

# 2024 Ohio Event – Essentials of Contamination Control Strategies





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September  
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# Essentials of Contamination Control Strategies in ATMPs

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# Agenda

PDA Technical Report No. 90

Build It

Foundation

Contamination Controls

Validation Controls

Monitoring Controls

Governance

Feedback Loops

ATMP Specifics



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# Contamination Control Strategy – PDA Technical Report No. 90




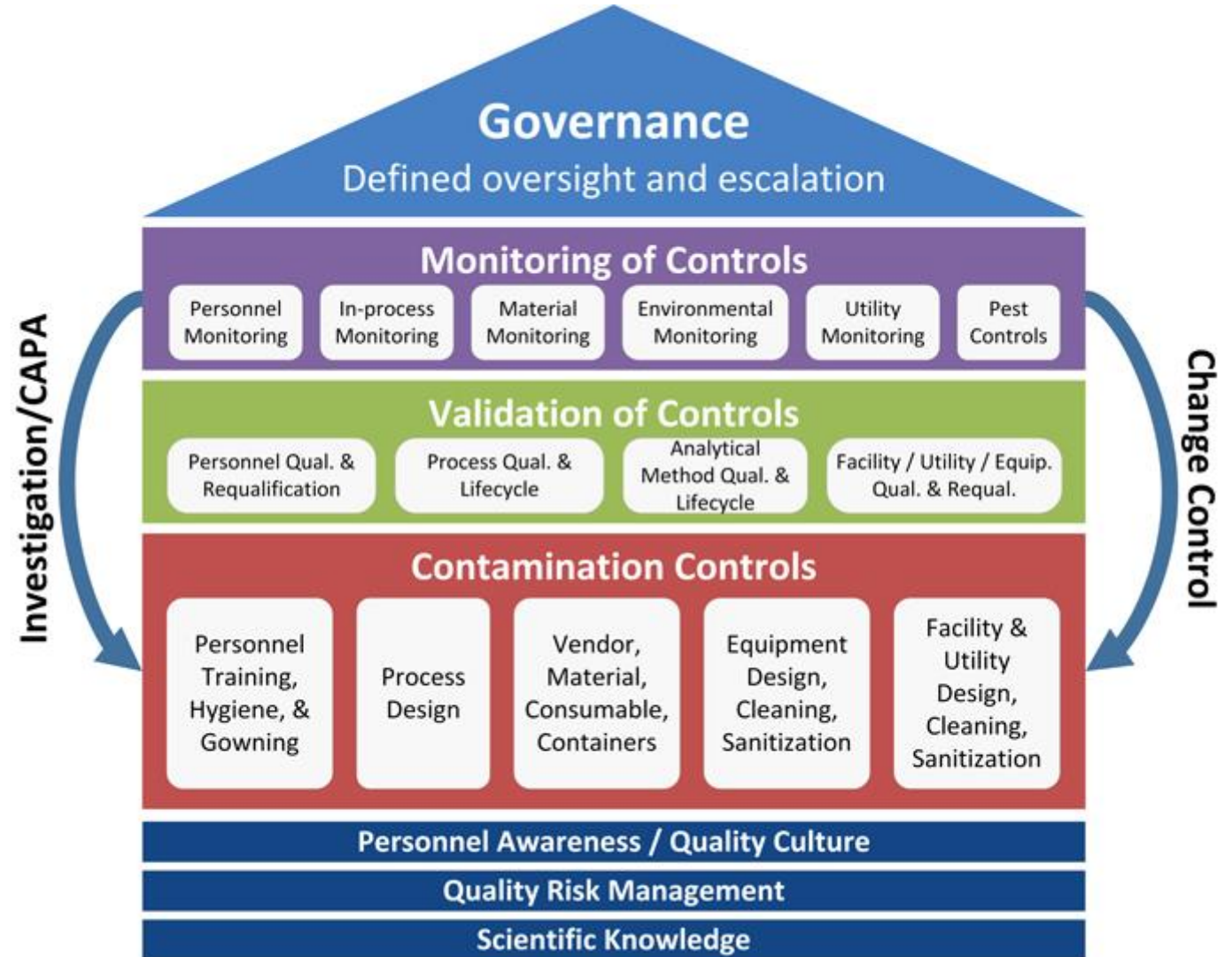
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**Technical Report No. 90**  
Contamination Control Strategy Development in Pharmaceutical Manufacturing



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- Holistic vs. Non-holistic examples (throughout)
- List of process & technical information needed to inform CCS (section 3.0)
- Current expectations for in-process monitoring limits of biologics (section 4.0)
- Table of Container Closure Integrity considerations (section 10.0)
- Roadmap to relevant Industry Guidance Docs (section 14.0)



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# Contamination Control Strategy – Build It

