

# Validation deaths across america. it was as a

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Validation in the Pharmaceutical Industry Introduction The Manufacture of pharmaceutical products is a highly complex procedure and is one of the most regulated sectors of any manufacturing industry. The original method of pestle and mortar of the past has given way to highly advanced and complex manufacturing procedures of pharmaceutical products. What was once the domain of chemist or pharmacist are now controlled by computerised systems.

Due to the growth of the pharmaceutical sector, fuelled by the demand for existing and new products, the methods of ensuring that all products that are released to the markets are safe, pure and effective for use by the general public have also developed. The regulatory requirements of the sector by such agencies as the FDA (USA), EMA (EU), MHRA (UK) and the HPRA (Ireland) have helped to ensure the high standards of quality and so preventing the mistakes of the past. Background The history of Regulatory Requirement in the Pharmaceutical Industry is a history of tragedy.

At the beginning of the nineteenth century there was very little if any Regulatory requirement for the manufacture of medical products. Companies would advertise their latest products some of which would contain many dangerous substances. These products were sold as a cure-all's for many different diseases and illnesses, and some were regularly given to children as in the case of opium based products to help with teething. As a result of the tragedies it became clear that a path forward required to control the manufacture of Pharmaceutical products through GMP using strong regulations and procedures. After each tragedy stronger regulation was introduced to ensure such mistakes may not re-occur again. The <https://assignbuster.com/validation-deaths-across-america-it-was-as-a/>

The pure Food and Drug Act and the Meat Inspection Act which were both signed into law on June 30th 1906. This is widely accepted as the founding date of what is now the FDA. The Elixir Sulfanilamide Disaster in the USA in 1937.

Between the months of September and October 1937 Elixir Sulfanilamide was responsible for more than 75 deaths across America. It was as a result of poor understanding of the chemicals used, and poor regulatory requirements for the testing of products before being released on to the market. The company Massengill and Co discovered a method to dissolve Elixir Sulfanilamide using a formula containing diethylene glycol (antifreeze) and raspberry flavoured water, this gave it a nice appearance and a sweet taste which would make it appealing to children. The new formula was sent to production and a week later released on to the market. Within a week there were reported cases of deaths due to the product. As a consequence of the Sulfanilamide Disaster the federal government realised that greater regulations were required, this led to the Food, Drug and Cosmetic Act of 1938. Up to this point a company could not be prosecuted as was the case of Massengill and Co who were only charged with mislabelling of the product.

With the introduction of the Food, Drug and Cosmetic Act (FDCA) companies were required to carry out safety testing on their products and would be held accountable for deaths or injury caused by their products. The goal of the Food, Drug and Cosmetic Act was to verify that the food, drugs and cosmetics were pure, safe and effective before being released for sale. The FDCA also

ensure that the correct labelling and packaging was used. The Sulfathiazole tragedy occurred as a result of the Winthrop Chemical Company of New York released sulfathiazole tablets which were contaminated with phenobarbital to the market. The result was hundreds of deaths and injuries. The FDA's investigation revealed serious plant control deficiencies and irregularities in the firm's product recall processes. As a result of the Sulfathiazole tragedy the FDA revise their current rules on manufacturing and quality controls.

The 1941 sulfathiazole disaster was hailed as the birth of good manufacturing practices (GMP). Future amendments to the FDC 1938 act were due to the Thalidomide Tragedy between 1953-1962. Thalidomide was developed as a sleeping aid and given to workers by Chemie Grunenthal, one worker gave it to his pregnant wife resulting in their child being born without ears. The drug was sold in over 40 different countries. In the USA FDA officer Frances Kelsey prevented the drug from being approved and resulted in preventing the same tragedy happening in the USA. She was awarded President's Award for Distinguished Federal Civilian Service from President John F. Kennedy.

