

# GMP for Advanced Therapy Medicinal Products (ATMP)

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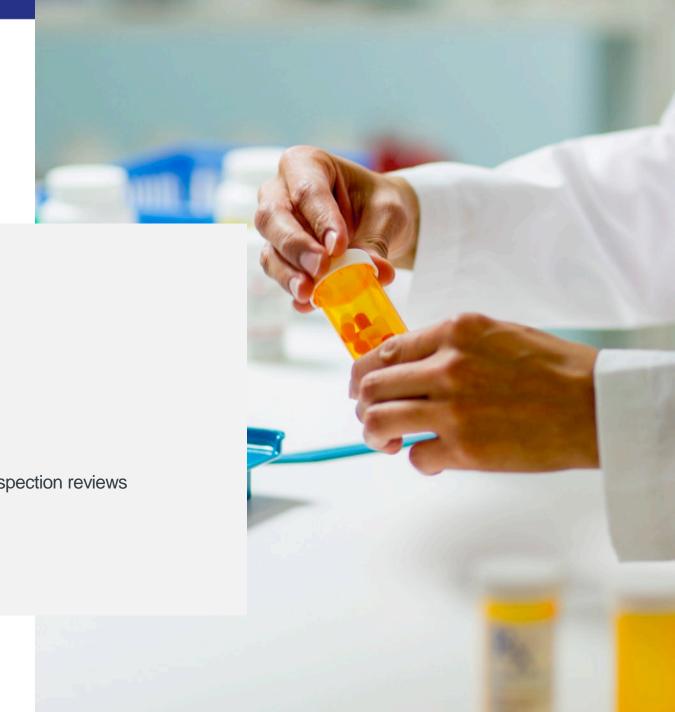
Manufacturing Quality Branch

Department of Health and Aged Care, TGA



### Overview

- Types of therapeutic goods
- How do we fulfill this mission
- Biologicals vs Biological Medicines
- What are ATMPs
- PIC/S Annex 2A Revision
- Key elements of contamination control strategy (CCS)
- The Don'ts of Cleanrooms
- Vulnerabilities Influencing factors on implementing CCS inspection reviews
- Environmental monitoring
- Contamination control
- Questions



### Types of therapeutic goods



#### **Medicines and blood products**

- prescription medicines
- over-the-counter medicines
- complementary medicines
- blood, blood components and plasma derivatives and HPCs



#### **Medical devices**

- Implants (artificial hip, breast implants)
- In-vitro diagnostics (pregnancy tests, blood glucose monitors, infectious disease testing and NAT testing)
- Low risk medical devices (bandages, tongue depressors, condoms)



#### **Biologicals**

- Human stem cells
- Tissue-based products (skin, bone, ocular, cardiovascular and amnion)
- Cell and gene based products

#### How do we fulfil this mission?

1

Good Manufacturing Practice or Manufacturing Principles: licensing Australian manufacturers and verifying compliance of overseas manufacturers using either a clearance pathway or a site inspection.

2

Premarket assessments: assessing therapeutic goods for quality and safety (the extent of the assessment depends on the type of product and level of associated risk), and for higher risk products also for efficacy or performance.

3

Post market assessments: monitoring of therapeutic goods and enforcement of standards.

### What are biological / biotechnological medicines?

## Therapeutic Goods Regulations definition

Are therapeutic goods derived from biological sources and are regulated as registered medicines. Include

- a medicine (other than an antibiotic) that is:
  - i. a vaccine, a peptide, a protein or polysaccharide-based; and
  - ii. derived from a human, animal or other organism, or produced through recombinant technology or biotechnology; and
  - iii. of a kind specified in item 1 of Part 1 of Schedule 10 (includes biotechnology medicines); or a medicine that is a human blood product of a kind mentioned in Appendix A in Part 5 of the Poisons Standard.

Biotech medicines are a subset of Biological medicines.

#### **Definition of Biologicals**

For the product to meet the definition of a biological, it must be:

- a thing made from, or that contains, human cells or human tissues, and that is used to:
  - treat or prevent disease, ailment, defect or injury
  - diagnose a condition of a person
  - alter the physiological processes of a person
  - test the susceptibility of a person to disease
  - replace or modify a person's body parts
- •faecal microbiota transplant products
- •a thing that comprises or contains live animal cells, tissues or organs.

Note that the term biologics, biologicals and biological medicines can have different interpretations in different countries/jurisdictions.