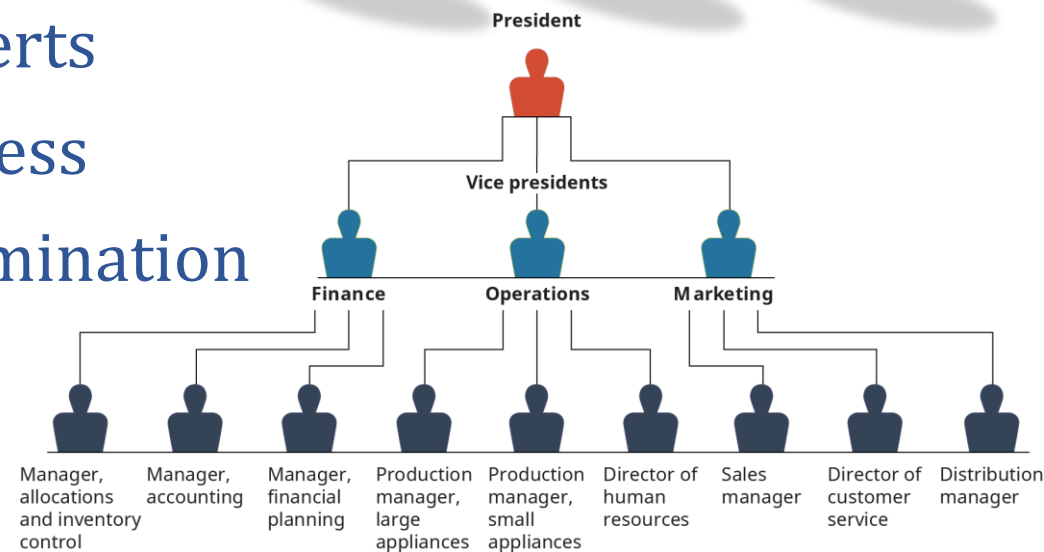
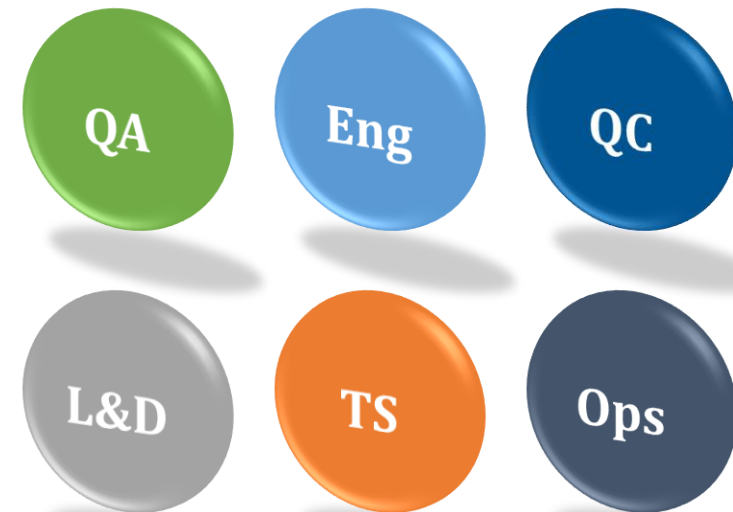


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- Build an interdisciplinary Team
- Identify a CCS Lead
- Must be truly cross-functional
- Multiple levels of the organization
- CCS Lead coordinates efforts
- CCS Lead ensures input from functional area experts
- Create Knowledge Management around CCS Process
- Culture Change that focuses on preventing contamination







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- Execute a gap assessment to regulatory requirements
- Create a formal CAPA plan to mitigate documented gaps
- Ensure the *BLINDERS* are off
- Identify current assessments
- Identify needed assessments and fill the QRM gaps
- Write CCS doc(s)...
- More gaps may be identified (additional CAPA to close)
- Establish periodic review of CCS
- Require CCS impact assessment as part of QMS



