

permitted. [NOTE—A description of terms used in this chapter can be found in the Appendix at the end of the chapter.]

The guidance provided in this chapter and the monitoring parameters given for microbiological evaluation should be applied only to clean rooms, restricted-access barrier systems (RABS), and isolators used for aseptic processing. ISO-classified environments used for other purposes are not required to meet the levels of contamination control required for aseptically produced sterile products. The environments used for nonsterile applications require different microbial control strategies.

A large proportion of products labeled as sterile are manufactured by aseptic processing rather than terminal sterilization. Because aseptic processing relies on the exclusion of microorganisms from the process stream and the prevention of microorganisms from entering open containers during processing, product bioburden as well as the bioburden of the manufacturing environment are important factors governing the risk of unacceptable microbial contamination. The terms *aseptic* and *sterile* are not synonymous. *Sterile* means having a complete absence of viable microorganisms or organisms that have the potential to reproduce. In the purest microbiological sense, an *aseptic* process is one that prevents contamination by the exclusion of microorganisms. In contemporary aseptic healthcare-product manufacturing, *aseptic* describes the process for handling sterilized materials in a controlled environment designed to maintain microbial contamination at levels known to present minimal risk.

In any environment where human operators are present, microbial contamination at some level is inevitable. Even the most cautious clean-room environment design and operation will not eliminate the shedding of microorganisms if human operators are present. Thus, an expectation of zero contamination at all locations during every aseptic processing operation is technically not possible and thus is unrealistic. There are no means to demonstrate that an aseptic processing environment and the product-contact surfaces within that environment are sterile. Monitoring locations should be determined based upon an assessment of risk. Although manufacturers should review environmental monitoring results frequently to ensure that the facility operates in a validated state of control, monitoring results can neither prove nor disprove sterility. Because of the limitations of monitoring, manufacturers cannot rely directly on monitoring, statistics, or periodic aseptic-processing simulations to ensure a sterility assurance level.

Environmental monitoring is usually performed by personnel and thus requires operator intervention. As a result, environmental monitoring can both increase the risk of contamination and also give false-positive results. Thus, intensive monitoring is unwarranted, particularly in the ISO 5 environments that are used in the most critical zones of aseptic processing.

A number of sampling methods can be used to assess and control the microbiological status of controlled environments for aseptic processing. At present, nearly all of these methods rely on the growth and recovery of microorganisms, many of which can be in a damaged state caused by environmental stress and therefore may be difficult to recover. The numerical values for air, surface, and personnel monitoring included in this chapter are not intended to represent limits or specifications but are strictly informational. Because of the variety of microbiological sampling equipment and methods, it is not scientifically reasonable to suggest that the attainment of these values guarantees microbial control or that excursions beyond values in this chapter indicate a loss of control. The assessment of risks associated with manufacturing environments must be made over a significant period; and in each case, the contamination recovery rate metric should be established on the basis of a review of actual findings within the facility. The objective of each user should be to use contamination recovery rates to track ongoing performance and to refine the microbiological control program to foster improvements. When optimum operational conditions are achieved within a facility, con-

tamination recovery rate levels typically become relatively stable within a normal range of variability.

There are no standard methods for air sampling, and available literature indicates that air-sampling methods are highly variable. It should not be assumed that similar sample volumes taken by different methods will produce similar rates of recovery. Many factors can affect microbial recovery and survival, and different air sampler suppliers may have designed their systems to meet different requirements. Also, sample-to-sample variation in microbial sampling can be extensive. Limited data are available regarding the accuracy, precision, sensitivity, and limits of detection of monitoring methods used in the aseptic processing of healthcare products.

Surface sampling methods are also not standardized. Different media are employed, and in the case of swabs, different results have been reported for wet and dry swab methods and contact plates. Replicate sample contact plates should be expected to give similar results under identical conditions, but rates of recovery have been reported to be both lower than expected and highly variable. In general, surface monitoring has been found to recover <50%, even when used with relatively high inoculum levels on standardized coupons. In actual production environments where organisms are stressed to varying degrees, recovery rates may be lower.

ADVANCED ASEPTIC TECHNOLOGIES

Advanced aseptic technologies can be defined as those that do not rely on the direct intervention of human operators during processing. At present, technologies such as isolators, blow/fill/seal, and closed RABS (designs that are never opened during setup or operation) may be considered advanced aseptic technologies, provided that direct intervention by gownned personnel is disallowed during processing. In recent years, isolator technology has found a broad acceptance in healthcare manufacturing. Isolators and closed RABS effectively separate the operator from the critical aseptic processing environment. Because these systems substantially reduce contamination risk, their microbiological control levels are higher than those of conventional clean rooms that have comparable particulate air classification level, for example, ISO 5.

CLEAN ROOM CLASSIFICATION FOR ASEPTIC PROCESSING ENVIRONMENTS

The design and construction of clean rooms and controlled environments are covered in ISO 14644 series. This standard defines the performance of a clean environment with respect to the concentration of total particulates per unit volume. ISO 14644-1 stipulates the total particulate counts allowed for a clean environment to meet the defined air quality classifications. The reader is referred to this standard regarding the design characteristics and certification of clean environments.

Pharmaceutical manufacturers are concerned with nonviable particulate contamination in injectable products (see *Particulate Matter in Injections* (788)). Unlike microbial contamination in which experimental data suggest that humans are the only significant source, nonviable particulates can arise both from humans and from processing equipment. Studies indicate that gownned humans slough particulate and microbial contamination at a rather consistent rate. However, the relationship between microbial (viable) and nonviable contamination does not hold for particulates shed by processing equipment. Where equipment is the primary source of particulate matter, the resulting particulates are essentially all nonviable.

