正本

衛生福利部食品藥物管理署 函

機關地址:11561 臺北市南港區昆陽街161-2號

傳 真:0227877178

聯絡人及電話:蘇子婷0227877148 電子郵件信箱:daisyhaha@fda.gov.tw

10478

臺北市建國北路2段123號3樓

受文者:中華民國西藥代理商業同業公會

發文日期:中華民國106年3月24日 發文字號:FDA風字第1061101872號

速別:

密等及解密條件或保密期限:

附件: 美國FDA Warning Letter 320-17-28影本1份

主旨:美國FDA發布印度原料藥廠「Badrivishal Chemicals & Pharmaceuticals」(廠址: Gat No. 29, Village Jambwade (Induri)) Warning Letter乙案,詳如說明段,請轉知所屬會員知照。

說明:

- 一、美國衛生主管機關US Food and Drug Administration (FDA) 查核旨揭原料藥廠,判定違反CGMP,並於106年3月2日正式發布Warning Letter (詳如附件)。
- 二、鑑於旨揭原料藥之製造品質恐無法符合GMP之要求,可 能對藥品製造品質帶來影響與危害,請轉知所屬會員釐 清相關輸台製劑產品是否使用旨揭原料藥廠所生產原料 藥,並應依風險管理原則辦理相關後續處置。

正本:中華民國西藥商業同業公會全國聯合會、中華民國西藥代理商業同業公會、台 北市西藥代理商業同業公會、中華民國開發性製藥研究協會、中華民國藥品行 銷暨管理協會

副本:

署長吳秀梅

Badrivishal Chemicals & Pharmaceuticals 3/2/17

SHARE	TWEET	EMAIL



10903 New Hampshire Avenue Silver Spring, MD 20993

Via UPS Return Receipt Requested

March 2, 2017

Mr. Deepak Rawat Chief Executive Officer Badrivishal Chemicals & Pharmaceuticals Plot No. 13, Revenue Colony Talegaon - Chakan Road Talegaon Dabhade, Dist. Pune 410 507 Maharashtra India

Dear Mr. Rawat:

The U.S. Food and Drug Administration (FDA) inspected your drug manufacturing facility, Badrivishal Chemicals & Pharmaceuticals at Gat No. 29, Village Jambwade (Induri), Post Sudumbre, Taluka Mayal, Dist. Pune, Maharashtra, from August 16 to 19, 2016.

This warning letter summarizes significant deviations from current good manufacturing practice (CGMP) active pharmaceutical ingredients (API).

Because your methods, facilities, or controls for manufacturing, processing, packing, or holding do not conform to CGMP, your API are adulterated within the meaning of section 501(a)(2)(B) of the Federal Fo Drug, and Cosmetic Act (FD&C Act), 21 U.S.C. 351(a)(2)(B).

We reviewed your September 8, 2016, response in detail.

During our inspection, our investigators observed specific deviations including, but not limited to, the following.

Failure to validate and monitor the water purification system to ensure that water is of appropriate quality and suitable for its intended use.

During the inspection, our investigators found that your water purification system was not adequately monitored and controlled. Because you use water as a drug component and for cleaning your facility an

Warning Letter 320-17-28

equipment, these failures pose significant risk to the safety of your drugs.

Source water

You failed to test the source water for your (b)(4) water system. The source water emanates from a nea river and passes through farmland, where it is subject to agricultural runoff and animal waste, before reaching your facility. Your firm stores the source water in an (b)(4) tank that has a large (b)(4)-facing he that is open to the environment. Your storage method does not protect your water from dirt and other contaminants, or from the ingress and proliferation of pests and objectionable organisms.

Sanitization and validation

You did not follow your own sanitization procedures for your (b)(4) water system. Your procedures specify (b)(4) of sanitization at (b)(4), yet our investigators identified instances where you sanitized for ε little as 10 minutes without justification.

During the inspection, you stated that in March 2016 you initiated, but have not yet completed, a performance qualification of the **(b)(4)** water system. Your firm has used this unqualified system routinel since its installation in 2014, despite having no scientific evidence that the system is capable of producily water of adequate quality.

Testing

Our investigators found that you were aware that the total aerobic microbial counts (TAMC) for all inprocess water samples (b)(4) had exceeded your limit of (b)(4) colony forming units (cfu)/mL for multiple months. You failed to investigate these deviations.

Furthermore, your firm did not demonstrate an adequate understanding of the process that your (b) (4) water system relies on to kill microorganisms. (b)(4) is typically (b)(4) sanitization steps. However, you only use (b)(4) to reduce TAMC to acceptable levels in the (b)(4) water. This suggests that it is a critical step in your process, but you did not consider operating parameters that affect performance, such as working the fact (b)(4), water (b)(4), and (b)(4) age. Additionally, your interpretation of your results is confound by the fact that your methods are not verified.

In your response, you committed to testing your source water for microbiological contamination. You indicated that you set microbial limits of (b)(4) cfu/mL for the source water, and that you removed the microbial limits for the in-process samples of your (b)(4) water system.

