european association of hospital pharmacists

Rue Abbé Cuypers, 3
1040 Brussels
Belgium

tel: +32 2 7416829
fax: +32 2 7347910

e-mail: sec@eahp.eu
internet: www.eahp.eu

VAT No.: BE0836.539.876

Brussels, 25 September 2016

Stakeholder consultation on draft Guidelines on Good Manufacturing Practice (GMP) for Advanced Therapy Medicinal Products (ATMPs)

EU Transparency Register ID Number: 82950919755-02

Summary of response:

- The proposed guidance represents a lower standard of GMP in comparison to regular medicine production, which cannot be justified
- The guidance should be redrafted to bring standards into line with existing GMP legislation and guidance in other domains
- The redraft should include fuller expansion and clarification of the role of the pharmacist in production, especially where production takes place in the hospital setting
- The redraft process should benefit from the direct input of hospital pharmacists working in ATMP production currently
- It is unclear where the Guidance is expected to fit within an international setting, which additionally requires attention in the redrafting process

1. The Need for Redraft

The European Association of Hospital Pharmacists (EAHP) expresses serious concerns that the proposed Guidelines on GMP constitute a lower level of GMP for ATMPs that is not acceptable in respect to the hospital pharmacist's ethical duties in protecting patient safety.

We urge in the strongest terms a redraft that brings GMP guidance for ATMPs much more in line with that accorded to normal medicine manufacture, and emphasises the need to adhere to existing well-established GMP legislation, requirements and guidance already in place.

A lower level of GMP stringency cannot be justified when there is not evidence that ATMPs present lower risk to the patient. On the contrary, ATMPs can generally be classified as high risk medicines manufactured for high risk patients and, as such, warrant the highest standard of GMP throughout the lifecycle of the product.

The Commission must understand that ATMPs are:

- sterile products susceptible to contamination in that they often have a protracted incubation period and are growing in nutrient rich media

- often manufactured with involvement of open systems
- liable to differentiation during manufacture compared to their source cell type.
- rarely suitable for terminal sterilisation
- provided to susceptible patients often using novel administration techniques,
- due to their mode of action, retained and may proliferate in the patient

EAHP cannot see the case for lowering regulatory expectations for ATMP GMP. The guidance must be redrafted accordingly.

Moreover, the risk of damaging public confidence in ATMPs via loose GMP regulation is serious. In other words, insufficiently stringent ATMP GMP guidance provides a possibility of being deeply counter-productive in respect to all stakeholders' objectives of improving patient access to such treatments.

In specific terms, EAHP urges the expectation be made clear that ATMPs comply with EU GMP (EUDRALEX volume 4) expectations throughout the product lifecycle from validation through phases I, II and III clinical trials. We also identify gaps in areas of basic GMP for example room classification explanation, aspects of quality control and validation.

2. The Need for Emphasis on the Hospital Pharmacist Role

The current guidance under-emphasises the role and responsibility of the pharmacist in respect to production issues, especially where this takes place in the hospital. This is somewhat perverse given it is stated on the first page of the consultation document "clear allocation of responsibilities" is a key objective of the GMP guidelines.

Hospital pharmacists are personally involved in making patient access to ATMPs a reality in countries across Europe. This includes, but is not limited to, providing oversight to hospital production of ATMPs, their traceability, storage and other governance matters, as well as being proactively involved with clinical trial procedures, and the provision of advice to colleague healthcare professionals on all aspects of medicines use. As such, hospital pharmacists are essential components of the healthcare professional team providing patient access to ATMPs.

Without prejudice to the larger redraft of the guidelines that we seek, EAHP can identify immediate areas for improvement such as:

- within section 4.3 "Storage areas", the addition of new line 637: **"Storage of ATMPs within the hospital setting should be under the governance responsibility of the hospital pharmacy."**
- section 3.4. "Key Personnel", EAHP recommends a new line 435: **"Where production takes place within the hospital setting, this should be under the governance responsibility of the hospital pharmacy."**

These are provided merely as early examples, and opportunity for hospital pharmacist representatives to participate in a redrafting process is strongly advised.

EAHP would be pleased to assist the Commission in recruiting such expertise.

3. The Requirement for International understanding on ATMP GMP

As a specialized area of medicine, ATMP developments are, perhaps even more than regularly the case, a subject of international collaboration. Once again, unnecessary international divergence in approach to matters such as GMP could do more to jeopardise advances in access than assist, by inadvertently creating barriers to import, export, and commercialization.

EAHP urge rigorous efforts be given to developing not only a European expectation on ATMP GMP, but moreover an international understanding. This does not appear to be addressed in the current guidelines.