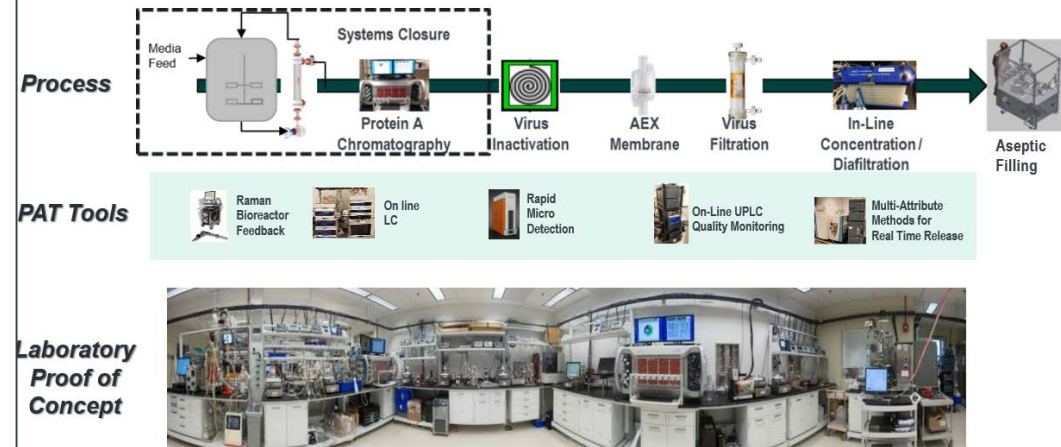
K. Cole, et. al, "Kilogram-scale prexasertib monolactate monohydrate synthesis under continuous flow CGMP conditions", Science, Vol. 356(6343), pp. 1144-160, 2017

## Example Continuous Manufacturing for Solid Oral Dosage Forms



Images courtesy of GEA

## Example Continuous Manufacturing for Biologics



To date FDA has approved at least 7 CM applications:

- 6 small molecule drug product
- 1 end to end small molecule drug substance
- Discussions ongoing for CM for biologics

Small molecule CM drug product has been approved in by at least 12 regulatory agencies worldwide

# Current Regulatory Status

## FDA Draft Guideline

### Quality Considerations for Continuous Manufacturing Guidance for Industry

#### *DRAFT GUIDANCE*

**This guidance document is being distributed for comment purposes only.**

Comments and suggestions regarding this draft document should be submitted within 90 days of publication in the *Federal Register* of the notice announcing the availability of the draft guidance. Submit electronic comments to <https://www.regulations.gov>. Submit written comments to the Dockets Management Staff (HFA-305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852. All comments should be identified with the docket number listed in the notice of availability when published in the *Federal Register*.

For questions regarding this draft document, contact (CDER) Sau L. Lee at 301-796-2905.

U.S. Department of Health and Human Services  
Food and Drug Administration  
Center for Drug Evaluation and Research (CDER)

February 2019  
Pharmaceutical Quality/CMC  
Pharmaceutical Quality/Manufacturing Standards (CGMP)

13276549 Ljn

## ICH Q13 – In progress



#### Final Concept Paper

**ICH Q13: Continuous Manufacturing of Drug Substances and Drug Products  
dated 14 November 2018**

*Endorsed by the Management Committee on 15 November 2018*

#### Type of Harmonisation Action Proposed

New Quality Guideline

#### Statement of the Perceived Problem:

There is a general consensus that continuous manufacturing (CM) has potential for improving the efficiency, agility, and flexibility of drug substance and drug product manufacturing. Regulatory agencies have seen more companies engaged in the development and implementation of CM in recent years than in the past. Although current regulatory frameworks allow for commercialization of products using CM technology, a lack of regulatory guidelines can make implementation, regulatory approval, and lifecycle management challenging, particularly for products intended for commercialization internationally. An ICH guideline would facilitate international harmonisation and could reduce barriers to the adoption of CM technology.