Therapeutic Goods Administration – tga.gov.au

### Biologicals and Biological Medicines

Biological medicines are not biologicals – specified in the *Therapeutic Goods (Things that are not Biologicals) (Determination No.1 of 2011)* 

#### **Biological**

- tissue-based products
- cell-based products
- immunotherapy products containing human cells
- autologous human cells and tissue products (including stem cells)
- gene-modified cell therapies
  - regulated under the Biological regulatory framework

**Australian Regulatory Guidelines for Biologicals (ARGB)** 

#### **Biological Medicines**

- recombinant products
- plasma derived products (or that contain plasma derived products)
- vaccines (that do not contain viable human cells)
- gene-therapy vectors alone
  - regulated as prescription medicines

**Australian Regulatory Guidelines for Prescription Medicines (ARGPM)** 

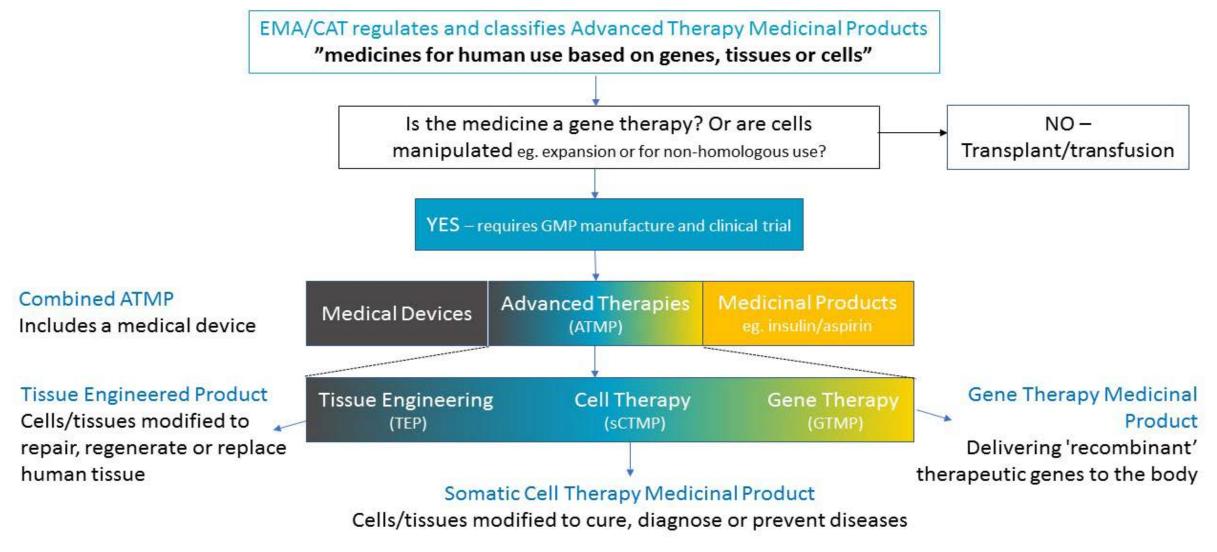
#### What are ATMPs

Advanced Therapy Medicinal Product (ATMP) is the umbrella term for three drug product classes:

- somatic cell therapies cell-based therapy medicinal products (CTMPs)
- gene therapeutics genetic therapy medicinal products (GTMPs)
- engineered tissue preparations tissue engineering products (TEPs)
- a combination products.

These ATMPs usually contain or consist of living cells or tissues and are therefore characterised by a high degree of complexity.

### What is an ATMP?



# PIC/S GMP Guideline - Revised Annex 2A for biological Substances and Products

- Revisions to the Pharmaceutical Inspection Co-operation Scheme (PIC/S) GMP Guide addressing the manufacturing of ATMPs as well as biological medicinal substances and products effective 1 May 2021.
- Annex 2A covers PIC/S GMP requirements for ATMPs, which cover cell and gene therapy products. The annex is divided into two parts:
  - Part A control over seed lots and cell banks through to finishing activities and testing

    Part B more specific guidance on selected product types, such as animal sourced products and gene therapy products.
- Annex 2A " ... is not a standalone document but it enables reasonable harmonization with the standalone ATMP guidelines published by the European Commission ..." according to a PIC/S statement.

#### PIC/S Annex 2A Revision

- The revision of the requirements for ATMPs remained an integral part to the existing GMP guidelines and is not a standalone code. The Annex 2A that is specific to ATMP aimed at maintaining as close harmonisation as possible, and used the language of the "Guidelines on Good Manufacturing Practice (GMP) specific to Advanced Therapy Medicinal Products (ATMP)" where possible (the standard).
- Efforts were made to accommodate language that address challenges such as "diffuse manufacturing".
- Efforts were made to accommodate language that permitted the standard to facilitate cross border movement of ATMP.
- The standard aimed to bridge across all the expectations for these products through all jurisdictions, even the countries that may not formally adopt it

