July 15, 2021

Case #: 598915

VIA UPS

Ernesto F. Garza-Gongora, Pharm. D
Owner/Pharmacist-in-Charge
Inventive Infusion Solutions, LP
18866 Stone Oak Parkway, Suite 101A
San Antonio, Texas 78258-4181

Dr. Garza-Gongora:

From August 20, 2018, to August 31, 2018, a U.S. Food and Drug Administration (FDA) investigator inspected your facility, Inventive Infusion Solutions, LP, located at 18866 Stone Oak Parkway, Suite 101A, San Antonio, Texas 78258. During the inspection, the investigator noted deficiencies in your practices for producing sterile drug products, which put patients at risk.

FDA issued a Form FDA 483 to your firm on August 31, 2018. FDA acknowledges receipt of your facility's response, dated September 25, 2018. Based on this inspection, it appears that you produced drug products that violate the Federal Food, Drug, and Cosmetic Act (FDCA).

A. Compounded Drug Products Under the FDCA

Section 503A of the FDCA describes the conditions under which human drug products compounded by a licensed pharmacist in a State licensed pharmacy or a Federal facility, or a licensed physician, qualify for exemptions from three sections of the FDCA: compliance with current good manufacturing practice (CGMP) (section 501(a)(2)(B)); labeling with adequate directions for use (section 502(f)(1)); and FDA approval prior to marketing (section 505) [21 U.S.C. §§ 351(a)(2)(B), 352(f)(1) and 355(a)].[1] Receipt of valid prescriptions for individually-identified patients is one of the conditions for the exemptions under section 503A.

B. Violations of the FDCA

[1] We remind you that there are conditions other than those discussed in this letter that must be satisfied to qualify for the exemptions in section 503A of the FDCA.

U.S. Food & Drug Administration
Office of Pharmaceutical Quality Operations, Division II
1201 Main Street, Suite 7200
Dallas, Texas 75203
www.fda.gov

Adulterated Drug Products

The FDA investigator noted that drug products intended or expected to be sterile were prepared, packed, or held under insanitary conditions, whereby they may have become contaminated with filth or rendered injurious to health, causing your drug products to be adulterated under section 501(a)(2)(A) of the FDCA [21 U.S.C. § 351(a)(2)(A)]. For example, the investigator observed that:

1. Your firm lacked assurance that the (b) (4) cycle parameters utilized to sterilize pellet drug products are adequate.

2. Your firm indefinitely stored depyrogenated glassware and equipment inside the (b) (4) which is located in the unclassified area.

3. Your cleanroom contained visible gaps between the HEPA filter grate panel and the ceiling panel frame, and between the ceiling panel and the wall panel.

4. Your firm used non-sterile disinfecting agents in the ISO 5 classified areas.

5. Your firm produced drug products with components, containers, or materials that had not been verified to assure that they did not contribute endotoxin contamination that may be objectionable given the product's intended use.

6. Your firm's aseptic operator was observed with exposed facial skin inside the ISO 5 classified area during cleaning.

7. Your firm aseptically processed beta-lactam drug products in the same ISO 5 hoods as other non-beta-lactam drug products with inadequate controls to reduce the risk of cross contamination.

It is a prohibited act under section 301(k) of the FDCA [21 U.S.C. § 331(k)] to do any act with respect to a drug, if such act is done while the drug is held for sale after shipment in interstate commerce and results in the drug being adulterated.

C. Corrective Actions

We have reviewed your firm's response to the Form FDA 483, dated September 25, 2018.

Regarding the insanitary condition observations in the Form FDA 483, we cannot fully evaluate the adequacy of the following corrective actions described in your response because you did not include sufficient information or supporting documentation:

1. In your response regarding pellet sterilization, your firm committed to implementing several corrective actions, including engaging with a vendor "to validate the sterilization cycle of the (b) (4) for effectiveness, specific to the load used." However, your firm has not submitted supporting documentation such as updated procedures (SOP 8.010 & 8.020 for "sterilization and utilization of biological indicators"), biological indicator results that were subjected to the same pellet conditions (container closure), (b) (4) validation results, validation results of the pellet sterilization cycle, training material, and training records.

