Production Assistance for Cellular Therapies



Educational Web Seminar

Early Phase Cell Therapy Product Development
-Quality in the Lab-

Tuesday, September 26, 2017 12:00 noon – 1:00 PM ET

Description

PACT will be conducting a short web seminar series covering topics critical to early phase of cell therapy product development.

Materials specifications and laboratory quality management are the topics that will be discussed during this web seminar. Raw material and reagent specifications are the quality standards that are established to confirm the quality of these products used in the production of a cell product. All materials, reagents and processes should be subject to quality control systems and standard operating procedures to ensure their quality and consistency of protocols used in manufacturing a cell product.



Today's web seminar presentation slides are available publicly at www.pactgroup.net

Objectives



Laboratory Quality Management

- a. Recognize the importance of establishing a quality program early in product development
- b. Identify quality management concerns for pre-clinical studies that have implications in later stage regulatory filings
- c. Identify quality issues specific to pre-clinical studies and discuss effective management and troubleshooting of these challenges

Material Specifications

- a. Recognize the purpose and importance of material specifications in early phase product development
- b. Describe the process for determining material specifications requirements sufficient for translational research and as a foundation for later stage product development

Speakers

Rajiv Nallu, MS

Senior Manager, Quality Systems Operations, Office of Quality Systems, Beckman Research Institute of City of Hope

Yasmine Shad, MS

Director, Quality Systems Operations, Office of Quality Systems, Beckman Research Institute of City of Hope

Faculty Disclosure

It is the policy of the University of Minnesota Office of Continuing Professional Development to ensure balance, independence, objectivity and scientific rigor in all of its educational activities. All individuals (including spouse/partner) who have influence over activity content are required to disclose to the learners any financial with a commercial interest related to the subject matter of this activity. A commercial interest is any entity producing, marketing, re-selling, or distributing health care goods or services consumed by or used on, patients. Disclosure information is reviewed in advance in order to manage and resolve any possible conflicts of interests. Specific disclosure information for each presenter, course director, and planning committee member will be shared with the learner prior to presenter's presentation. Persons who fall to complete and sign this form in advance of the activity are not eligible to be involved in this activity.

Unless otherwise noted, individuals did not indicate any relevant affiliations or financial int

Faculty	Disclosure	Role	Name of Company
Rajiv Nallu	None	Senior Manager, Quality Systems Operations, City of Hope	None
Yasmine Shad		Director, Quality Systems Operations City of Hope	
Debbie Wood			
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David McKenna		Medical Director, Molecular and Cellular Therapeutics, UMN	
Linda Kelley			
Aisha Khan		Executive Director of Laboratory Operation University of Miami	
Joseph Gold		Manufacturing Director, Center for Biomedicine and Genetics, City of Hope	
Morgan Riordan		Education Consultant, Office of Continuing Professional Development, UMN	
Jodi Brenden Amir		Senior Education Coordinator, Office of Continuing Professional Development, UMN	

CE Credit



Accreditation Statement
In support of improving patient care, this activity has been planned and implemented by University of Minnesota, Interprofessional Continuing Education and The Emmes Corporation. The University of Minnesota, Interprofessional Continuing Education is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

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Accreditation Statement

Physicians
The University of Minnesota, Interprofessional Continuing Education designates this live activity for a maximum of 1.0 AMA PRA Category 1 Credits™ Physicians should claim only the credit commensurate with the extent of their participation in the activity.

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Laboratory Professionals

1.0 hour of P.A.C.E. credit (CEU) through the University of Minnesota Medical Laboratory Sciences
Program will be offered for this session.

Florida Clinical Laboratory Personnel

The University of Minnesota Medical School, Office of Continuing Professional Development has been approved by the Florida Board of Clinical Laboratory Personnel, CE Provider #50–21144. This activity has been approved by the Florida Board of Clinical Laboratory Personnel, CE Broker Tracking # 20–586085 and will offer 1.0 hour of continuing education

Other Healthcare Professionals
Other health care professionals
Other health care professionals who participate in this CE activity may submit their statement of participation to their appropriate accrediting organizations or state boards for consideration of credit. The participant is responsible for determining whether this activity meets the requirements for acceptable continuing education. (mcT)

CE Credit

CE credit is <u>only</u> offered to participants who have attended this <u>live</u> web seminar

Each attendee must:

- Sign and email the attendee roster to pactupdates@emmes.com
- Complete the online survey w/in 48 hrs of the web seminar:
 - 1. Survey will display when you exit the web seminar
 - Survey link provided in your email reminder sent Sept 25, 2017 https://www.surveymonkey.com/r/Pactwebinarsep2017
 - 3. PACT website Education>PACT web seminars>Sept 26 Web Seminar

Note: After the web seminar, rosters and surveys have been processed, a Statement of Participation will be issued via email to each participant listed on the attendee rosters requesting CE.