### PIC/S Annex 2A (1)

Compliance with Annex 2A is expected, however, it is acknowledged that there may be alternative processes but documented sound scientific rationale is required using Quality Risk Management (QRM) principles

National laws may be applicable to starting materials for ATMPs for example:

- Tissues and cells used as starting materials of ATMPs may be subject to other national legislation that cover donation, procurement, testing, processing, preservation, storage and distribution (e.g., TGO 108 and TGO 109 in Australia)
- For blood or blood components used as starting materials for ATMPs, national legislation - technical requirements for the selection of donors and the collection and testing of blood and blood components (TGO 102)

## PIC/S Annex 2A (2)

Manufacture of ATMPs – product specific

- Different design approaches are possible
- Consider the manufacturing steps for the following:
  - Starting materials
  - ATMP active substance
  - Finished ATMP
- The manufacturing process between ATMP active substance and the final product can be continuous

### PIC/S Annex 2A (3)

#### Genetically modified:

- The manufacture and control of genetically modified organisms also needs to comply with other local, national or regional requirements
- Appropriate containment should be established and maintained in facilities where any genetically modified organism is handled
- Advice should be obtained according to national law in order to establish and maintain the appropriate Biological Safety Level (BSL)
- GMP should be adhered alongside these requirements

Australia – Office of the Gene Technology Regulator (OGTR) – TGA has not yet adopted a definition of gene therapy.

### PIC/S Annex 2A

Table 1. Illustrative guide to manufacturing activities within the scope of Annex 2A

Example Products	Application of this Annex (see note (1))			
Gene therapy: mRNA	Linear DNA template preparation	In vitro cell free transcription	mRNA purification	Formulation, filling
Gene therapy: in vivo viral vectors	Plasmid manufacturing	Establishment of MCB, WCB (2)	Vector manufacturing and purification	Formulation, filling
Gene therapy: in vivo non viral vectors (naked DNA, lipoplexes, polyplexes, etc.,)	Plasmid manufacturing	Establishment of bacterial bank (2)	Fermentation and purification	Formulation, filling
Gene Therapy: ex-vivo genetically modified cells	Donation, procurement and testing of starting tissue / cells	Plasmid manufacturing	Ex-vivo genetic modification of cells	Formulation, filling
		Vector manufacturing (3)		
Somatic cell therapy	Donation, procurement and testing of starting tissue / cells	Establishment of MCB, WCB or primary cell lot or cell pool (2)	Cell Isolation, culture purification, combination with non-cellular components	Formulation, combination filling
Tissue engineered products	Donation, procurement and testing of starting tissue / cells	Initial processing, isolation and purification, establish MCB, WCB, primary cell lot or cell pool (2)	Cell Isolation, culture purification, combination with non-cellular components	Formulation, combination filling

<sup>1.</sup> Application of this annex applies to manufacturing steps illustrated in dark grey. Application of this annex or principles of this annex apply to steps illustrated in light grey apply depending on the requirements of national legislation.

<sup>2.</sup> Refer to points 5.32 for establishment of cell banks and seed lots.

<sup>3.</sup> In the case of gene therapy ex-vivo genetically modified cells, this guide applies to vector manufacturing except where otherwise authorised by national law where principles of GMP should apply.

### PIC/S Annex 2A

Refer to Section 5.23

for additional

information in

appropriate

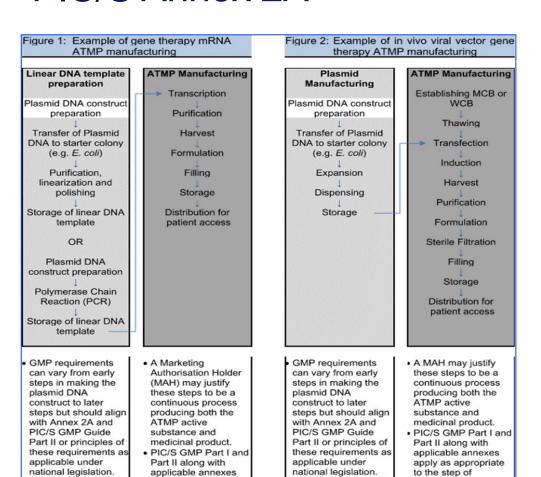
determining the

application of GMP.

apply as appropriate

to the step of

manufacture.



