

A Letter to the USP

Following is the text of a letter sent on September 7 by the SNM Committee on Pharmacopeia and the SNM Radiopharmaceutical Sciences Council to David W. Newton, PhD, Expert Committee on Parenteral Products—Compounding and Preparation, The United States Pharmacopeial Convention, Inc. (Rockville, MD) relating to concerns about aspects of USP General Chapter <797> “Pharmaceutical Compounding – Sterile Preparations.”

Dear Dr. Newton:

The Committee on Pharmacopeia, together with the Radiopharmaceutical Sciences Council, Society of Nuclear Medicine (SNM), wish to take this opportunity to comment on USP General Chapter <797> “Pharmaceutical Compounding—Sterile Preparation” (hereafter referred to as <797>).

Exemption of Radiopharmaceuticals from <797>

Through recent conversations with members of your committee, we have learned that consideration is being given to exempting radiopharmaceutical products approved by the Food and Drug Administration (FDA) from future revisions of <797>. As such, we would like to respectfully offer the following comments with regard to this proposed exemption:

We agree that all FDA-approved radiopharmaceutical products prepared in accordance with the manufacturer's package insert and administered within 12 hours of preparation should be exempt from <797>. We feel that this position is in the same spirit as the current standard issued by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) with regard to the exemptions for preparation of sterile products in a Class 100 (a.k.a. International Organization of Standardization [ISO] Class 5) environment. The JCAHO Standard MM.4.20 states that a laminar airflow hood or other Class 100 environment should be used “while preparing any intravenous (IV) admixture in the pharmacy, any sterile product made from non-sterile ingredients, or any sterile product that will not be used within 24 hours.” This statement can be interpreted to mean that sterile drug products, which will be used within 24 hours, do not necessarily need to be prepared in a Class 100 environment (i.e., recommended, but not required).

We agree that if it is necessary for an FDA-approved radiopharmaceutical product to have a beyond use time of greater than 12 hours, then that product will not be exempt from the provisions of <797>. We also agree that if the preparation of an FDA-approved radiopharmaceutical product deviates from the product labeling instructions in such a manner as to alter the potential risk of microbial contamination of the final product, then that product also should not be exempt from the provisions of <797>, even if it will be administered within 12 hours from preparation.

We agree that any extemporaneous preparation of non-FDA-approved radiopharmaceuticals should remain subject to the provisions of <797>. However, we feel that any extemporaneous preparation of a radiopharmaceutical that is performed due to the fact that the radiopharmaceutical is not obtainable from either a manufacturer or a commercial nuclear pharmacy due to product shortage, or in the event of a compassionate

usage should be exempt from the provisions of <797> for the sake of proper patient care.

Revision of Section Titled “Aseptic Technique, PROCESSING”

The second sentence of the section entitled “Aseptic Technique” under the main section titled “PROCESSING” should be revised as follows:

Aseptic technique is equally applicable to the preparation of sterile sensitizing and chemotoxic agents, as well as with regard to radiopharmaceuticals. However, it is essential to recognize that additional precautions must be utilized, as well as that the environmental and processing requirements must be modified in order to adequately protect personnel and the compounding environment from the potential adverse effects of these chemotoxic or radioactive products.

<823>

Section 121 of the Food and Drug Administration Modernization Act of 1997 (FDAMA) requires compliance with provisions of the USP monographs and other general requirements that specifically apply to the compounding of positron emission tomography (PET) drugs, particularly USP General Chapter <823> “Radiopharmaceuticals for Positron Emission Tomography—Compounding” (<823>). Since the approval of <797>, it has become apparent that some State Boards of Pharmacy are perplexed as to which USP General Chapter (i.e., <823> or <797>), is applicable to the compounding of PET radiopharmaceuticals. These State Boards of Pharmacy are, in fact, requiring that <797> should also be applied to PET radiopharmaceuticals. We recommend that, since <823> is recognized within a congressional act (i.e., FDAMA), that a clause be inserted into <797> to specify <823> as the appropriate set of requirements to be used in compounding PET radiopharmaceuticals.

Thank you very much for your kind consideration of our concerns. If you have any questions or need additional information regarding this matter, please do not hesitate to let us know (jhung@mayo.edu for Joseph Hung and hfvanbrocklin@lbl.gov for Henry VanBrocklin).

Sincerely yours,

Joseph C. Hung, PhD, BCNP

Chair, Committee on Pharmacopeia*, SNM

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