Good Manufacturing Practices Prior to 1970 the quality and sterility of products was only complete at final product testing. The Septicaemia outbreak of the early 1970's in hospitals which was caused by *Enterobacter cloacae* of *E. agglomerans* due to improper sterilising of large volume parenterals resulting in 54 deaths. As a result of the FDA investigation which resulted in total product recall and closure of the plant. The FDA proposed changes to the GMP's which resulted in the introduction of GMP's procedures

In 1976 the Medical Device Amendments was signed into law. This gave the FDA greater power over the manufacture of medical products.

The FDA also proposed changes to the GMP's with a strong emphasis on the sterilisation procedures used to sterilize manufactured products. It was at this time that terms validation and Qualification began to be used within the pharmaceutical sector. In 1978 the cGMP's rules finally established the minimum current good manufacturing practices for the manufacturing process, packing, storage and transportation of medical products and devices.

In 1979 Good Laboratory Practices (GLPs) was established. In 1980 the Infant formula Act was passed into law due to the serious illness of dozens of children due to the lack of chloride in soy based formula. The Act gave greater power to the FDA to enforce a minimum nutritional quality standard. In 1983 the Anti-Tampering Act was introduced making it a crime to tamper with medical packaging, this was a result of tampering and lacing with cyanide of Acetaminophen capsules containers. Also in 1983 better documentation was published to inspect computerised systems in drug manufacturing which was the beginning in computer validation.

The Therac Tragedy was another step along the road of GMP which was a result of software errors. Many valuable lessons were learned and better quality practices were implemented to improve the quality and testing of the software used in medical devices. In 2001 the European Union (EU) published a set of regulations called EudraLex.

Eudralex are a set of regulations that govern the manufacture of medical products for both human and veterinary use. Eudralex consist of 10 volumes, volume 4 deals with GMP's has 19 Annex. Annex 15 deals with Qualification and Validation. Annex described the method of qualification and validation of the facilities, utilities, equipment (FUE) and the process used to manufacture the medical product. It is now the responsibility of the manufacture to control the critical aspects of the produce life cycle. Any changes in the product, process or FUE should be documented and assessed for its impact on the processes.

In 2015 an updated revision of Annex was published to take into account the changes in other sectors of the EUDRALEX. Along the long and tragic road that has led to the current point where the Pharmaceutical Industry is now one of the most regulated industries where GMP is something that is built into every stage of the planning and manufacturing and where qualification and validation are a critical part of every stage of the full life cycle of every product. GMP regulatory is now a legal requirement for every company wishing to manufacture medical products. Validation Quality is very important in the manufacture of any produce sold today. But when that product is a lifesaving products like Pharmaceutical products, quality becomes even more important. Quality is now a mandatory requirement by both Governments and Regulatory bodies.

CGMP requires that quality be built in to the product at every stage of its life-cycle. Validation is a documented procedure to provide assurance that a process reaches a specified level of quality attributes consistently and be

able to reproduce that consistently during all the different stages of the life of the product. Process Validation is a process to collect data throughout the life-cycle of a product which provides scientific evidence that the process is capable of producing consistent high quality product to ensure that it meets the regulation guideline requirements of such regulatory agencies like the FDA and EMA. In the case of equipment validation it is referred to a Qualification. In short you validate a process but you qualify equipment. There are 4 different types of validation.

**Prospective Validation** Prospective Validation is validation done before distribution of a new process or an existing process that may have had some changes made to it. The requirements for Prospective Validation is to provide documentary evidence that the process works in accordance with the pre-prepared protocol and is normally completed before the product is released for sale and all the validation protocols are executed before the process is ready for commercial use. At the product development stage the process is broken down into its own individual steps and each step is checked for its criticality to the quality of the product. All the facilities, utilities, equipment (FUE) as well as the test methods must be fully validated. The Master batch documents can only be prepared after all of the critical parts of the process have been determined. This method of validation is the preferred approach and is the most widely used method of

**validation** Concurrent Validation Concurrent validation is validation that used documentary evidence to show that a process or FUE performed the way it is expected to, based on information gathered during the actual production process. This method measured all the critical steps within the

process and endtesting and compared them to existing data to ensure the process is performing as expected within the existing control parameters.

