Dear EC,

The consultation document fails to clarify that it is the EC’s intention for a self-standing guidance for GMP independent from the existing guidance in EudraLex Volume 4. This is an inexplicable omission, and will mislead stakeholders who are making comments, thinking it might be a proposed Annex to Volume 4. Such an omission could lead to challenges to the output from the consultation, and a judicial review of the consultation process. Indeed, a consultation on the draft guidance without an explanation of its self-standing nature renders the consultation process irrelevant, as responders will not be able to ascertain in the time provided those parts of EudraLex Volume 4 that are absent.

In light of the above, a self-standing guidance for GMP for ATMPs is not needed. All other sectors in the manufacture of medicines obtain guidance from Volume 4, either directly through Parts I, II and III, or through specific guidance provided in Annexes to the Volume. The same approach would be preferable for ATMPs, so that the wealth of guidance already available for GMP can be applied across the sector in a consistent manner. The self-standing guide as presented in the consultation document provides inadequately guidance for all stages of manufacture and all scales of production, and lacks detail in areas such as qualification, clean room set up and operation, aseptic manufacture, change control etc. without reference to the chapters and annexes of the non-ATMP GMP guide.

A self-standing guidance for ATMP GMP will cause operational and regulatory problems for the sector.

• If there are independent guidances for normal non-ATMPs and ATMPs, there will inevitably be contradictions, which would make it impossible for a licensed site to comply with both.

• A separate GMP for ATMP will lead to an ATMP-specific variety of GMP certificate and MIA or MIA(IMP) licences.

• Sites that are a subsite of an organisation’s GMP manufacturing authorisation will be obliged to become independent and stand-alone.

• A site that manufactures both standard pharmaceuticals and ATMPs will be obliged to give up one or other of these activities.

• The independent guidance will lead to ATMP-specific national CAs (to undertake GMP inspections), that might be independent from existing GMP CAs, doubling the regulatory interactions for some stakeholders.

• There will be a requirement for specific ATMP QPs in order to certify that batches of finished products have been made in accordance with the self-standing GMP requirements.

• Existing MAs and CTAs will require amendment to reflect a change in the GMP licensing arrangements.

The inadequacies of the draft guidance, if implemented, will inevitably lead to poor quality ATMPs, risking patient health and the reputation of the sector. I recommend strongly that the EC rethinks its approach to GMP for the ATMP sector in line with all other sectors of pharmaceutical production, so that a single standard for GMP is maintained, and that specific guidance for ATMPs is provided where necessary in an annex to EudraLex Volume 4.