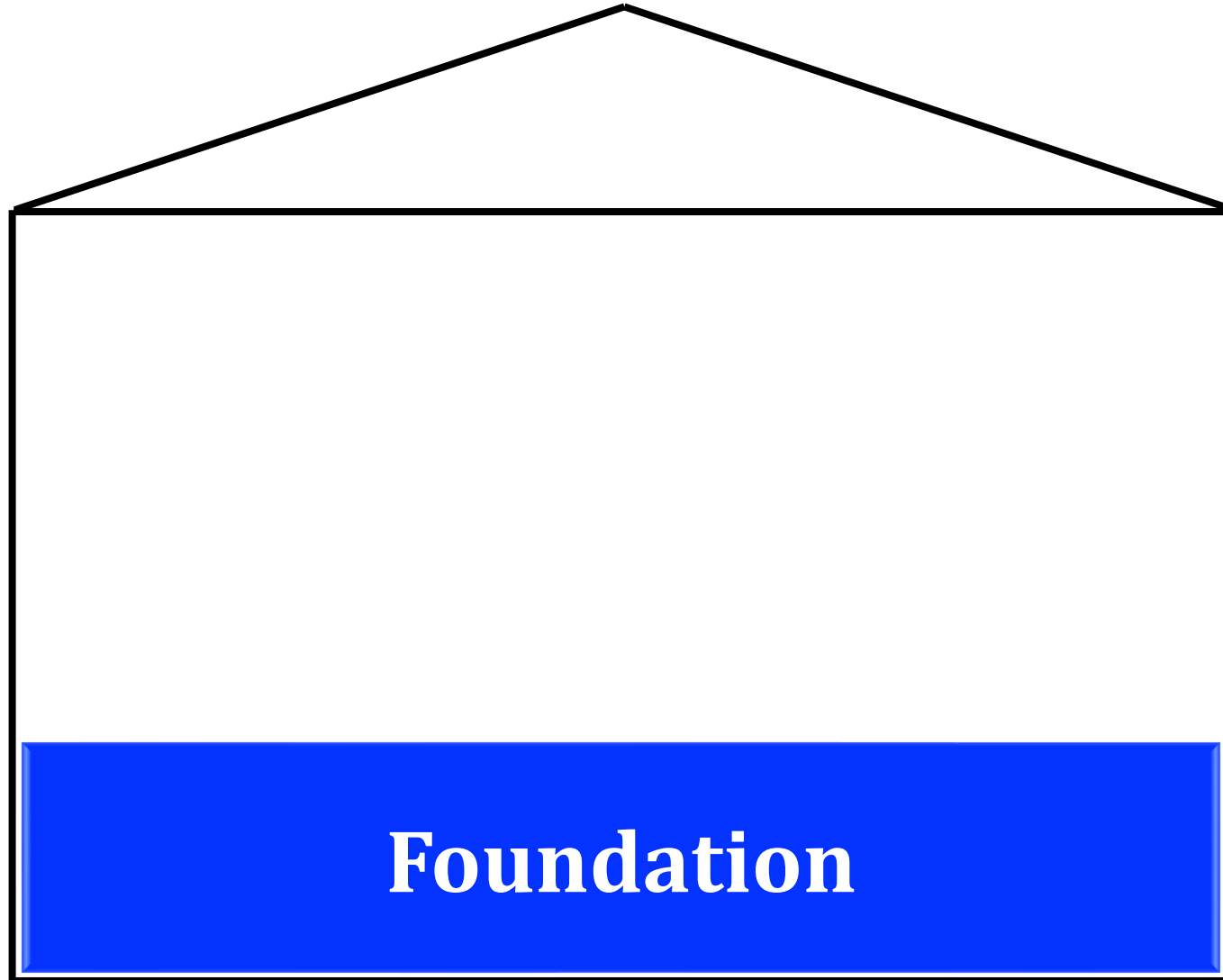


# Contamination Control Strategy – Foundation



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**Foundation**



**Scientific Knowledge**

**Process / Technical Knowledge**

**Quality Risk Management**

**Personal Awareness & Quality Culture**

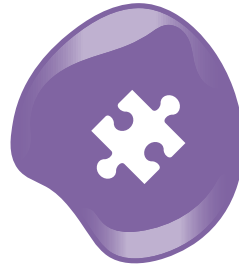


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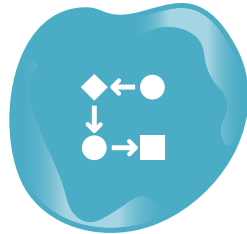
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**Science and Evidence based risk assessments**



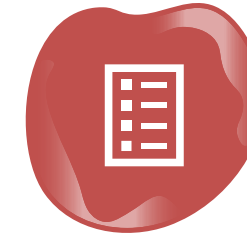
**Multi-dimensional approach to decision making**



**Risk-based decision making (RBDM)**



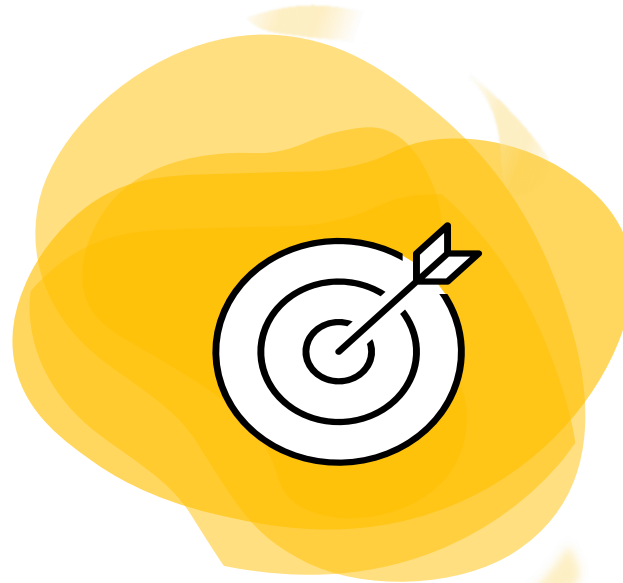
**Recognizing uncertainty**



**Well-defined scope/objective and risk question**



**Selecting the correct tool for the job**





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The control strategy is the protective layer your organization builds to protect product quality and a patient safety.

Risk Assessment and Scientific Rationale are the foundation of your control strategy .

The foundation of your strategy needs continuous care to ensure relevance.