   Furthermore, we are unable to fully evaluate your response as you did not provide adequate scientific justification for the (b) (4) cycle used to (b) (4) sterilize implantable pellets, including consideration of (b) (4) penetration into the container closure and the pellets themselves. We acknowledge your commitment to place biological indicators "…inside the identical closure system used to house pellets" during the sterilization cycle. However, we remain concerned about the lack of assurance that (b) (4) can penetrate the pellets. For pellets (b) (4) sterilized using an (b) (4) the Agency notes that the pellets have a low moisture content, and the lack of water significantly slows the sterilization process.

2. In your response regarding depyrogenation of glassware and equipment, you have not submitted the completed (b) (4) validation, results of the hold time study, updated depyrogenation policy, training material, and training records.

3. In your response regarding gaps that were observed in your cleanroom, you have not submitted photos and evidence of the completion of repairs (e.g., invoices of work performed), recertification reports of the cleanroom post-repairs, training material, and training records.

Please be aware that section 501(a)(2)(A) of the FDCA concerning insanitary conditions applies regardless of whether drug products you compound meet the conditions of section 503A.

During the inspection, the investigator observed that on at least some occasions your facility compounded the following drug products: testosterone for injection, testosterone for implantation, hydroxyprogesterone caproate for injection, and chorionic gonadotropin for injection. These compounded drug products had the same active pharmaceutical ingredients (APIs) in the same, similar, or easily substitutable strengths as commercially available drug products. Furthermore, the commercially available drug products can be used by the same route of administration prescribed for the compounded drug products. In addition, the prescriptions for these compounded drug products did not contain information to establish that the prescriber determined that any changes between the compounded drug products and the commercially available drug products would produce a significant difference for the identified individual patient. Accordingly, it

appears that some of the drugs you compounded were essentially a copy of a commercially available drug product. During this inspection, FDA did not determine whether you compound such drugs regularly or in inordinate amounts. Please note that one of the conditions for a compounded drug product to qualify for the exemptions under section 503A is that the licensed pharmacist or licensed physician "does not compound regularly or in inordinate amounts (as defined by the Secretary) any drug products that are essentially copies of a commercially available drug product" (section 503A(b)(1)(D) of the FDCA) [21 U.S.C. § 353a(b)(1)(D)].[2] For more information on the "essentially a copy" condition, please see FDA's guidance, "Compounded Drug Products That Are Essentially Copies of a Commercially Available Drug Product Under Section 503A of the Federal Food, Drug, and Cosmetic Act."

D. Conclusion

The violations cited in this letter are not intended to be an all-inclusive statement of violations at your facility. You are responsible for investigating and determining the causes of any violations and for preventing their recurrence or the occurrence of other violations. It is your responsibility to ensure that your firm complies with all requirements of federal law, including FDA regulations.

Within thirty (30) working days of receipt of this letter, please notify this office in writing of the specific steps that you have taken to address any violations. Please include an explanation of each step being taken to prevent the recurrence of any violations, as well as copies of related documentation. If you do not believe that the products discussed above are in violation of the FDCA, include your reasoning and any supporting information for our consideration. If you cannot completely address this matter within thirty (30) working days, state the reason for the delay and the time within which you will do so.

Your written notification should refer to case # 598915.

Please electronically submit your reply, on company letterhead, to Jamillah Selby, Compliance Officer, at ORAPHARM2_RESPONSES@fda.hhs.gov. In addition, please submit a signed copy of your response to CO and/or DCB email address(es).

If you have questions regarding the contents of this letter, you may contact Jamillah Selby via phone at 214.253.5218 or email at jamillah.selby@fda.hhs.gov.

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[2] For purposes of section 503A(b)(1)(D), "the term 'essentially a copy of a commercially available drug product' does not include a drug product in which there is a change, made for an identified individual patient, which produces for that patient a significant difference, as determined by the prescribing practitioner, between the compounded drug and the comparable commercially available drug product." Section 503A(b)(2) of the FDCA [21 U.S.C. § 503A(b)(2)].

Sincerely,

Monica R. Maxwell -S

Digitally signed by Monica R. Maxwell -S
DN: c=US, o=U.S. Government, ou=HHS, ou=FDA, ou=People, 0.9.2342.19200300.100.1.1=1300060034, cn=Monica R. Maxwell -S
Date: 2021.07.15 07:10:31 -05'00'

Monica R. Maxwell
Program Division Director
Office of Pharmaceutical Quality Operations, Division II

Cc: Allison Vordenbaumen Benz, Exe. Dir Texas State Board of Pharmacy
Allison.Benz@pharmacy.texas.gov