Your response is inadequate. You failed to provide sufficient detail about how you will remediate your (b) water system. In response to this letter, provide:

- a plan to address the open (b)(4) source-water storage tank
- a status update of the performance qualification that you initiated in March 2016
- · corrective and preventive actions if source water test results exceed the limits
- · scientific rationale for setting microbial limits

Contaminated (b)(4) water has been the root cause of multiple recalls by other drug manufacturers of ne sterile (b)(4) liquids, including instances of adulteration with *Burkholderia cepacia*, an opportunistic pathogen. Therefore, it is imperative that appropriate action and alert limits be established based on validation data; these limits must be low enough to signal significant changes from normal operating conditions.

2. Failure of your quality unit to prepare, review, and approve documents related to the manufacturing of API.

On August 16, 2016, our investigators found a large number of trash bags behind a building on your property. The trash bags contained torn original laboratory and production records, such as analytical te

reports, **(b)(4)** water testing reports, and sample notebooks. The information on these discarded, torn documents did not match the official records. Your quality unit did not investigate these discrepancies. C August 18, 2016, when our investigators revisited the area where the trash bags had been, they found t the documents had been removed from the site. These findings indicate that your quality unit is not exercising its responsibilities.

In your response, you admitted that a "gap exist[ed] in the Quality Assurance department" concerning document control. You stated that you implemented enhanced document controls and trained employee complete records contemporaneously.

However, your response is inadequate because you did not provide any details of your corrective and preventive actions. You also did not address any changes made to ensure that discrepancies are prope investigated. Furthermore, removal of the trash bags containing additional torn documents prevented or investigators from examining these documents. It also prevented your firm from performing a global reconciliation of all torn documents with their official versions.

In response to this letter, provide:

- details and a summary of the system that you established for reviewing CGMP documents to ensure documents are tracked and disposed of properly
- · your procedure for handling discrepancies and ensuring ongoing quality unit oversight
- 3. Failure to verify the suitability of analytical methods.

You failed to ensure that the methods used by your contract testing laboratory, (b)(4), have been verified suitable for their intended use. It is your responsibility to use a qualified contract testing laboratory that produces accurate and reliable results.

Your firm contracts with **(b)(4)** for release testing. Your quality assurance agreement with **(b)(4)** does no specify method validation responsibilities. During the inspection, our investigators requested the method verifications for the residual solvent, impurity, and microbiological tests performed by **(b)(4)**. You stated the requested documents were located at **(b)(4)** and that you would retrieve them within 15 days.

In your response, you did not provide the requested documents from **(b)(4)**, but instead provided draft protocols for the residual solvent, impurity, and microbiological testing. You stated that these protocols would be verified by December 15, 2016, but it is unclear which company would perform the verification experiments.

Your response is inadequate. In response to this letter, clarify which company performed the verification Also, provide the results of an internal review of all the other test methods for your drugs to determine the need for method verification or method validation, as appropriate. If verification or validation is needed, provide a timeline for completion and the company that will perform the verification or validation.

4. Failure to adequately investigate critical deviations.

(b)(4) sent you impurity testing chromatograms that contained unexplained discrepancies in run times a well as aborted runs and reprocessing of data for at least six batches over at least three months. You di not document or investigate these discrepancies.

In your response, you stated that your firm "did not have expertise to interpret, review the outcome of th HPLC chromatograms as to the standards of regulatory agencies." You proposed having (b)(4) retest th six batches in the presence of an "expert representative" from Badrivishal to ensure "good chromatogra practices." Moreover, your quality assurance agreement with (b)(4) does not specify communication of of-specification results or discrepancies.

Your response is inadequate because it lacks details. In response to this letter, describe the corrective a preventive actions you have taken, such as on-site audits and method validations or verifications, that show (b)(4) is now qualified to test your drugs. Also, provide proof that your "expert representative" has sufficient education, training, and experience to perform the indicated function. In addition, provide deta about your proposed "outside laboratory data review unit" and laboratory review training content to show they can achieve their intended quality control unit oversight purpose.

For further reference regarding OOS test results, see the FDA guidance for industry, *Investigating Out-c Specification (OOS) Test Results for Pharmaceutical Production* at http://www.fda.gov/downloads/Drugs/.../Guidances/ucm070287.pdf.

CGMP consultant recommended

Based upon the nature and pervasiveness of the deviations we identified at your firm, we strongly recommend engaging a consultant qualified to evaluate your operations to assist your firm in meeting CGMP requirements. Your use of a consultant does not relieve your firm's obligation to comply with CGI Your firm's executive management remains responsible for fully resolving all deficiencies and ensuring ongoing CGMP compliance.

Quality agreement revisions recommended

Firms using contract testing laboratories must comply with CGMP. FDA is aware that many pharmaceut product manufacturers use independent contractors, such as production facilities, testing laboratories, packagers, and labelers. FDA regards these contractors as extensions of the manufacturer.