## The House of CCS



the **Foundations**



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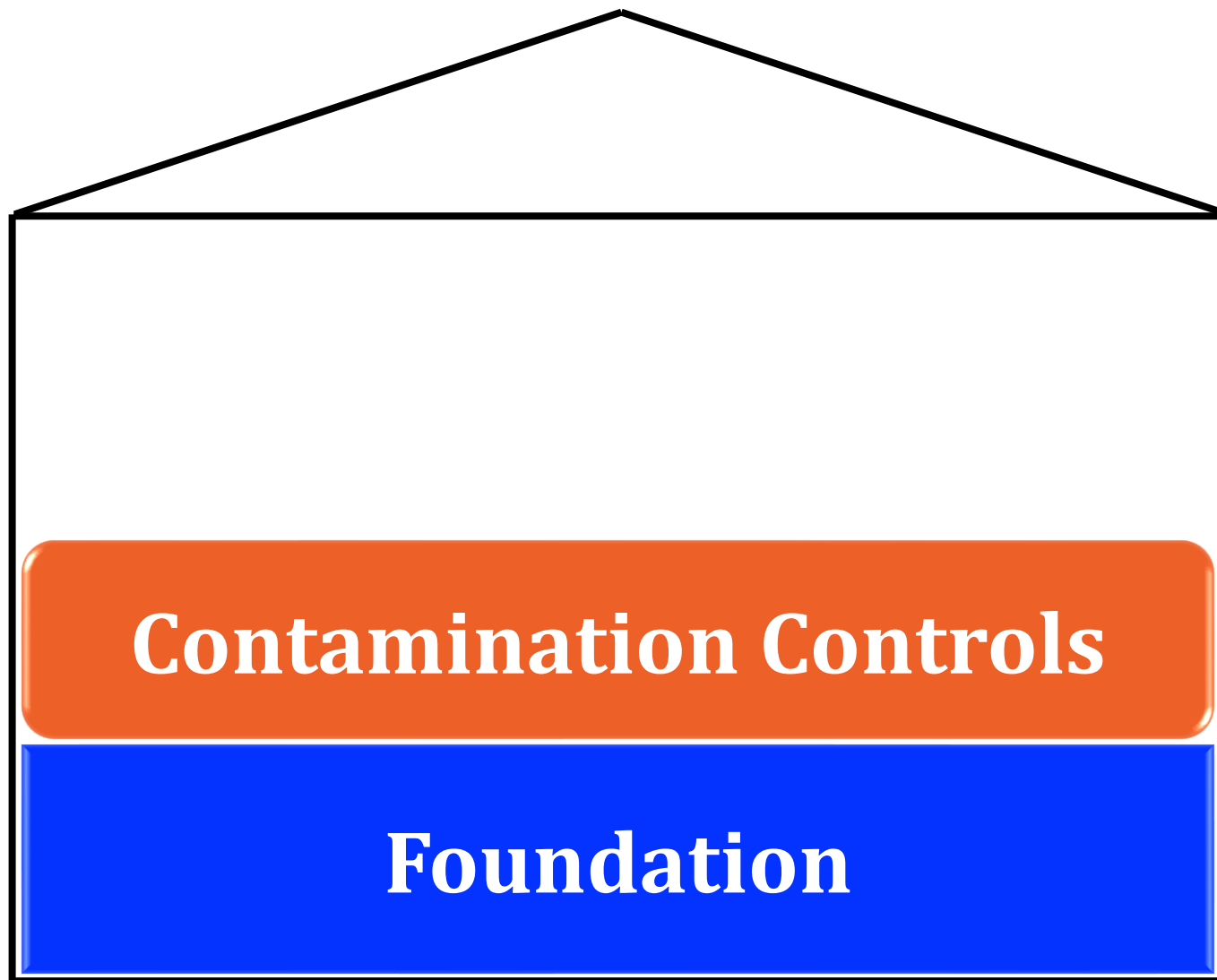
# Contamination Control Strategy – Contamination Controls





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**Contamination Controls**

**Foundation**



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Eliminate

Prevent

Reduce

Detect



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**Facility &  
Utilities**

**Material &  
Waste**

**Personnel  
Flow**

**Personnel  
Hygiene &  
Gowning**

**Raw  
Materials**



# The House of CCS



the **Pillars** of Control

the **Foundations**



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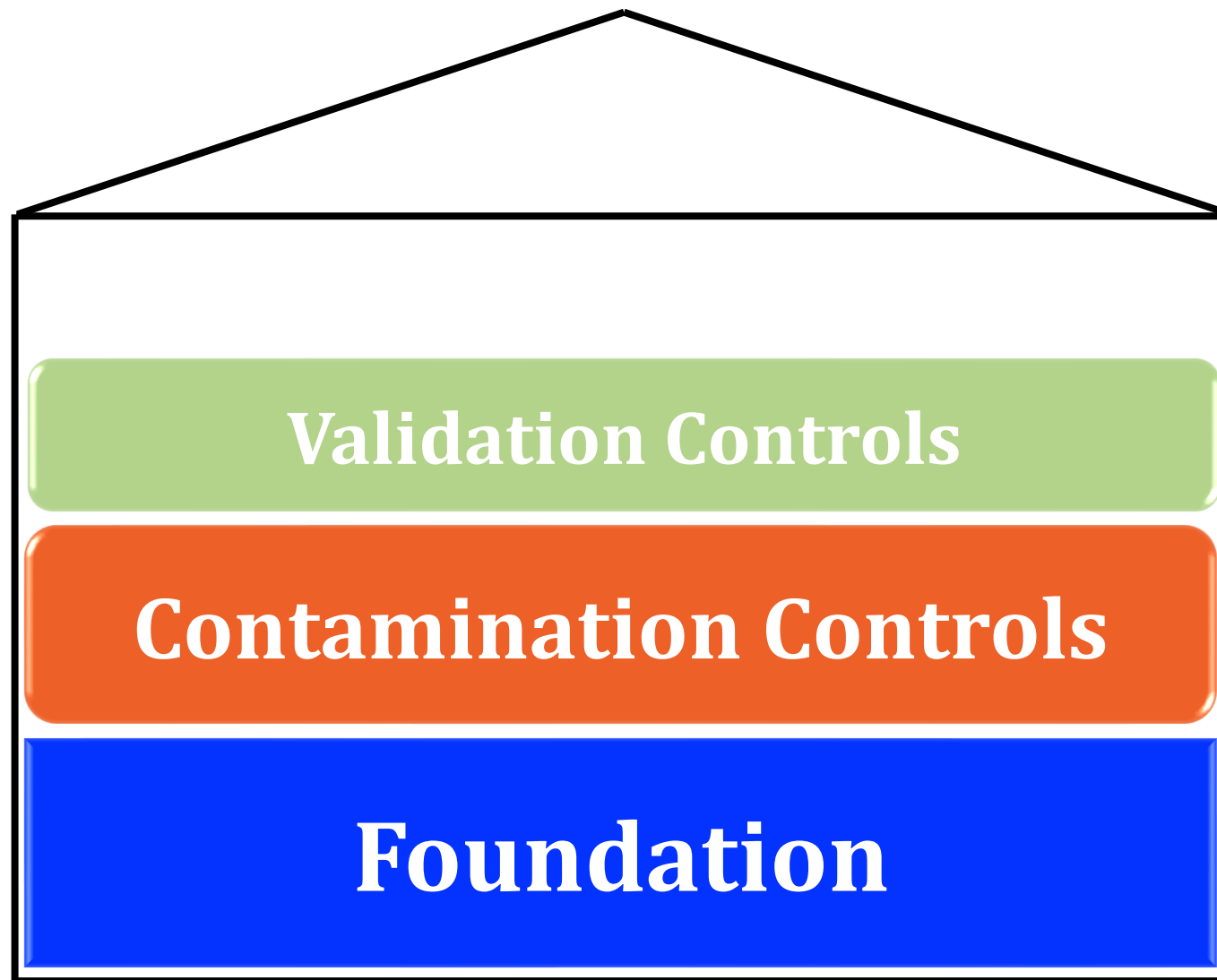