*“Although current regulatory frameworks allow for commercialization of products using CM technology, a lack of regulatory guidelines can make implementation, regulatory approval, and lifecycle management challenging, particularly for products intended for commercialization internationally.”*



# Averting Regulatory Impediments

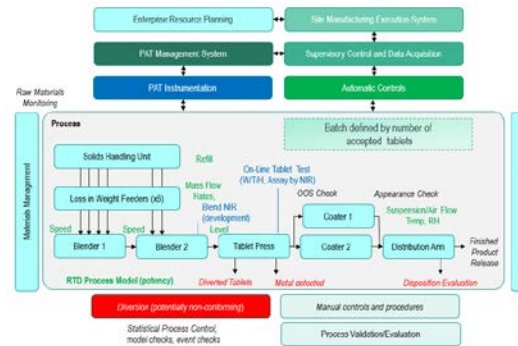
## *Use a Science & Risk Based Approach*



### One size does not fit all!

- Control strategy elements need to be appropriate to specific product and process risks

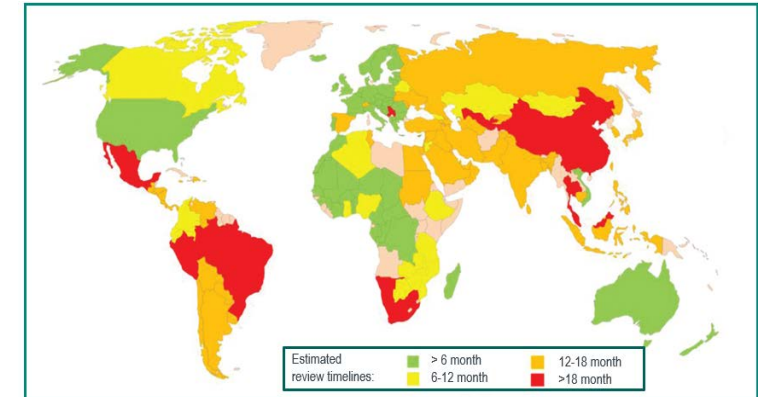
## *Keep Patient Needs in Mind*



### Manufacturing Complexity $\neq$ Regulatory Commitments

- What elements are needed for patient safety & efficacy vs. manufacturability?

## *Cultivate International Convergence*

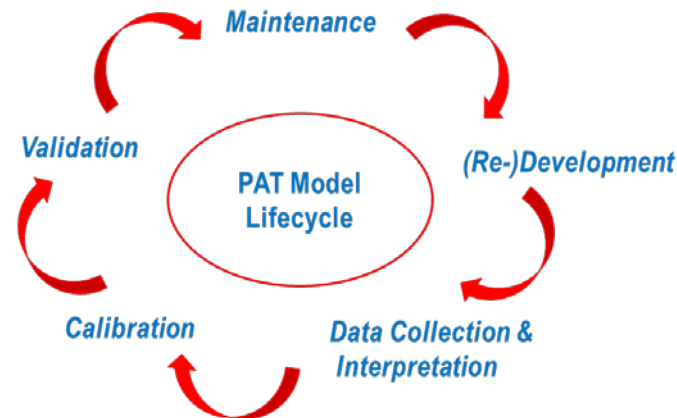


Alignment needed on:

- Dossier content (established conditions)
- Post approval change data requirements
- Post approval change timelines

# Technology & Regulation Example - NIR Spectroscopy

Model maintenance is a normal and necessary part of lifecycle management for PAT models as new variability is introduced



Regulatory expectations for post-approval changes (including maintenance) are provided:

- FDA draft guideline: <https://www.fda.gov/media/91343/download>
- [EMA Guideline on NIRs data requirements](#)
- [Addendum to EMA NIRs guideline](#)



## NIR Procedure Components

Measurement Method	Instrument
	Measurement Mode
	Scan rate/number
	Sample presentation
Model Construct	Reference Method
	Chemometric Algorithm
	Calibration range
Performance Criteria	Specificity
	Linearity
	Accuracy
	Measurement precision
	Robustness
Calibration Parameters	Calibration samples
	Spectral range
	Spectral preprocessing
	# of latent variables
	Loadings
Monitoring	Spectral quality check algorithm & threshold
	Outlier diagnostics

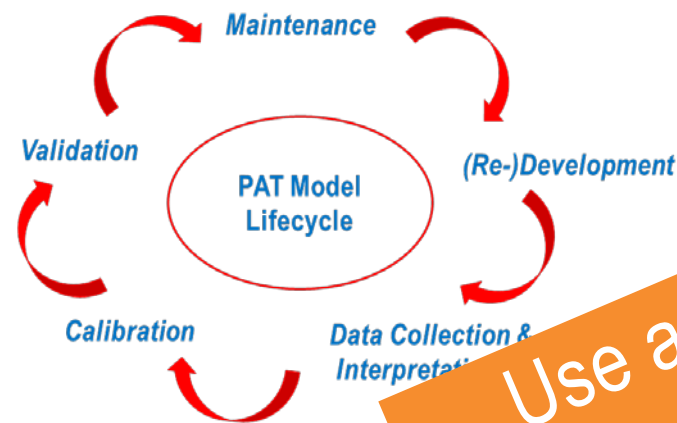
**Potential Approach**  
(aligned with ICH Q12 –  
perform based approaches)