Refer to Section 5.23

for additional

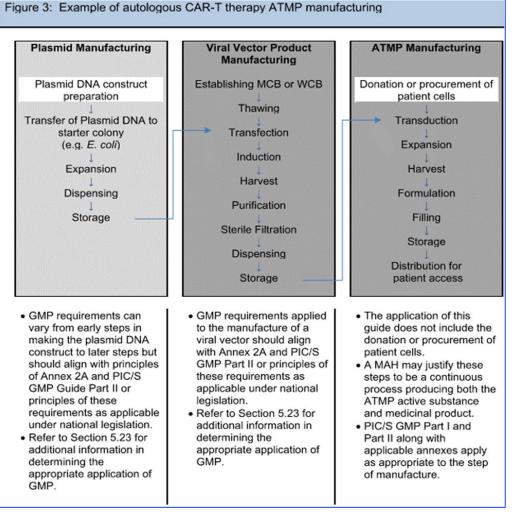
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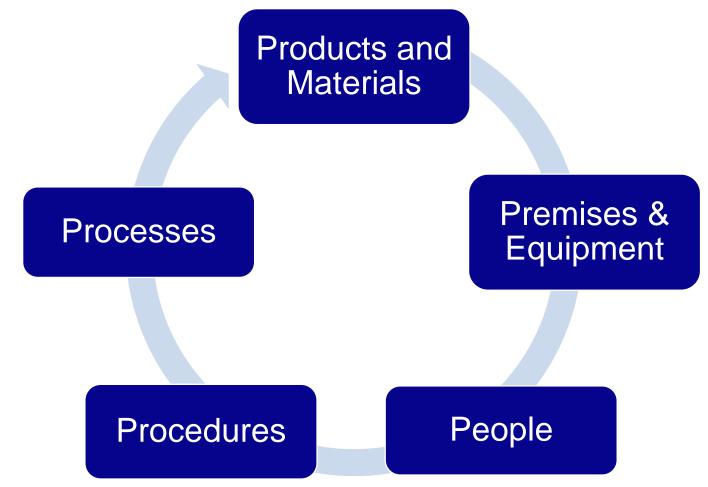
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Key elements of Contamination Control Strategy (CCS) Design consideration



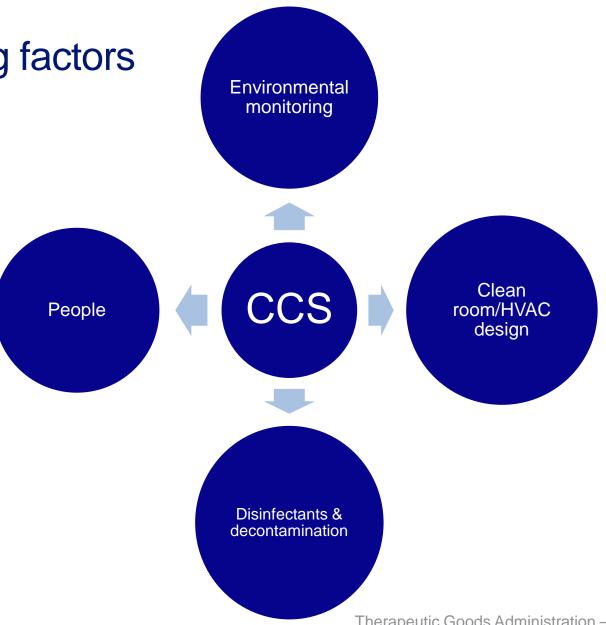
# Importance of holistic end to end contamination control strategy (CCS) design



- Gap analysis (GA)- review all potential sources of contamination
- Identify vulnerabilities
- Complete risk assessments (RA)
- Identify critical control points (CCP)
- Review GA, vulnerabilities and completed RA
- Implement risk reduction strategies & ensure visibility is maintained for all vulnerabilities
- Undertake validations
- Implement robust risk based CCS strategy monitoring program

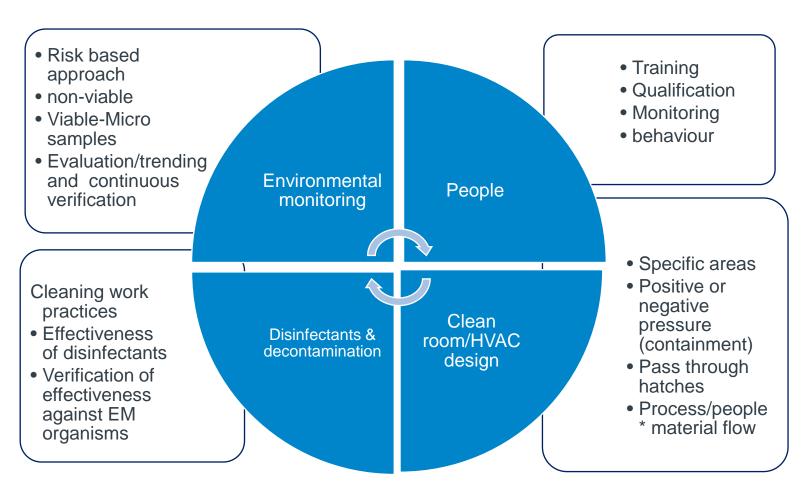
- Review data and implement continuous verification (OOT/OOE)
- Re-open RA when new input data available (i.e. deviations, OOS, CC)
- Maintain ongoing visibility on vulnerabilities