# Contamination Control Strategy – Validation Controls



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Analytical  
Method

Equipment

Facility

Personnel

Process

Utilities



- Not simply reading – training implies that there has been a transfer of knowledge
- Several training modalities:
  - Reading
  - Computer Based
  - Instructor led
  - On the job







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How?

When?

Redo?



# The House of CCS

the **Confidence** in Controls

the **Pillars** of Control

the **Foundations**





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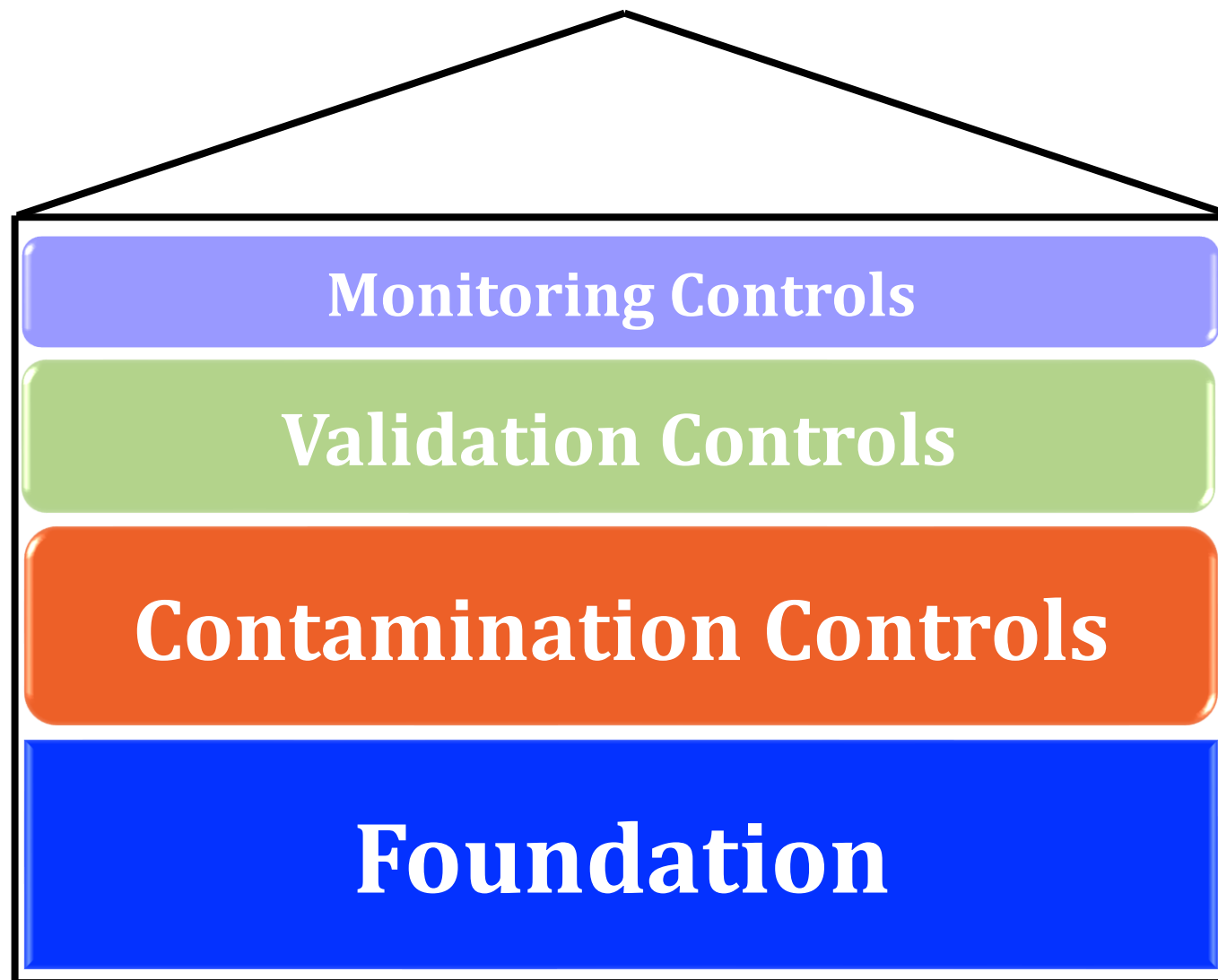


# Contamination Control Strategy – Monitoring Controls



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**4.1** The manufacture of sterile products should be carried out in appropriate cleanrooms, entry to which should be through change rooms that act as airlocks for personnel and airlocks for equipment and materials. Cleanrooms and change rooms should be maintained to an appropriate cleanliness standard and supplied with air that has passed through filters of an appropriate efficiency. Controls and monitoring should be scientifically justified and should effectively evaluate the state of environmental conditions of cleanrooms, airlocks and pass-through hatches.