“Fixed” components –  
require supplement  
to change

“Flexible” components –  
managed within PQS

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Use a science & risk based approach  
Keep patient needs in mind  
Cultivate international convergence

NIR Procedure Components

Measurement Method	Instrument
	Measurement Mode
	Scan rate/pulse
	Scan length
Performance	Accuracy
	Measurement precision
	Robustness
Calibration Parameters	Calibration samples
	Spectral range
	Spectral preprocessing
	# of latent variables
	Loadings
Monitoring	Spectral quality check algorithm & threshold
	Outlier diagnostics

Potential Approach  
(aligned with ICH Q12 –  
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# Existing Regulatory Tools – Design Space



2005 & 2008

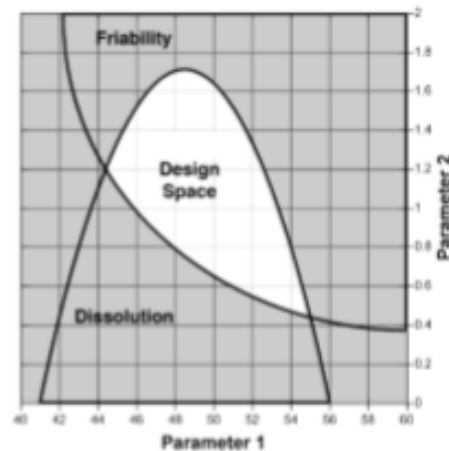
INTERNATIONAL CONFERENCE ON HARMONISATION OF TECHNICAL  
REQUIREMENTS FOR REGISTRATION OF PHARMACEUTICALS FOR HUMAN USE

ICH HARMONISED TRIPARTITE GUIDELINE

**PHARMACEUTICAL DEVELOPMENT  
Q8(R2)**

Current Step 4 version  
dated August 2009

*This Guideline has been developed by the appropriate ICH Expert Working Group and has been subject to consultation by the regulatory parties, in accordance with the ICH Process. At Step 4 of the Process the final draft is recommended for adoption to the regulatory bodies of the European Union, Japan and USA.*



2012

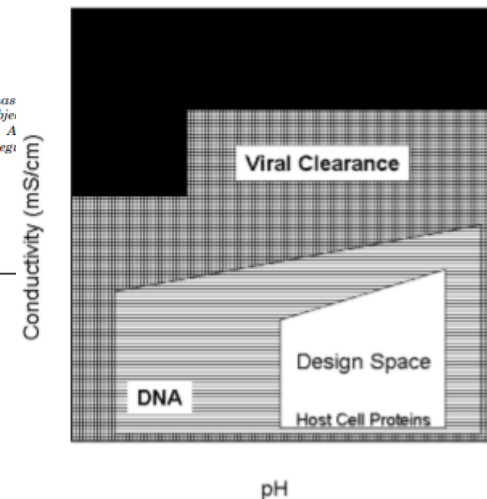
INTERNATIONAL CONFERENCE ON HARMONISATION OF TECHNICAL  
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ICH HARMONISED TRIPARTITE GUIDELINE

**DEVELOPMENT AND MANUFACTURE OF DRUG SUBSTANCES  
(CHEMICAL ENTITIES AND  
BIOTECHNOLOGICAL/BIOLOGICAL ENTITIES)  
Q11**

Current Step 4 version  
dated 1 May 2012

*This Guideline has  
and has been subject  
the ICH Process. A  
adoption to the reg*



ICH INTERNATIONAL CONFERENCE ON HARMONISATION OF TECHNICAL  
REQUIREMENTS FOR REGISTRATION OF PHARMACEUTICALS FOR HUMAN USE

2009 & 2010

Quality Implementation Working Group  
on Q8, Q9 and Q10  
Questions & Answers (R4)