Quality Assurance (QA)

- Inspect each non clinical laboratory study at regular intervals.
 - Assure the integrity of the study and maintain written documentation.
 - Written records are in place and in sufficient detail so the study can be reconstructed.
 - Review Training documentation of personnel.
 - Inspect equipments to ensure they are properly maintained and calibrated.
 - Review reagents and materials used for testing.



Quality Assurance (QA)

- Review Study Plan.
- Changes to protocols.
- Report any inspection results to management.



Quality Assurance

- Review study final study report.
 - Results accurately reflect the raw data.
- Statement whether study was conducted in compliance to GLP provided in the final study.



Conclusion

- Pre clinical studies for cell therapy are significantly different from traditional small molecule studies or medical devices.
- All pre-clinical studies must be performed under GLP compliance.
- Quality system must be in place to ensure the study is conducted as per the regulations and the study can be reconstructed.





4. Conclusion

Pact Production Assistance for Callular Therapies
National Heart Lung and Blood Program

DEFINITION

What is a Raw Material?

ICH Q7 definition

A general term used to denote starting materials, reagents, and solvents intended for use in the production of intermediates or

Modified definition

"Any element or component used in the manufacture of a biotechnology product that comes in contact with the API or the API starting material. A raw material may be reactive or nonreactive with the API"

(FDA reviewer, Office of Biotechnology Products)



WHY IS RM SELECTION IMPORTANT?

- 1. Prevent delays in later phase product development
- 2. Key to ensure safety, quality and efficacy of clinical product
- 3. Ensures product is well-defined, consistent, and suitable for its intended use
- 4. Prevent delays in product / application approval





REGULATIONS / GUIDANCES FOR RM

- FDA: Guidance for Industry, Characterization and Qualification of Cell Substrates and other Biological Materials Used in the Production of Viral Vaccines for Infectious Disease Indications.
- FDA: Points to Consider in the Characterization of Cell Lines used to Produce Biologicals FDA: Current good manufacturing practices in manufacturing, processing, packaging, or holding of drugs. Code of Federal Regulations, Title 21, Part 210
- FDA: Current good manufacturing practices for finished pharmaceuticals. Code of Federal Regulations, Title 21, Part 211

 EMEA: Medicinal products for human and veterinary use. GMP Guide (Volume 4)
- EMEA: Sampling of starting and packaging materials. GMP Guide (Volume 4) EMEA: Manufacture of investigational medicinal products. GMP Guide (Volume 4)
- ICH: Good manufacturing practice for active pharmaceutical ingredients Q7.
- FDA: Guidance for Industry. Manufacturing, Processing, or Holding Active Pharmaceutical Ingredients







RM SELECTION: KEY CONSIDERATIONS

- GMPs require RM and Suppliers to be qualified
 - Robust and sustainable Supplier and RM qualification program required
 - Testing RM can be a challenge
 - Qualification of RM can occur in parallel with its use
 - Set specifications and procedures to control RMs
 - Keep good documentation to show data integrity
 - RMs considered critical should have a higher degree of testing

Example:

Use of cell lines in "pre-GMP" phase

- requires traceability of RMs used in development
- maintain good records of RMs so safety risk can be assessed
- use parental cell lines from trusted source
- if possible use GMP-qualified raw materials





RM SELECTION: KEY CONSIDERATIONS

- Quality Risk

 - Lot to lot consistency? Fully tested?Supplier manufacturing process changes?
 - Require additional testing not conducted by Supplier?
- Origin risk (safety)

 - mitigate risk of adventitious agent contamination
 Are there animal products used in its manufacture?
 Fetal calf serum, bovine serum albumin, human serum albumin
- Appropriate for the intended application
 Does the RM make product contact?