**5.2** Equipment monitoring requirements should be defined in “user requirements specifications” during early stages of development, and confirmed during qualification. Process and equipment alarm events should be acknowledged and evaluated for trends. The frequency at which alarms are assessed should be based on their criticality (with critical alarms reviewed immediately).

**5.6** All equipment such as sterilisers, air handling systems (including air filtration) and water systems should be subject to qualification, monitoring and planned maintenance. Upon completion of maintenance, their return to use should be approved.



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Environmental

In-Process

Material

Personnel

Pest

Utility



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What?

Meaning?

React?



## The House of CCS

the **On-going Monitoring** of Control

the **Confidence** in Controls

the **Pillars** of Control

the **Foundations**





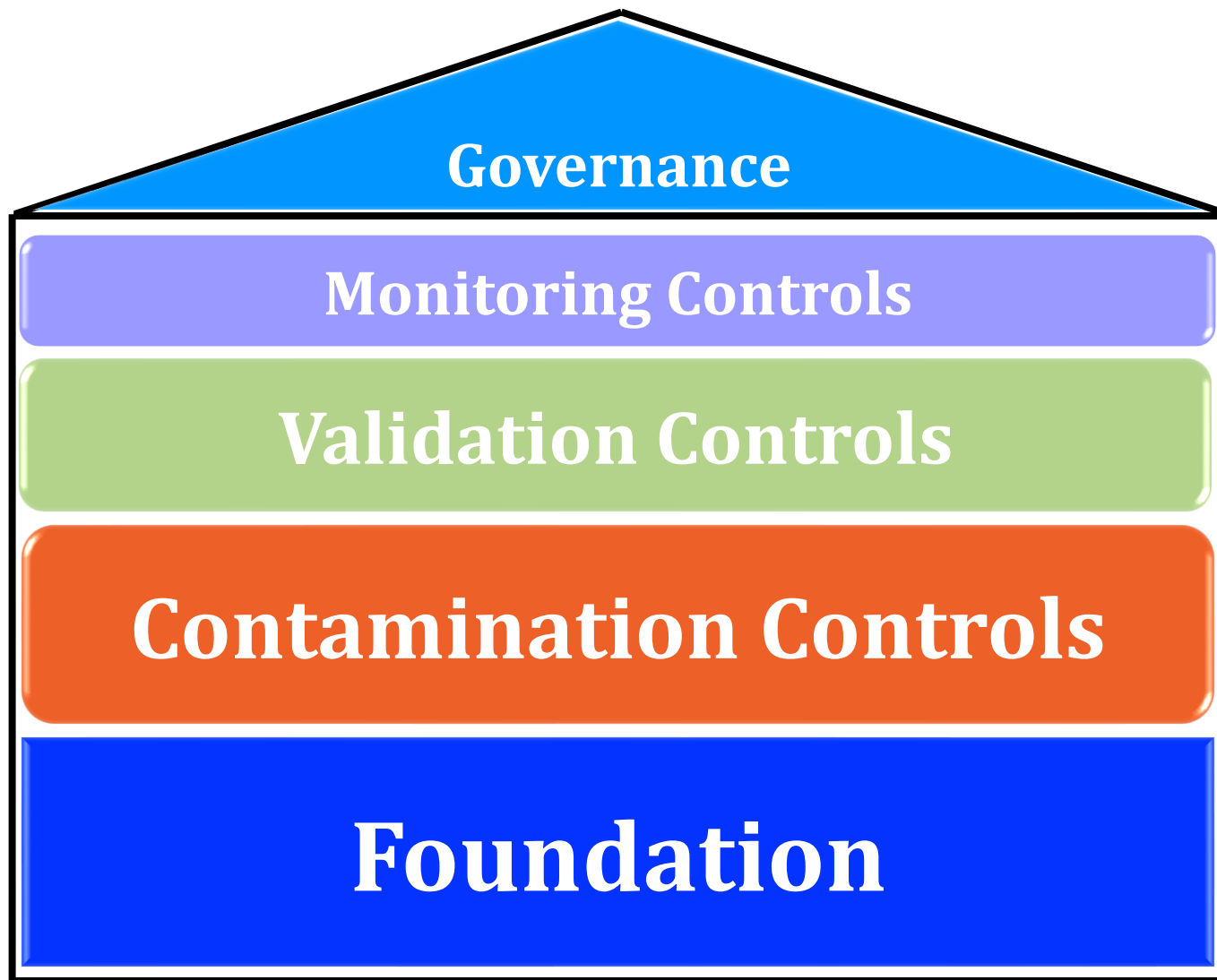


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# Contamination Control Strategy – Governance





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Escalation

Oversight



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CCS Lead

SME Team Members:

Quality Risk Management

Manufacturing Operations / Process Experts

Contamination Control / Sterility Assurance

Engineering / Facilities / Utilities

Equipment

Validation

Raw Materials / Vendor Oversight

Quality Control

Quality Assurance

Program Owner / Steward:

Empowered System Owner

Collaboration with various functional groups

Linkage to other aspects of the Quality Management System

Movement through all the elements of the CCS

Always asks the question "is there impact to the CCS?"



