# 21st century manufacturing of injectable pharmaceuticals

This infographic explores the factors changing the development and production of sterile injectables.

## The need for greater manufacturing agility

With growing competition and smaller patient populations, companies are driving to be first to clinic or market. Flexibility is a must for different therapy types and containers.



### **Overall trends:**

- Number of therapies
- Product launches
- Container variety
- Regulatory demands for modernizing manufacturing
- Shorter product lifecycles and increased competition



therapies in late-stage clinical development (1), **yet only...** 



of drug shortages caused by manufacturing and quality issues (3)

### \$356B

### 46

novel therapies on average approved by CDER annually from 2014 through 2023 (2)

of worldwide branded sales at risk from patent expiration in 2023 to 2028 (4)

### **Issues with conventional fill-finish**

Today's therapies are more complex, but many people are using the same approaches and equipment from 20 years ago – with the same aseptic issues.

### **Built for blockbusters:**

High throughput, slow changeover, single container format

Inflexible, long build timelines, high costs, hard to replicate

**Custom designs:** 

#### Aseptic issues:

Glove ports, operator interventions, particle generation



What's next for filling equipment? It must provide exceptional sterility assurance, comply with global regulatory requirements, and drive process repeatability and reproducibility via automation.

## How to modernize fill-finish

### The aseptic filling workcell approach

#### The workcell approach is well-suited for

- Oncology cytotoxics, antibody drug conjugates (ADCs), monoclonal antibodies
- 2. Novel biologics and biosimilars
- 3. Any high-mix, multi-product facility: (e.g., contract manufacturing organizations for clinical and small-scale commercial fill-finish or generics)
- 4. Drugs of the future, including gene therapies and personalized medicines

### **Key benefits**

- **1. Supports speed to market:** Build and scale out quickly. Provides ready, flexible manufacturing capacity for fill-finish.
- 2. Meets needs of low-volume, high-value pipelines: Delivers flexibility for vials, syringes, and cartridges with fast changeover.
- **3. Fixes aseptic processing issues** with gloveless robotic approach.
- **4. Uses a standard design** for fast build, deployment, and validation. Reduces infrastructure, floor space, and personnel requirements compared with conventional isolators.





An integrated combination of gloveless isolator and filling robotics, which provides a high level of aseptic assurance and quality for high-value therapies.

### Conventional filling technology path

### The Cytiva aseptic filling workcell path





### Key differences vs conventional systems

Scale out, not up, with additional workcells.

### Add capability for new recipes through software changes. Much smaller space needed compared with conventional isolators.

Focus on value-added work: Uses only nested, ready-to-use containers.



Image courtesy of Stevanato Group.

**Press-fit vial closures:** Simplify capping and eliminate particles vs aluminum crimp caps.



Image courtesy of ARaymondlife.

CDER is Center for Drug Evaluation and Research, US Food and Drug Administration.

#### References

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