 - What quality is available (Research? GLP? GMP) Sterility tested? Bioburden? Sterile filtered?
 - Can it be sterilized in-house?
 Use irradiated serum to inactivate viruses (reduce risk of adventitious)
 - - agents)





RM SELECTION: KEY CONSIDERATIONS

- · Ensure continuous supply
 - Availability? Back-up options?
 - Manufacturer willing to support product long term?



- Storage (special storage needs)
 - Stability / expiration
 - Consider time it will take to qualify a new lot of material & build into manufacturing schedule
- Cost (Scale-up)
 - RM available in quantities needed for scale-up?
 - Changes in containers / closures may affect RM quality





EXAMPLE OF MATERIAL RISK ASSESSMENT General Components of Mammalian Cell Culture Origin / complexity Impact on DS process Inorganic salts/buffer components Yes Yes / No Carbohydrate/energy source Yes Yes Vitamins, Antioxidants No Medium Nucleotides No Medium Recombinant proteins Yes No High Serum or serum components Yes Yes High Hydrolysates/Peptones Yes Yes High Antifoam agent (cell protection) No Yes High Definition: 1 Yes = Medium Risk 2-3 Yes = High Risk and Criticality * PDA, Jan 05, 2015, Strategies for Controlling Raw Materials in Biologics Manufacturing

DEFINING RISK ASSESMENT LEVELS Low Medium High CoA Review (qualify RM parallel with use) Test Various Lots RM & Supplier Qualification On-Site Audits Risk Assessment for Cross-Contamination Quality Agreement / Contract

STRATEGY FOR QUALIFICATION Step 1: Collect RM Information Determine what grade of material is available (research, GLP, GMP, clinical) • Is RM listed in compendium (US Pharmacopeia, EU Pharmacopeia)? Conduct risk assessment. Is the RM critical? - Sole Supplier Step 2: Qualification of RM CoA review (all tests reported on CoA?) - (collect CoA of different lots to determine variability, trend release data) - Stability data / expiration date Verify each lot meets Suppliers specifications, are there any changes in specifications? Are animal derived materials used in its manufacture? (CoO) • Is there a need to conduct additional tests?

STRATEGY FOR QUALIFICATION (Con't)

Step 3: Supplier Qualification

- Questionnaire, site visit for critical Suppliers
- Is there an independent quality unit?
- Adequate changeover procedures?
- MF on file with FDA?
 - Changes in manufacturing process, facilities or equipment
- Has material been used to manufacture a clinical product?
- Supplier been inspected by regulatory agencies, FDA
- Will the Supplier support the product long term?
- Manufactured on the same line as other products?
- Provide an ADM or BSE / TSE statement?





STRATEGY FOR QUALIFICATION (Con't)

Step 4: Maintain RM & Supplier Records

- · Maintain a list of qualified RM & Suppliers
- Conduct periodic review of RM & Supplier (on-site audits, questionnaire, phone surveys)
- Established procedures for frequency of requalification
- Consider time it will take to qualify a new lot of material build that into your manufacturing schedule
- Collaborate with Supplier to improve RM quality
- Implement a quality agreement



Ensure you have adequate QA personnel





SUMMARY OF RM REQUIREMENTS AT VARIOUS DEVELOPMENT PHASES

PHASE	LEVEL OF QUALIFICATION	TESTING / RELEASE	
Pre-GMP Phase (process development)	Documentation of source (CoA, CoO)	Testing parallel to use	
Phase I/II	Supplier risk assessment (questionnaire) On-site audit (high risk) Consider QA/Supplier Agreement	Identity testing Method Development & Qualification	
Phase III / Validation	On-site audits Monitoring of approved Raw Materials QA / Supplier Agreement	Full testing (CoA & in-house tests) Stability studies Method validation	
Market (Phase IV)	Frequency of on-site audits based on experience	Check suitability of specifications for product intended use	





CONCLUSION

To ensure constant supply of materials and appropriate quality and safety of clinical product:

- establish an appropriate definition of a raw material
- select the appropriate RM early in process / product development to achieve GLP / GMP readiness of clinical product
- conduct risk assessment to identify critical & non-critical RM
- establish a strategy to qualify RMs & Suppliers and maintain records of qualified RMs & Suppliers
- involve QA personnel early in product development process









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Development
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