Vulnerabilities - Influencing factors on implementing CCS inspection reviews



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# Vulnerabilities-Influencing factors on implementing CCS inspection reviews



# Vulnerabilities - Influencing factors on implementing CCS inspection reviews: Inspection hot spots

#### **Environmental monitoring**

- Monitoring worst case- monitoring critical control points
- Monitoring periods cover manufacturing duration and activities
- Media qualified
- Incubation periods/temperatures qualified
- Organisms identified for significance and action taken
- Review of disinfectant effectiveness against isolates
- Appropriate OOS investigations undertaken

#### People

- Training both initial and on-going relevant and complete
- Monitoring of personnel results match training/qualification
- Differences in ENV results against peers (i.e. OOT/OOE)
- Personnel attire, gowning / degowning observed and consistent with procedures and GMP
- Personnel clean room behaviour consistent with procedures and GMP

# Vulnerabilities - Influencing factors on implementing CCS inspection reviews: Inspection hot spots

Disinfectants & decontamination

- Disinfectants within Expiry & clearly labelled
- Sterile disinfectants used or prepared in-house
- Validation of disinfectant efficacy worst case- includes at expiry disinfectants
- Sporicide used
- All materials entering clean room assessed as part of CCS
- Work practices and records match validation

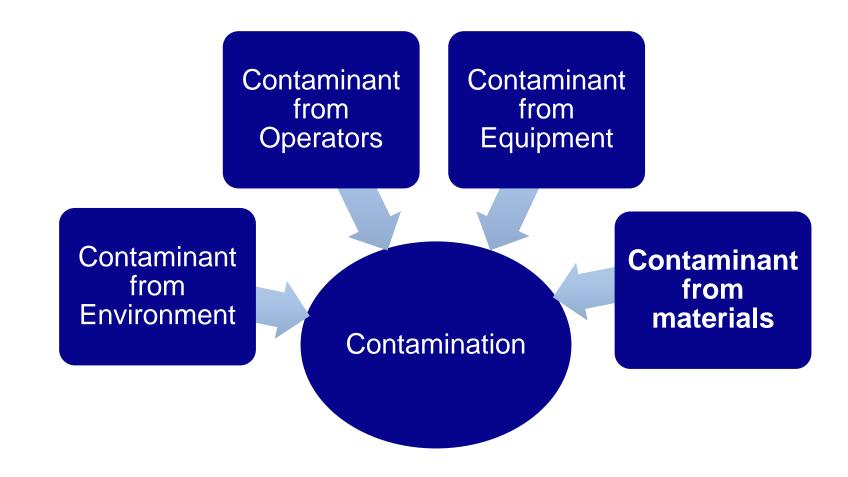
Clean room/HVAC design

- Adequate physical separation –airlocks
- Air pressures match design (negative or positive pressure) Pressure trend records match qualification-no missing data
- Maintenance records demonstrate suitability & recommendations actioned
- Transfer Hatches suitable and qualified.
- Material transfer through Pass Through hatches validated, routine records match

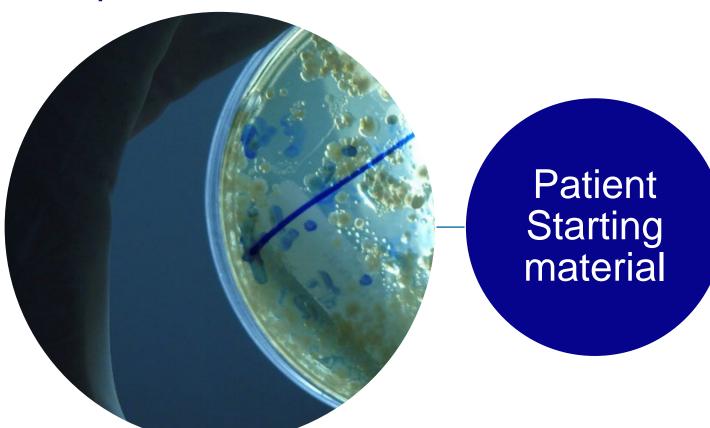
## Lifecycle approach to contamination control