# The House of CCS

the **Oversight**

the **On-going Monitoring** of Control

the **Confidence** in Controls

the **Pillars** of Control

the **Foundations**



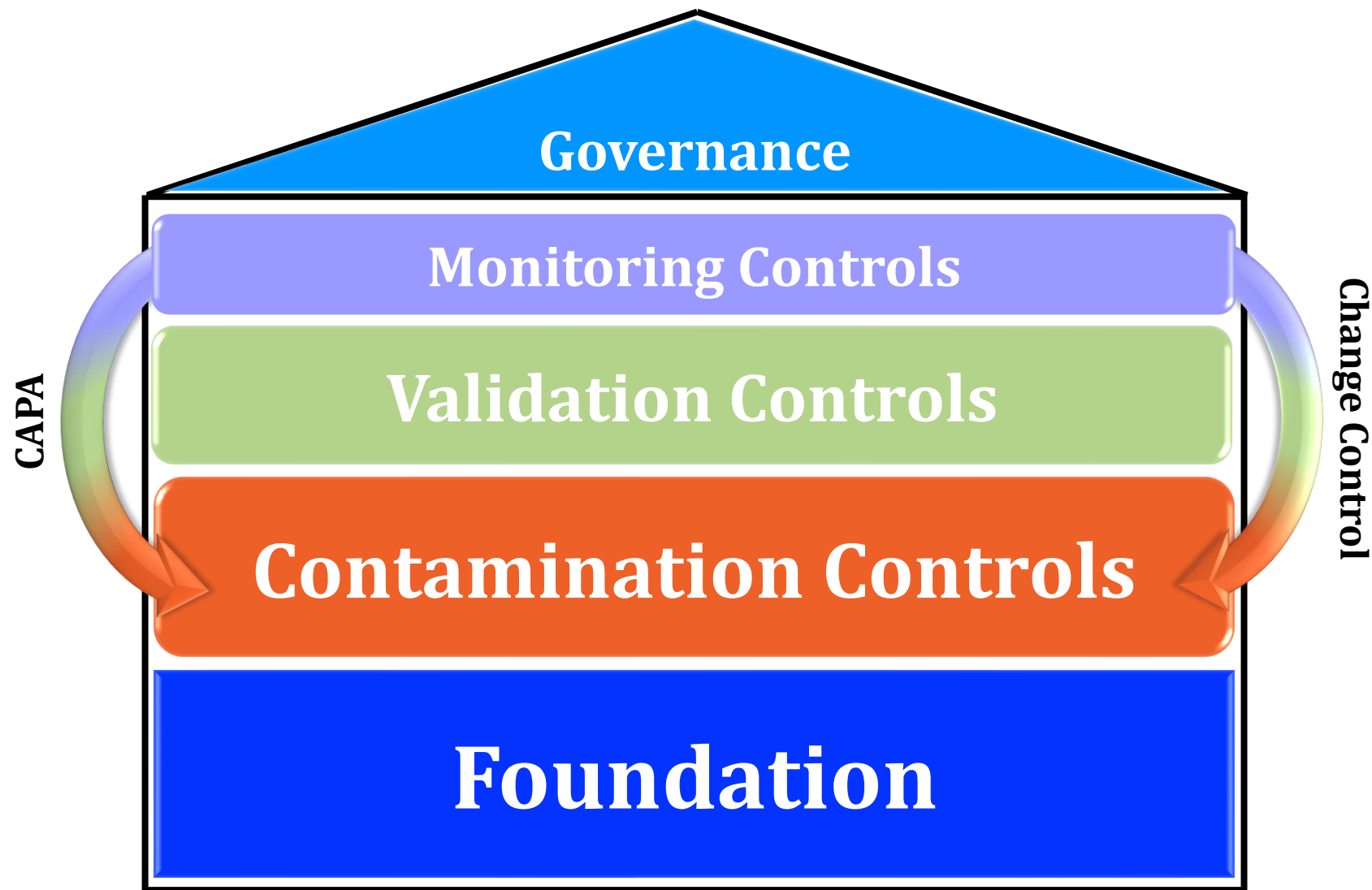


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# Contamination Control Strategy – Feedback Loops





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Key Process Indicators

Reactive

Proactive

Capital Investment / Re-Investment

Quality Risk Management activities

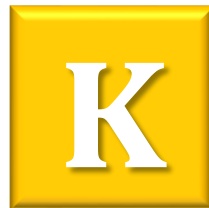
CAPA Effectiveness

Conformance to CCS Program

Qualification / Validation / Verification

Risk Assessment

Maintenance







# The House of CCS

the **Oversight**

the **Continuous Improvement** loops

the **On-going Monitoring** of Control

the **Confidence** in Controls

the **Pillars** of Control

the **Foundations**





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# Contamination Control Strategy – ATMP Specifics



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## Facilities & Utilities

Special design considerations for multi-product and multi-patient operations with multiple suites and/or multiple workstations for segregation purposes

Many of the recently designed facilities have VHP capabilities for manufacturing areas and transfer of materials / components entering the cleanrooms, which requires full isolation of these areas (especially for those processes using multiple viral vectors for gene modification)

## Equipment

Newer process equipment are designed to be automated (or semi-auto), “closed” systems for aseptic unit operations (cell growth / harvesting / activation / etc...)