Current version  
dated November 11, 2010



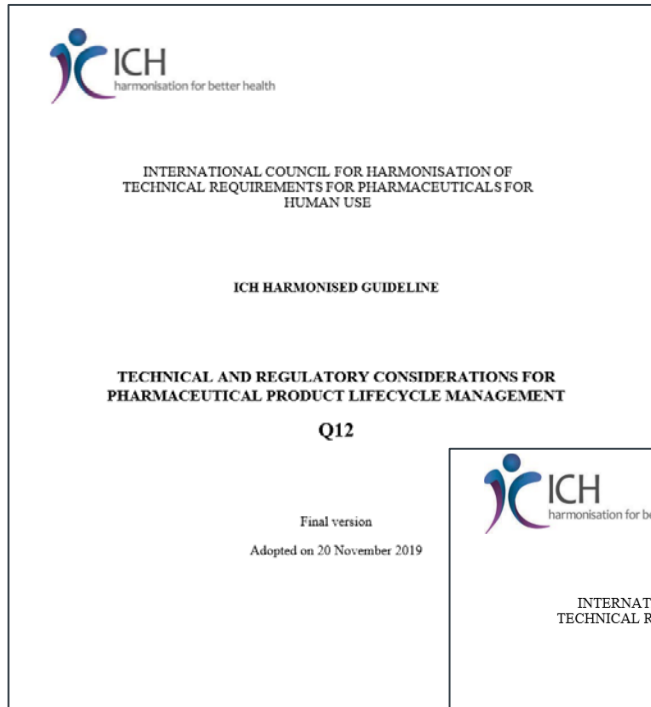
2011

**ICH QUALITY IMPLEMENTATION WORKING GROUP  
POINTS TO CONSIDER (R2)**

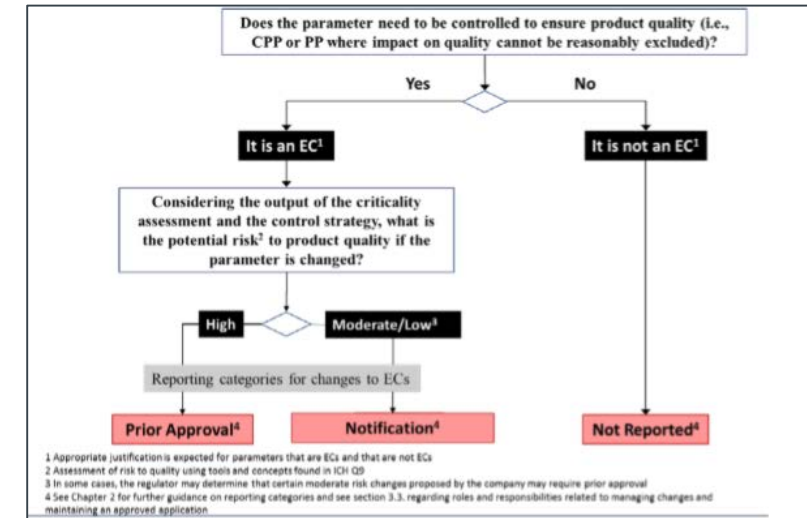
**ICH-Endorsed Guide for  
ICH Q8/Q9/Q10 Implementation**