You and **(b)(4)** have a quality assurance agreement regarding the testing of your products. You are responsible for the quality of drugs you produce, regardless of agreements in place with your contract testing laboratory. You are required to ensure that drugs are made in accordance with section 501(a)(2) of the FD&C Act for safety, identity, strength, quality, and purity. See FDA's guidance document, *Contrac Manufacturing Arrangements for Drugs: Quality Agreements*, at http://www.fda.gov/downloads/drugs/guidancecomplianceregulatoryinformation/guidances/ucm35392

Data Integrity Remediation

Your quality system does not adequately ensure the accuracy and integrity of data to support the safety effectiveness, and quality of the drugs you manufacture. In response to this letter, provide the following.

A. A comprehensive investigation into the extent of the inaccuracies in data records and reporting. You investigation should include:

- A detailed investigation protocol and methodology; a summary of all laboratories, manufacturing
 operations, and systems to be covered by the assessment; and a justification for any part of your
 operation that you propose to exclude.
- Interviews of current and former employees to identify the nature, scope, and root cause of data inaccuracies. We recommend that these interviews be conducted by a qualified third party.
- An assessment of the extent of data integrity deficiencies at your facility. Identify omissions, alteration deletions, record destruction, non-contemporaneous record completion, and other deficiencies. Desc all parts of your facility's operations in which you discovered data integrity lapses.
- A comprehensive retrospective evaluation of the nature of the testing and manufacturing data integril
 deficiencies. We recommend that a qualified third party with specific expertise in the area where pote
 breaches were identified should evaluate all data integrity lapses.
- B. A current risk assessment of the potential effects of the observed failures on the quality of your drug: Your assessment should include analyses of the risks to patients caused by the release of drugs affected

a lapse of data integrity, and risks posed by ongoing operations.

- C. A management strategy for your firm that includes the details of your global corrective action and preventive action plan. Your strategy should include:
- A detailed corrective action plan that describes how you intend to ensure the reliability and complete of all of the data you generate, including analytical data, manufacturing records, and all data submitte FDA.
- A comprehensive description of the root causes of your data integrity lapses, including evidence that scope and depth of the current action plan is commensurate with the findings of the investigation and assessment. Indicate whether individuals responsible for data integrity lapses remain able to influenc CGMP-related or drug application data at your firm.
- Interim measures describing the actions you have taken or will take to protect patients and to ensure
 quality of your drugs, such as notifying your customers, recalling product, conducting additional testir
 adding lots to your stability programs to assure stability, drug application actions, and enhanced
 complaint monitoring.
- Long-term measures describing any remediation efforts and enhancements to procedures, processes methods, controls, systems, management oversight, and human resources (e.g., training, staffing improvements) designed to ensure the integrity of your company's data.
- A status report for any of the above activities already underway or completed.

Conclusion

Deviations cited in this letter are not intended as an all-inclusive list. You are responsible for investigatin these deviations, for determining the causes, for preventing their recurrence, and for preventing other deviations at all Badrivishal facilities.

If you are considering an action that is likely to lead to a disruption in the supply of drugs produced at you facility, FDA requests that you contact CDER's Drug Shortages Staff immediately, at drugshortages@fda.hhs.gov, so that FDA can work with you on the most effective way to bring your operations into compliance with the law. Contacting the Drug Shortages Staff also allows you to meet an obligations you may have to report discontinuances or interruptions in your drug manufacture under 21 U.S.C. 356C(a) and allows FDA to consider, as soon as possible, what actions, if any, may be needed to avoid shortages and protect the health of patients who depend on your products.

FDA placed your firm on Import Alert 66-40 on December 19, 2016.

Until you correct all deviations completely and we confirm your compliance with CGMP, FDA may withhapproval of any new applications or supplements listing your firm as a drug manufacturer.

Failure to correct these deviations may also result in FDA continuing to refuse admission of articles manufactured at Badrivishal Chemicals and Pharmaceuticals located at Gat No. 29, Village Jambwade (Induri) and Plot No. 13, Revenue Colony, Talegaon Dabhade, into the United States under section 801 (3) of the FD&C Act, 21 U.S.C. 381(a)(3). Under the same authority, articles may be subject to refusal o admission, in that the methods and controls used in their manufacture do not appear to conform to CGN within the meaning of section 501(a)(2)(B) of the FD&C Act, 21 U.S.C. 351(a)(2)(B).

After you receive this letter, respond to this office in writing within 15 working days. Specify what you ha done since our inspection to correct your deviations and to prevent their recurrence. If you cannot comp corrective actions within 15 working days, state your reasons for delay and your schedule for completion

Send your electronic reply to CDER-OC-OMQ-Communications@fda.hhs.gov or mail your reply to:

William Yang, Ph.D., Compliance Officer

U.S. Food and Drug Administration White Oak Building 51, Room 4359 10903 New Hampshire Avenue Silver Spring, MD 20993 USA

Please identify your response with FEI 3004058356.

Sincerely, /S/ Thomas J. Cosgrove, J.D. Director Office of Manufacturing Quality Office of Compliance Center for Drug Evaluation and Research