A risk-based approach is thus key in evaluating the entirety of the system, the processing steps, and the environment in order to determine appropriate levels of controls and monitoring.



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## Personnel

Highly manual and aseptic thus aseptic practices are incredibly important so there should be a focus on training, qualification, and quality / design of procedures.

Operator fatigue is common and can be overlooked for personnel working within the cleanrooms increasing contamination related risks.

## Materials

Ancillary materials of biological origin (human- and animal-derived) are used in cell therapy processes thus controls for reducing introduction of adventitious viruses and other contaminants are essential, as well as traceability of materials to origin

Manufacturers need to work with the suppliers to ensure the overall CCS is robust.



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## Vendors / Suppliers

Many materials and components are unique and custom, there may be only a single supplier (or very limited number) offering 'research-grade' only quality and these materials may not be manufactured to GMPs.

Supplier selection, auditing, and additional testing / controls are important to assess (e.g., sterilization filtration of solutions prior to use in the cell therapy process by a process that is validated may be needed).

## Containers / Closures

Many cell therapy products and intermediates need to be stored at cryo-temperatures where the materials of construction for bags / containers (typically constructed with FEP) and their components are fragile.

Materials need to be handled and stored, appropriately, based upon the hazards associated with the shipping / transport of these finished products.



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Process  
Validation

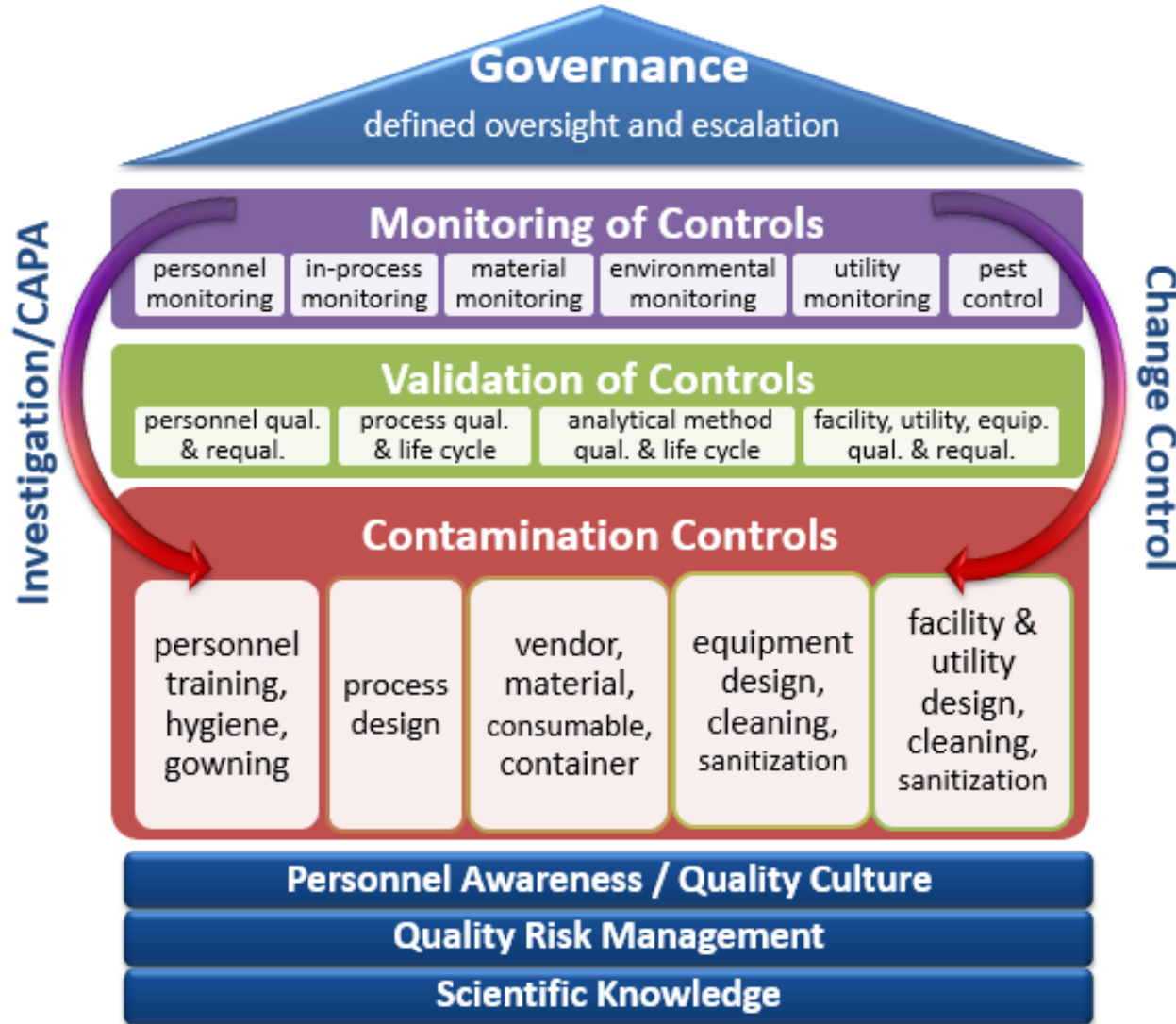
Cell therapy products cannot be terminally sterilized, most of the production steps are aseptic.

Design of APS can be complex and difficult to manage, as well as difficult to determine root cause if a contamination / failure is observed



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