*Document date: 6 December 2011*

# Existing Regulatory Tools – ICH Q12 (ECs & PACMPs)



## Established Conditions

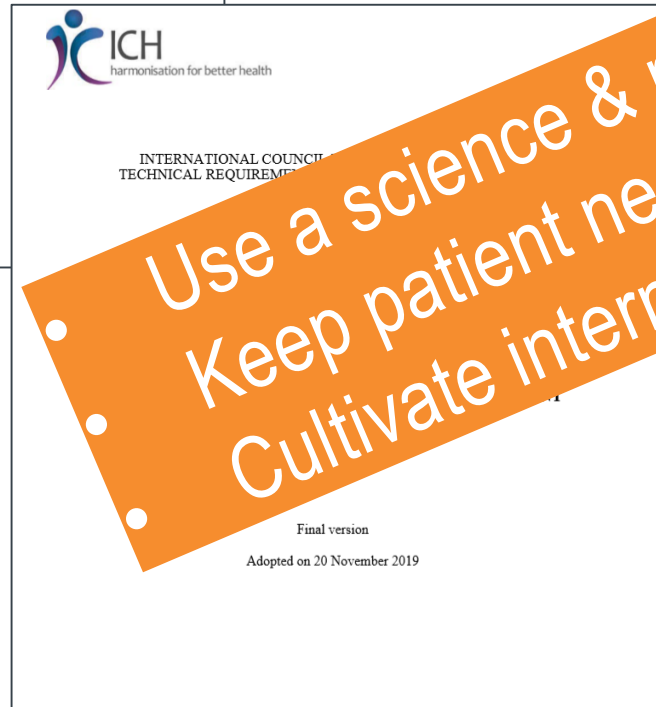
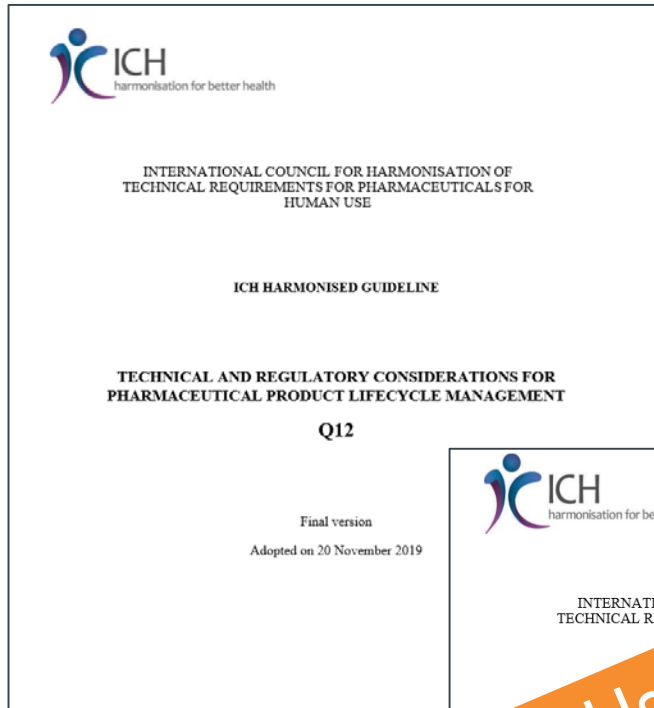


## Post Approval Change Management Protocols (PACMPs)

PACMP Component	PACMP Step 1 Contents (registration/approval of protocol)	PACMP Step 2 Contents (change implementation)
<b>Overall Strategy (Scope and Limitations of proposed change)</b>	Defined scope and limitations	Demonstrate requirements of scope are met
<b>QRM</b>	Description of QRM activities and summary of risk assessment	Confirmation that previously conducted risk assessment has not changed; or, if new information is available that impacts the risk assessment, an updated risk assessment is provided
<b>Acceptance criteria</b>	Tests and studies to be performed; description of any other criteria to be met, including plans to report outcomes from ongoing stability testing	Data demonstrating that acceptance criteria are met. Confirmation that other criteria are met. Updated CTD sections for S.2.1 Manufacturer(s) of Drug Substance and S.4.4 Batch Analyses for Drug Substance.

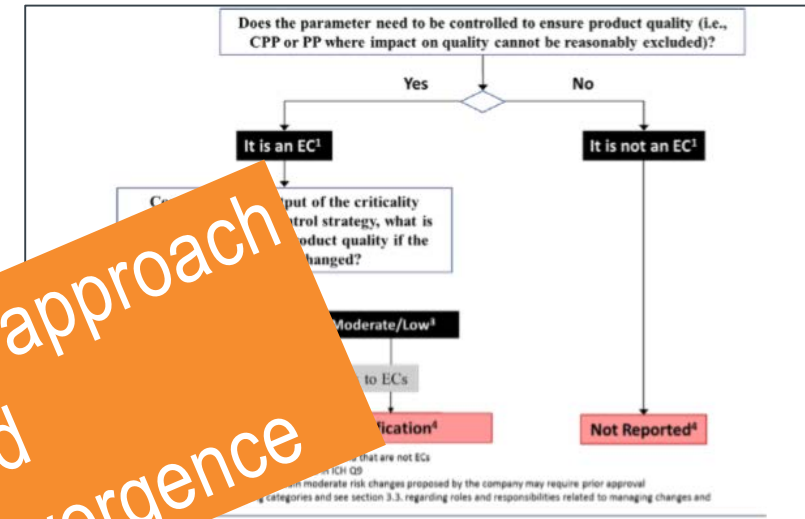


# Existing Regulatory Tools – ICH Q12 (ECs & PACMPs)



Use a science & risk based approach  
Keep patient needs in mind  
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# Flexible Manufacturing – Regulatory Opportunities