### Lifecycle approach to contamination control



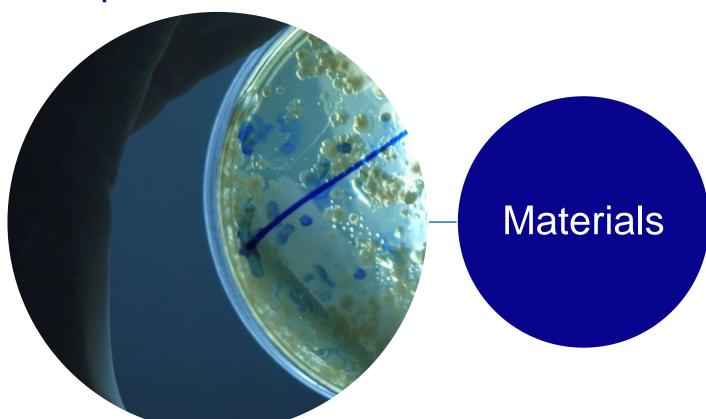
# Vulnerabilities-Influencing factors on implementing CCS inspection reviews: Materials and Products - one



- High contamination risk-Autologous (lower)/allogeneic (higher)
- Contamination Apheresis/leukapheresis collection-i.e.

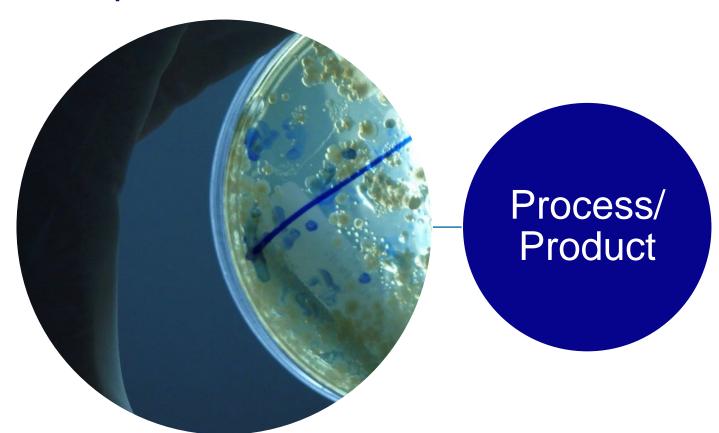
   skin disinfection/venepuncture)
- Staff collecting material
- Patient collected material-micro contamination
- Storage/transport
- Outsourced collection activities

# Vulnerabilities-Influencing factors on implementing CCS inspection reviews: Materials and Products - two



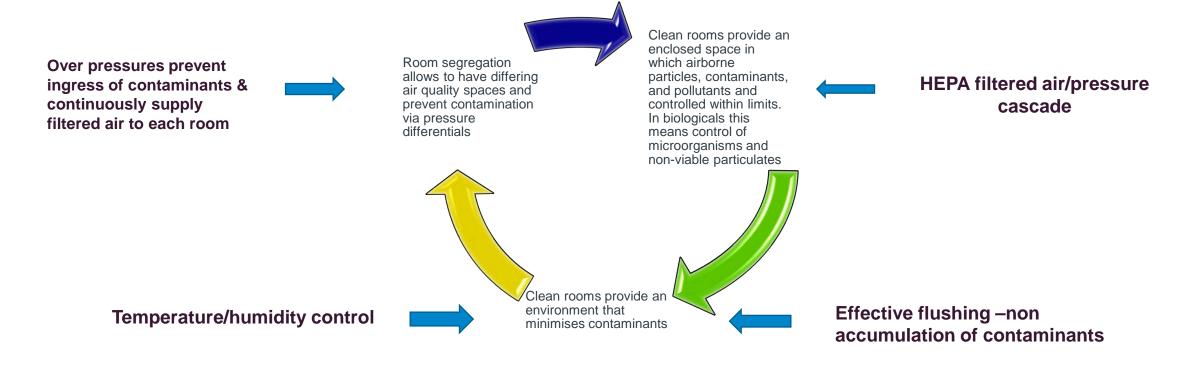
- Container closure integrity/sterility
- Media/buffer/process aid preparation
- Material specification
- Testing regimes-inhibition of microorganisms
- Stability
- Adequate records of receipt, quarantine, inspection, release, preparation, disposal, expiry
- Labels robust during storage-legibility

