



Application of QRM Principles for Requalification Programs

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Scope of application:

What is meant by
"Requalification Program"?

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“Requalification”

Preferred terminology seems to change from guidance to guidance, and organization to organization, for what is essentially the same activity:

- “revalidation”
- “requalification”
- “validation maintenance”
- “periodic review”
- ...and others



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ISPE Baseline Guide for Commissioning and Qualification (Second Edition) refers to these activities generally as Periodic Review (Chapter 9).



- “There is a regulatory requirement to maintain qualified systems in a validated state...”
- “This chapter describes an approach for periodic review where the frequency of review or requalification is established based on risk, the current level of process understanding and process performance, and regulatory requirements.”

• ISPE Baseline Guide for Commissioning and Qualification, Second Edition, 2019, Section 9.1



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Requalification, for the purposes of this presentation, is the documented, routine qualification activity required to prove that a system or piece of equipment remains in its validated state.

A “Requalification Program” governs what systems require requalification activities, and establishes the cadence of these activities. It also governs historical, or “paper-only,” periodic review.

But which approach is right for which systems?



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Quality Risk Management:

Establish a documented justification based on science and risk.

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What is meant by “Risk-Based” approach?

Is it:



- Risk acceptance?
- Risk denial?
- Risk identification and targeted mitigation?

Requalification is a mitigation to the critical risks identified.

- It could be a large effort, or next to nothing.

Know your Process!



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The Requalification Program documents the what and when.

QRM establishes the WHY.

Considerations:

- **Criticality of process step or activity**
 - Direct impact
 - Failure modes and severity
- **Detectability**
- **Probability of Adverse Event**
- **Regulatory Expectations**



DON'T ACCEPT DEFECT



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More to consider when trying to demonstrate the state of control for the system or equipment:

- **What can be leveraged from ongoing operations to demonstrate state of control?**
- **Continuous Monitoring?**
- **Periodic Monitoring or Sampling?**
- **Trend Reporting?**
- **Predictive Data Analytics?**



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Common question: Risk Assessment generation can be a long, painful process. Do we really need to do it?

Yes.

Avoid “one-size fits all” approach.

One size
does **NOT**
fit all



Apparent Pros:

- **Simple**
- **Seemingly Safe / Compliant / “Overkill” approach**

Actual Cons:

- **Wasteful – potential to do too much**
- **Risky – potential to do too little**
- **Not fully compliant without documented justification**



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What do the Regulations say about it?

- **Sometimes determinative, “black or white”:**
- **Annex 1 requirements for annual requalification of sterilization:**
 - “All sterilization processes should be validated...”
 - “...The validity of the process should be verified at scheduled intervals, at least annually, and whenever significant modifications have been made to the equipment.”
 - PIC/S, P E009-14, Annex 1, *Manufacture of Sterile Medicinal Products*, 2018, Sections 83 and 84



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What do the Regulations say about it?

Other expectations are less prescriptive. Require that organizations develop and justify approach utilizing Quality Risk Management.

Where requalification is necessary and performed at a specific time period, the period should be justified and the criteria for evaluation defined.

- PIC/S, P E009-14, Annex 15, *Qualification and Validation*, 2018, Section 4.2



PHARMACEUTICAL INSPECTION CONVENTION
PHARMACEUTICAL INSPECTION CO-OPERATION SCHEME

PE 009-14 (Annexes)
1 July 2018



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What do the Regulations say about it?

“Periodic revalidation should be considered as some process changes may occur gradually over a period of time, or because of wear of equipment.”

“The frequency and extent of revalidation should be determined using a risk-based approach together with a review of historical data.”

- WHO, *Guidelines on Validation*, 2016, Sections 10.33 10.34)



GUIDELINES ON VALIDATION



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OK, I did a Risk Assessment.

Am I done?

Two more steps:

- **Document the justification for the execution intervals required.**
- **Look at what the Risk Assessment tells you about your state of control.**
 - Is it good enough? Can it be better? Challenge the status quo.
 - Is there more you can do to improve control, decrease risk to patient, lower costs and reduce equipment downtime?
 - Move from lagging indicator to real time (or predictive)?

what
else...?



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Some Final Thoughts:

- **A properly facilitated and performed risk assessment should identify the failure modes that need to be addressed in order to move from a weaker, slower, more labor intensive mitigation (annual requalification) towards more efficient solution (real time monitoring).**
- **Question and challenge interpretations of guidance from peers, procedures and audit responses. Observe direction of broader industry.**
- **Continue to seek “smarter,” automated or engineered solutions, even where regulatory expectations of requalification activities might seem “written in stone.”**
- **Example: Air detection probes in autoclaves.**



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Questions?

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