

November 20, 2018

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Division of Dockets Management (HFA-305)
Food and Drug Administration
5630 Fishers Lane
Room 1061
Rockville, Maryland 20852

Subject: Comments of USP on Insanitary Conditions at Compounding Facilities (Revised Draft Guidance); Docket Number FDA-2016-D-2268-0672

Dear Sir/Madam:

The United States Pharmacopeial Convention (USP) appreciates the opportunity to comment on the Food and Drug Administration's (FDA) revised draft guidance on "Insanitary Conditions at Compounding Facilities" (the revised draft Guidance).¹ We thank you for your earlier consideration of USP's comments on FDA's initial draft guidance. We offer general comments and technical considerations on the revised draft Guidance.

I. General comments

We appreciate FDA's efforts to define and identify insanitary conditions for purposes of compounding facilities and compounded preparations. USP shares with FDA a common public health mission and goal of improving patient safety across all medicines, including compounded preparations. USP works collaboratively with FDA, practitioners, and stakeholders on our compounding chapters and other compendial standards.

FDA's revised draft Guidance is an important part of the broader Federal-State framework to help ensure that quality compounded preparations are available to patients. Federal laws,² state authorities governing practitioners, and USP quality standards, shape this framework to support the quality of compounded preparations and related ingredients for patients in need of these medicines. We support appropriate risk-based enforcement discretion in the context of preserving patients' access to quality compounded preparations.

II. Technical considerations

USP recognizes the challenges faced by those entities trying to comply with FDA's revised draft Guidance, state requirements, and other applicable requirements, including USP General Chapters <795> and <797>. We have highlighted below a

¹ Docket No. FDA-2016-D-2268-0672: "Insanitary Conditions at Compounding Facilities." Available at: <https://www.regulations.gov/document?D=FDA-2016-D-2268-0672> (accessed November 6, 2018).

² See, e.g., FDCA 501(a)(2)(A)(insanitary conditions), 501(a)(1)(contaminated drugs), 502(e)(naming and identity), 501(b)(strength, purity, and quality), 502(g)(packaging and labeling); and 503A (pharmacy compounding).

few specific instances of inconsistencies between the revised draft Guidance, other applicable requirements, and USP General Chapter <797>. These inconsistencies may create confusion and complicate compliance by regulated entities. USP would welcome the opportunity to convene a dialog around these issues, particularly as we and the USP Expert Committee work to develop the final version of USP General Chapter <797>.

- **Lines 140 – 149:** USP agrees that hazardous drugs may require additional precautions to prevent cross-contamination. Given the multiple regulatory frameworks applicable to this category of drugs, however, USP recommends that FDA strike the term “highly potent drugs” from the list of examples, as the term is inconsistent with nomenclature used by other agencies and may be broadly interpreted, leading to confusion among regulated entities.
- **Lines 185-186 and 364-365:** the revised draft Guidance identifies performing aseptic manipulations outside of an ISO 5 area as a particularly serious condition. We recommend that FDA consider whether some allowance for administration and/or emergency situations should be included. The USP Expert Committee is currently working on defining the scope of “administration,” which may include situations where aseptic manipulations need to be performed outside of an ISO 5 area.
- **Lines 237-239:** the revised draft Guidance calls out as an example of an insanitary condition an ISO 5 area open to the surrounding area with minimal or no physical barriers separating it from non-aseptic activities. We recommend the example be noted with an asterisk to clarify that it does not apply to a segregated compounding area (SCA) as defined by the currently official USP General Chapter <797> *Pharmaceutical Compounding – Sterile Preparations*. In an SCA, there may not be a physical barrier, but a visual perimeter which establishes the boundaries of the SCA.

We appreciate the opportunity to provide these comments for your consideration, and again, we would welcome the opportunity to discuss these issues in further detail. We look forward to our continued work with the Agency, practitioners, and stakeholders to help ensure quality compounded preparations and the advancement of public health.

If you have questions or would like additional information regarding USP's comments, please contact Jeanne Sun, PharmD, Manager, Compounding, Healthcare Quality and Safety at jhs@usp.org or (301) 230-3361.

Sincerely,



Jaap Venema, Ph.D.
Executive Vice President and Chief Science Officer
United States Pharmacopeia