The argument that if fewer total particulates are present in a clean room, it is less likely that airborne microorganisms will be present is true only if human operators are the

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Pharmaceutical Dosage Forms - Parenteral Medications Sandeep Nema, John D. Ludwig, 2016-04-19 This three volume set of Pharmaceutical Dosage Forms Parenteral Medications is an authoritative comprehensive reference work on the formulation and manufacture of parenteral dosage forms effectively balancing theoretical considerations with the practical aspects of their development As such it is recommended for scientists and engineers in the Parenteral Medications, Fourth Edition Sandeep Nema, John D. Ludwig, 2019-07-19 Parenteral Medications is an authoritative comprehensive reference work on the formulation and manufacturing of parenteral dosage forms effectively balancing theoretical considerations with practical aspects of their development Previously published as a three volume set all volumes have been combined into one comprehensive publication that addresses the plethora of changes in the science and considerable advances in the technology associated with these products and routes of administration Key Features Provides a comprehensive reference work on the formulation and manufacturing of parenteral dosage forms Addresses changes in the science and advances in the technology associated with parenteral medications and routes of administration Includes 13 new chapters and updated chapters throughout Contains the contributors of leading researchers in the field of parenteral medications Uses full color detailed illustrations enhancing the learning process The fourth edition not only reflects enhanced content in all the chapters but also highlights the rapidly advancing formulation processing manufacturing parenteral technology including advanced delivery and cell therapies The book is divided into seven sections Section 1 Parenteral Drug Administration and Delivery Devices Section 2 Formulation Design and Development Section 3 Specialized Drug Delivery Systems Section 4 Primary Packaging and Container Closure Integrity Section 5 Facility Design and Environmental Control Section 6 Sterilization and Pharmaceutical Processing Section 7 Quality Testing and Regulatory Requirements

Specification of Drug Substances and Products Christopher M. Riley, Thomas W. Rosanske, George L. Reid, 2020-07-23 Specification of Drug Substances and Products Development and Validation of Analytical Methods Second Edition presents a comprehensive and critical analysis of the requirements and approaches to setting specifications for new pharmaceutical products with an emphasis on phase appropriate development validation of analytical methods and their application in practice This thoroughly revised second edition covers topics not covered or not substantially covered in the first edition including method development and validation in the clinical phase method transfer process analytical technology analytical life cycle management special challenges with generic drugs genotoxic impurities topical products nasal sprays and inhalation products and biotechnology products The book's authors have been carefully selected as former members of the ICH Expert Working Groups charged with developing the ICH guidelines and or subject matter experts in the industry academia and in government laboratories Presents a critical assessment of the application of ICH guidelines on method validation and specification setting Written by subject matter experts involved in the development and application of the

guidelines Provides a comprehensive treatment of the analytical methodologies used in the analysis control and specification of new drug substances and products Covers the latest statistical approaches including analytical quality by design in the development of specifications method validation and shelf life prediction *Cancer Immunotherapy Principles and Practice, Second Edition* Lisa H. Butterfield, Howard L. Kaufman, Francesco M. Marincola, 2021-08-25 Thoroughly updated to reflect major advances in the field of immuno oncology this second edition of Cancer Immunotherapy Principles and Practice from the Society for Immunotherapy of Cancer SITC remains the definitive resource for information on tumor immunology and cancer immunotherapy treatments An essential reference for both novice and experienced cancer researchers oncologists and related practitioners alike the book not only guides readers through the fundamental scientific principles of the field all the way to translational and practical clinical applications for treating and managing oncologic disease but also provides a comprehensive understanding of the regulatory processes that support the safe and effective delivery of immunotherapy to patients with cancer The expanded and updated second edition now spans 68 chapters including 12 new chapters covering major topics and innovations that have shaped the rapid development of immunotherapy and its ascension into the standard of care as first line treatment for a growing number of disease settings New to this edition are chapters with deeper insight into our understanding of cancer genomics and determinants of response immunogenic cell death cancer and stromal cell intrinsic pathways of immune resistance cancer immune exclusion adoptive cell therapy metabolomics tumor mutation burden immunotherapy in combination with radiation therapy synthetic biology and more Complete with detailed illustrations tables and key points for targeted reference Cancer Immunotherapy Principles and Practice Second Edition is the most comprehensive and authoritative resource for scientists and clinicians looking to expand their knowledge base of this dynamic field Key Features Offers key insights and perspectives on cancer immunology and immunotherapy treatments from renowned experts in the field Covers the basic principles and science behind cancer immunotherapy and tumor immunology Includes treatment strategies for a vast array of available immunotherapy classes and agents such as cytokine therapies oncolytic viruses cancer vaccines CAR T therapies and combination immunotherapies Provides essential information on FDA approved immunotherapies including clinical management and outcome data related to response rates risks and toxicities Discusses special considerations for immunotherapy in the context of specific disease settings including skin cancers genitourinary cancers gastrointestinal cancers hepatocellular carcinomas gynecologic malignancies breast cancers lung cancers head and neck cancers brain tumors sarcomas pediatric cancers and treatments combined with radiation therapy Clarifies the complex regulatory aspects behind the development and approval of immunotherapy drugs

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Physics, Uspekhi ,2005 **National Drug Clerk Consolidating Drug Store Merchandising** ,1919

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