

Regulatory Aspects of Radiopharmacy Design

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Agenda / Scope

- Design and build aspects from the perspective of an EU medicines regulatory agency
- Design considerations relevant to the Healthcare setting
- Specifying the facility requirements
- Realising the design
 - Project management
 - Working with contractors
- Review of previous cases.



Radiopharmaceuticals manufactured in the Healthcare setting

- Mainly sterile dosage forms
- Imaging agents / Therapy doses
 - Varying half-life and activity
- Investigational Products
- PET agents
- (Blood labelling).





Regulatory considerations

- Licensing framework
- GMP requirements
 - Facilities and equipment
 - Contractor agreements
- Other regulatory requirements
 - HSE, Environment Agency, Counter Terrorism.





EU GMP & Radiopharmacy Design

- Chapter 3 (Premises & Equipment)
- Chapter 5 (Production)
- Annex 1 (Sterile Products)
- Annex 15 (Validation)

All in the process of revision!.





‘Challenges’ of sterile radiopharmaceuticals

- Short expiry
- Prospective release
- Radiation protection measures
 - Additional equipment
 - Challenges to Grade A environment
 - Containment / cleaning of spills
- Designing facilities and systems to support a robust sterility assurance programme is important.





Specifying facility requirements

- Essential to ensure facility and equipment will be fit for intended purpose
 - User Requirement Specification*
 - Functional Design Specification
 - Design Qualification*
- Enables traceable qualification in later phases

* User's responsibility.





Facility design considerations

- Primary regulatory focus – product & patient protection
 - Zonal environmental protection (HVAC, ΔP , interlocks)
 - Containment measures (ΔP , isolators, rooms, airflow patterns)
- Area visibility – vision panels etc
- Process flow
 - Prevention of mix-up
- Co-located preparation risks
 - Other products: blood labelling, therapy doses
 - Safety / environmental considerations (e.g. sinks, emergency showers).



Equipment selection – impact on facility design

- Clean air device selection should be considered early in the facility URS and FDS phases
- Laminar Flow Cabinet vs. Isolator differ in facility requirements
 - Classification of background environment
 - Impact on HVAC design specification (air extraction rates).



‘Future proofing’

- Crystal Ball?
- Successful strategies often focus on flexibility
- Planning to accommodate future changes, e.g.
 - Room grades capable of exceeding current requirements
 - Gassing isolators / RTP technology
 - Robotics, CCTV
 - Continuous Particle Monitoring
- Utilities planning to support these changes.





Realising the design

- Complex work, balancing different priorities
 - Radiopharmacy may be part of a bigger project
- Often working within constraints
 - Footprint size / layout
 - Immovable obstacles
- GMP-focussed project management is key from the outset
 - ‘Do it once, and do it right’.





Realising the design

- Failure to build in GMP requirements from the outset can result in:
 - Retrospective ‘fixes’
 - Sub-optimal solutions
 - Delays in project completion
 - Delays in regulatory approval
 - Increased costs.





Project management - challenges

- Few Pharma / Healthcare organisations have in-house expertise to manage a new GMP facility build from concept to implementation
- Most organisations contract-out some / all work
 - GMP / Regulatory specialist services
 - Documentation
 - Specialist work (e.g. construction / engineering / testing).





Contractor selection and collaboration

- Contractor selection and collaboration is critical to success
 - Contractor's GMP expertise
 - Contractor willing to involve the client throughout
- There **MUST** be a GMP-focused contract
 - Define responsibilities
- **Delegation of activity, not responsibility.**





Contract considerations

- Not just a commercial document!
- Approved by all relevant parties and version controlled
- Clearly defined GMP responsibilities
 - Reference to current GMP requirements
- Reference to key documents, e.g. Functional Design Specification.
- Change control arrangements
- Permissible sub-contracting
- Auditing and oversight provisions by contract giver.



PREVIOUS CASES





Previous successful case:

- Planned refurbishment of UK facility
- Radiopharmacy staff involved throughout
 - Design and planning
 - Maintained close collaboration with their contractor throughout
- MHRA Inspectorate informed at early stage
 - Considered planning and regulatory approval of alternative facility
 - Review of 1:50 plans and project validation master plan.





Previous cases: examples of problems identified too late

- GMP focus not applied until too late in the process (e.g. hand-over from contractor)
- Underestimation of time and money costs for build management and qualification
- Qualification not documented and not sequenced in compliance with GMP
- Inappropriate room finishes (driven by cost).



Previous cases: problems identified too late

- HVAC running on the edge of failure
- Proposal to turn the HVAC off at night
- Aseptic changing room with a pillar not on the plan
- Litigation between contractor and contract giver, due to hand-over of a facility unfit for purpose
 - Mainly due to lack of detail in specification.



How can this be avoided?

- Clearly defined contracts and specifications
- GMP focus and time resources assigned from the outset.





Help the Regulator Help You!

- Early and continued communication with the Regulator is essential
 - Review of proposals
 - New facility design / interim measures
 - No ‘pre-approval’, but helps identify problems at an early stage
 - Facilitate timely assessment at key milestones in the project
 - Assist in clarifying regulatory requirements.



Thank you for listening

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