# Vulnerabilities-Influencing factors on implementing CCS inspection reviews: Materials and Products - three

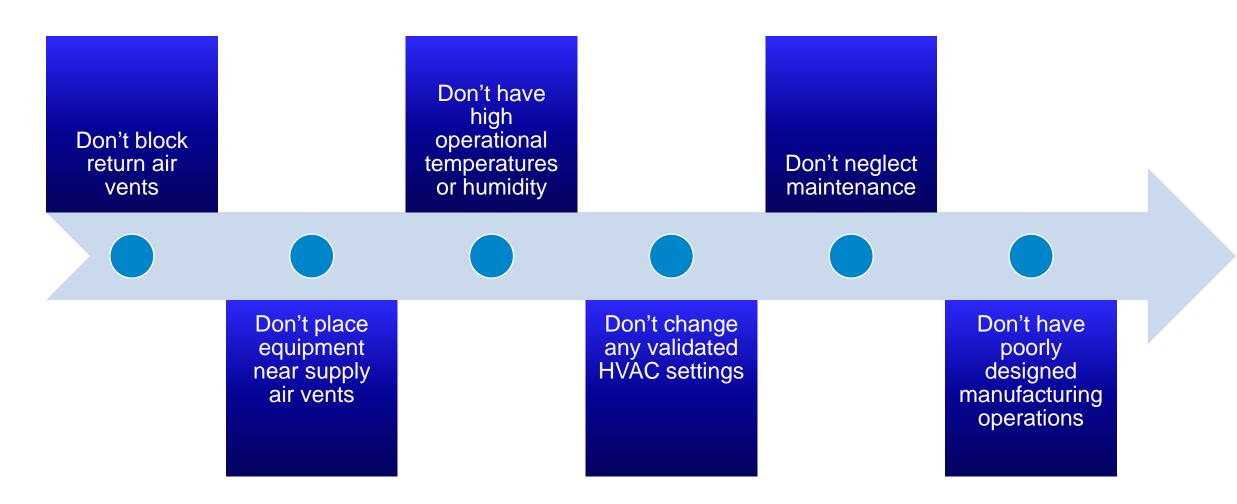


- Viral vector/plasmid- source, traceability, characterisation, qualification, storage, stability
- Manufacture of MCB/WCB
- Dedicated Facility for MCB/WCB/viral seed lots
- Testing, stability, storage, inventory, labels-legibility
- Back-up storage/Disaster recovery plan
- Impurities intrinsic/extrinsic