An example of where Concurrent Validation was used is during the Ebola disease outbreak where validation is being done while the product is being manufactured. It is not usually allowed except in one off cases or as in the Ebola example where it is urgently required. Retrospective

Validation Retrospective Validation is a validation carried out on a well-established process using historical documentary evidence to show that the process does what it is meant to do and to the level expected of it.

Retrospective Validation is only used on well-established process where there has been no change to the raw material, FUE or the production process which are critical to the quality of the product. Retrospective Validation should only be used where there is enough historical data to show that the process has been consistently producing produce that meet pre-established quality parameters. During the retrospective validation samples, should be taken from all batches made during the validation period including batches FJ13 that have failed, the number of batches should be a large enough to show consistency of the process. Revalidation Revalidation is used when there has been a change to any part of the process and FUE, it is used to determine the effect of the change on the process and FUE and decide if revalidation is required. An example of revalidation is if a piece of equipment moving FJ14 for one location to another, revalidation would be carried out to ensure that the equipment's acceptance criteria is met.



Another example would be where maintenance work carried out and key components were changed, Revalidation would be required before the equipment is returned to production. Different stages of Validation User requirement specification (URS) The URS is a document that describes the requirements specification of a new process as required by the owner or end user. User Requirements Specifications are written by the system owner or end user typically before the validation process starts. The User Requirements Specifications document is not intended to be a technical document but more a general description of the requirements of the intended process and should be used as a reference throughout the validation life cycle. Validation can be broken down to several different stages which are called Qualification stages.

Design Qualification (DQ) Installation Qualification (IQ) Operational Qualification (OQ) Performance Qualification (PQ) Design Qualification (DQ) It provides evidence that the URS requirements have been met through FS/DS and any risks have been mitigated through FMEA. DQ is the design of the instrument it is not evidence of the URS being met, it is used to state the URS and the FS/DS and will show how the user requirements will be tested. Inclusion in the DQ also ensures that any failure modes are identified and will also be controlled in either the IQ/OQ or in an OP/procedure. Installation Qualification (IQ) Installation Qualification (IQ) provides documentary proof that the equipment or system has been delivered and installed in accordance with the installation specification and that the respective DS has been tested to ensure URS are met. The utilities such as water, air and electric would be verified at this

stage. Operational Qualification (OQ) Operational Qualification provides documentary evidence that the Facilities Utilities, Equipment (FUE) and processed can consistency perform to the standard stated in the operational specifications. Test that may be completed at this stage include and functional testing of the equipment Performance Qualification (PQ) F15 Performance Qualification provides verification that the process can constantly produce a quality product over a certain period.

PQ is performed when there are no down-stream checks. Benefits of Validation In the previous section, we have looked at the evolution of regulatory requirements leading to GMP for the production of medical products and how validation became a very important tool in this process. We have also looked at the different types of validation and the different qualification stages within validation Validation is a regulatory requirement but that is not the only reason that company perform validation.

There are a lot of benefits of validation some of them are listed below.

leading to lower rejection Reduction in production and quality cost.

Increased quality. Reduction in lost time. Reduction in the failure

rate.

Increased the

manufacturing capability by reducing failures and rework.

Required less in-process and end-of-line testing. Can be used to investigate

invalids or deviation during production. Variation from batch to batch is

minimized. Better compliance with all regulatory agencies Getting the most

from the process and equipment. Better scheduling of equipment

maintenance. Improve the training of production staff which gives them a

better understanding of the production processes. Conclusion The Pharmaceutical sector is now one of the most regulated industries and safest. People have confidence that product`s or device are safe to use and will not have any major side effects.

Regulatory guidelines provides a clear pathway for the manufacture of medical products. Validation is a key tool in providing the quality assurance that is required to manufacture medical products.