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# Portable Manufacturing

## Portable On-Demand (POD) Manufacturing



Constructed at factory



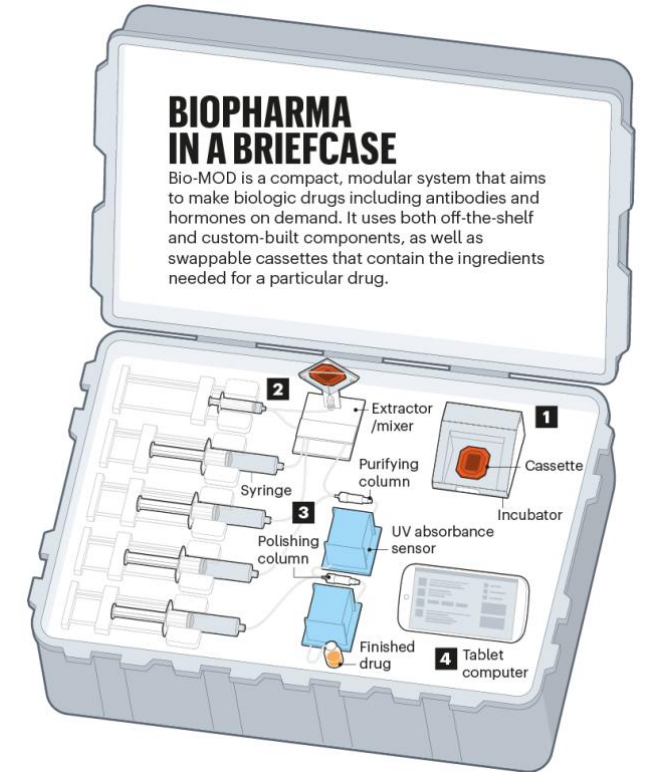
Transported to manufacturing site



Current: Multiple units assembled in a host structure



Future???  
Fully contained, mobile, stand alone unit



- 1** A cassette containing DNA, cell extract and other necessary biomolecules is incubated in a temperature-controlled shaker to produce therapeutic proteins.
- 2** The cassette is then moved to another location, where its contents are extracted and mixed with solutions that will help separate the drug.
- 3** Syringes inject buffering solutions to stabilize and wash the drug as it passes through purifying and polishing columns.
- 4** A tablet computer controls the system's pumps and sensors to monitor the purity of the finished drug.

©nature

<https://www.natureasia.com/en/nindia/article/10.1038/nindia.2019.147>

# Questions Related to Portable Manufacturing

Can an establishment have a flexible location?

- FDA defines establishment as *a place of business under one management at one general physical location*

How are the support functions provided to the portable manufacturing (e.g., utilities, warehousing, training)?

- Consistency of POD/host site interface and quality system elements

• How is product quality assured when changing locations?

- Expectations related to process validation, stability and bioequivalence

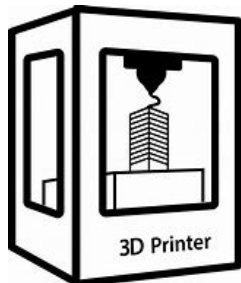
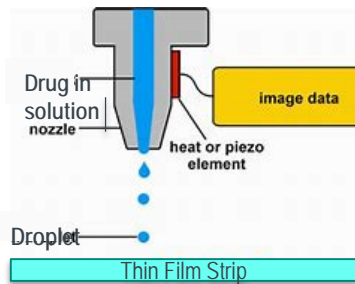
Would an inspection be required when moving the location?

- Lowered risks related to a change in location of the POD

# Individualized Medicine

*What if medicines were manufactured in your pharmacy or in your home?*

## Solid Oral Drug Products



## Autologous Cell Therapies



Figure 2: Typical process chain for autologous cell therapies

"The Cell Therapy Supply Chain: Logistical Considerations for Autologous Immunotherapies",  
Dan O'Donnell, 15 Oct 2015, Bioprocess International Supplement

Is this compounding or pharmaceutical manufacturing?

How do you meet regulatory requirements for batch release?

How to regulate variable dose combinations?



# Concluding Thoughts

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# Regulation for Innovative Technology

Technology is advancing at a rapid pace:

- Manufacturing flexibility is needed to rapidly adapt to changing needs
- Goal is availability of quality medicines to patients

Regulatory Recommendations:

- Use a science & risk based approach
- Keep patient needs in mind
- Cultivate international convergence



<https://www.packagingdigest.com/pharmaceutical-packaging/pmp-we-have-many-innovative-opportunities-as-packaging-professionals-160721>

# THANK YOU!

Questions, comments, copies:  
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