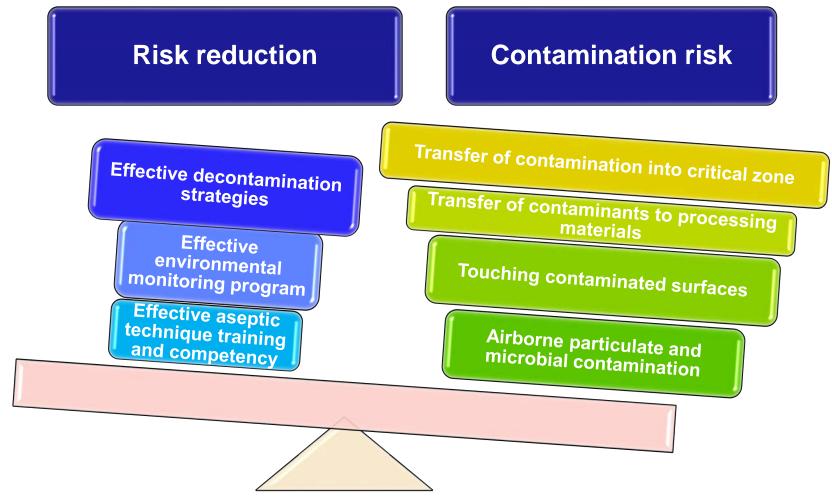
#### What clean rooms do



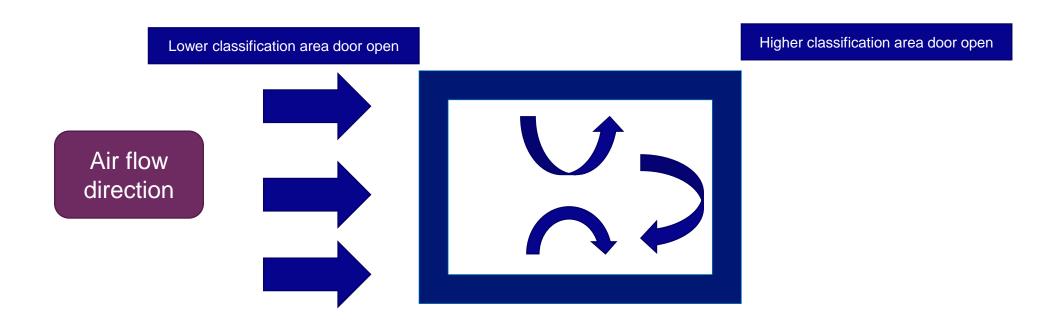
### The Don'ts of Clean rooms



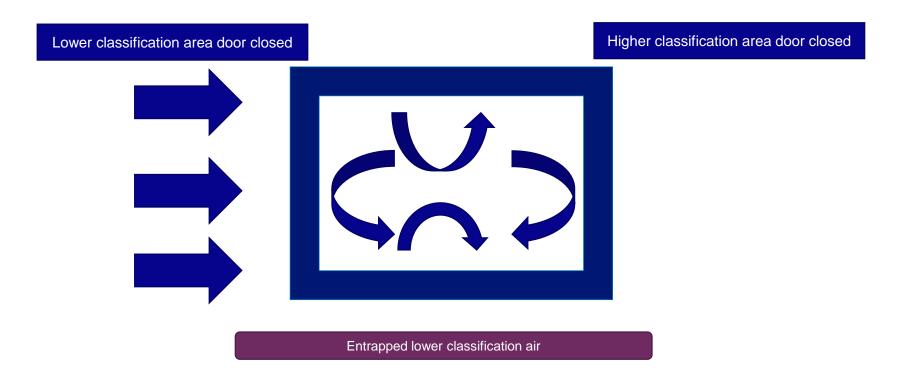
### Critical Role of Decontamination



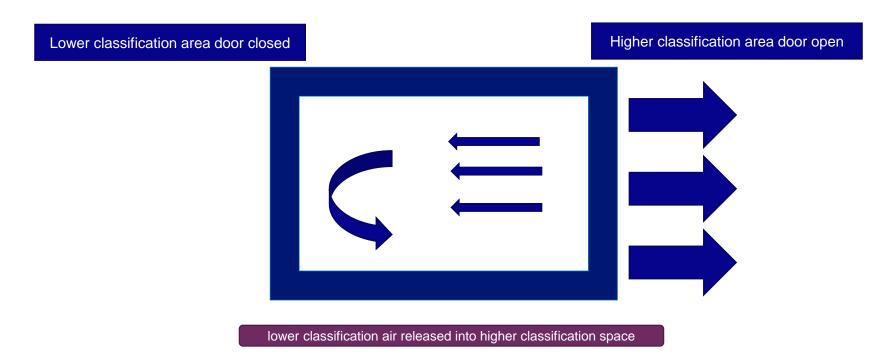
Pass Through (PT) design contamination risk – Passive PT



Pass Through (PT) design contamination risk – Passive PT

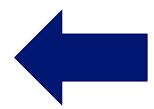


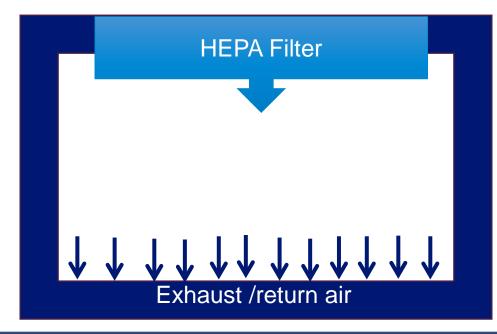
Pass Through (PT) design contamination risk – Passive PT



Pass Through (PT) design contamination control risk reduction

Lower classification area door open





Higher classification area door closed

Additional safe guards: interlocking doors on timer:- validated contact time

# Environmental Monitoring – verifies contamination control strategies remain effective – Monitoring Plan - one

# Monitoring locations

- Risk based approach
- Representative of working environment to which product exposed
- No adverse impact to product quality

# Monitoring methods

- Surfaces- contact plates/swabs
  - Airborne viable settle plates (passive), active air sampling
- Airborne non-viable- particle counts- real time results

# Environmental Monitoring – verifies contamination control strategies remain effective – Monitoring Plan - two

# Incubation conditions

- Validated method
- Recorded
- Temperatures verified within defined limits
- No risk to product quality (contaminated plates)

### Results

- Trends- adverse trends
- Indictors of operator performance against peers- i.e., high environmental results- settle plates, finger dabs etc.
- Poor decontamination control- materials not decontaminated effectively
- Verification of effectiveness or investigation and improvements

## Contamination Control – Inspection Focus (one)

Know your vulnerabilities (contamination risks)

- Have you identified all your vulnerabilities?
- How have you assessed these vulnerabilities?

Keep vulnerabilities visible

- Can you automatically detect their vulnerabilities?
- What systems do you use to be proactive?
- Do you have effective tools to assess vulnerabilities?
- Do you have sufficient resources to assess, implement, monitor and mitigate vulnerabilities?
- Does the monitoring tools enable proactive action to adverse trends?

### Contamination Control – Inspection Focus (two)

Continually monitor & assess risks

- Do you continually assess effectiveness of the control strategy monitoring systems?
- Do you reopen completed risk assessments when deviations & OOS recur?
- Do you take a proactive approach to outcomes of monitoring results?

Trend analysis

- What trend analysis tools do you use?
- Does you act when trends display an upward trend before limits are exceeded?
- Are you able to identify and trend key contamination sources?

### How to ask questions

#### 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