



WHO GUIDELINES ON cGMP

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ABSTRACT

Good Manufacturing Practices (GMP) serve as the fundamental framework for quality management in the pharmaceutical industry. This review examines the World Health Organization (WHO) guidelines on cGMP, which are designed to minimize inherent risks in pharmaceutical production—specifically cross-contamination and false labeling. Unlike final product testing alone, cGMP integrates quality into every stage of the manufacturing process, from raw material procurement to final distribution. Key components explored include personnel training, facility design, equipment maintenance, and rigorous documentation. By analyzing the main principles of WHO Technical Report Series (TRS), this paper highlights how adherence to these international standards ensures that medicinal products are safe, efficacious, and of high quality, thereby safeguarding global public health.

INTRODUCTION

The WHO cGMP framework provides a comprehensive system for managing the entire manufacturing lifecycle of pharmaceuticals, including active pharmaceutical ingredients (APIs), biologics, and sterile products. It establishes minimum requirements for:

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- **Quality Management:** Implementing a robust Pharmaceutical Quality System (PQS) that integrates GMP and Quality Risk Management (QRM).
- **Personnel:** Ensuring an adequate number of qualified staff who receive regular training and maintain high standards of personal hygiene.
- **Premises and Equipment:** Designing and maintaining facilities to prevent contamination and allow for effective cleaning and calibration.
- **Documentation:** Maintaining a traceable "paper trail," including Standard Operating Procedures (SOPs) and Batch Manufacturing Records (BMR), as if a process isn't documented, it effectively "didn't happen".
- **Production and Quality Control:** Ensuring manufacturing processes are validated and that an independent Quality Control unit tests all materials and finished products before release.

1. Fundamental Quality Systems

Fundamental Quality Systems in WHO cGMP

According to the WHO TRS 986 Annex 2 (2014), the fundamental systems that form the backbone of a compliant pharmaceutical quality framework include:

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- **Pharmaceutical Quality System (PQS):** A comprehensive system encompassing all factors that individually or collectively influence the quality of a product. It includes Good Manufacturing Practices (GMP) and Quality Risk Management.
- **Quality Risk Management (QRM):** A systematic process for the assessment, control, communication, and review of risks to the quality of the medicinal product throughout its lifecycle.
- **Personnel & Training:** A system ensuring that there are sufficient qualified and trained personnel with clear roles and responsibilities to carry out all tasks for which the manufacturer is responsible.
- **Documentation & Record-Keeping:** Often summarized by the principle "if it isn't written down, it didn't happen." This includes Standard Operating Procedures (SOPs), batch records, and specifications.
- **Premises & Equipment Management:** Systems for the design, maintenance, and calibration of facilities and equipment to prevent cross-contamination and ensure consistent performance.
- **Qualification & Validation:** A documented program providing high assurance that a specific process, method, or system will consistently produce results meeting predetermined acceptance criteria.
- **Self-Inspection & Quality Audits:** Regular internal assessments to monitor the implementation and compliance with GMP and to propose necessary corrective measures.
- **Complaints & Product Recalls:** A system to record and review complaints and a procedure to rapidly and effectively recall products known or suspected to be defective from the market.

**Key Differences: Traditional vs. QbD Approach**

Feature	Traditional "Quality by Testing"	Holistic "Quality by Design"
Primary Goal	Meeting fixed specifications through end-product testing.	Designing processes to consistently deliver desired performance.
Risk Management	Reactive; occurs after a failure is detected.	Proactive; identifies risks during development to prevent failures.
Control Strategy	Primarily focused on testing the final batch.	In-process monitoring (PAT) and control of critical parameters.
Regulatory Change	Any change often requires prior regulatory approval.	Flexible operation within a pre-approved "Design Space".

2. Operational Controls**1. Detailed Production Operations**

- **Adherence to Master Records:** Every production step must strictly follow the **Master Manufacturing Formula (MMF)** and **Master Packaging Instructions (MPI)**. Any deviation must be formally documented, investigated for impact on product quality, and approved by the Quality Unit before proceeding.
- **Environmental Monitoring:** In areas where products are exposed (e.g., weighing or filling), parameters like temperature, humidity, and air pressure differentials must be continuously monitored and logged to prevent product degradation or contamination.
- **Hold-Time Studies:** Manufacturers must establish and validate "hold times" for intermediate and bulk products to ensure they remain stable and uncontaminated before the next processing stage.

2. Line Clearance & Setup Procedures

- **Verification Checklist:** Line clearance must follow a written Standard Operating Procedure (SOP) and a checklist. Verification typically requires **dual-signing** by the operator and a Quality Assurance (QA) supervisor to confirm the area is free of:
 - Leftover product or raw materials from previous batches.
 - Incorrect or obsolete labels and printed packaging materials.
 - Previous batch documentation and waste.
- **Reconciliation:** A quantitative comparison between the amount of materials issued and the amount used, wasted, or returned. Significant discrepancies must be investigated as they often indicate a mix-up or equipment failure.

3. Prevention of Cross-Contamination

WHO emphasizes a risk-based approach to contamination control, especially in multi-product facilities:

- **Technical Controls:**
 - **HVAC Systems:** Use of specialized air filtration (HEPA) and pressure differentials (usually positive pressure in production rooms) to prevent the entry of outside contaminants.
 - **Closed Systems:** Using vacuum transfers or "Clean-in-Place" (CIP) and "Steam-in-Place" (SIP) technologies to minimize human and environmental exposure.
- **Organizational Controls:**
 - **Campaign Production:** Producing multiple batches of the same product in a single run before a full cleaning validation is required.
 - **Dedicated Equipment:** High-risk products (e.g., certain steroids, cytotoxic drugs, or antibiotics) often require dedicated facilities or equipment to eliminate cross-exposure risks.

4. Sanitation and Personal Hygiene

- **Cleaning Validation:** Cleaning procedures for non-dedicated equipment must be validated to prove they effectively remove residues below toxicological or pharmacological safety limits (Health-Based Exposure Limits or HBELs).
- **Gowning Requirements:** Personnel must use protective clothing (non-shedding suits, gloves, masks) tailored to the specific grade of the production area. For high-potency drugs, dedicated personal protective equipment (PPE) is mandatory to prevent personnel from acting as a contamination vector.

3. Production & Supply Chain

WHO guidelines on Current Good Manufacturing Practices (cGMP) establish a rigorous framework for the entire lifecycle of a pharmaceutical product. Below is a more detailed expansion focusing on Production and Supply Chain operations:

1. Production Operations & Quality Systems

WHO defines production as all operations involved in the preparation of a pharmaceutical product, starting from the receipt of raw materials to the completion of the finished product.



- **Process Validation & Control:** All manufacturing processes must be clearly defined, systematically reviewed, and proven capable of consistently producing products that meet specifications.
- **Contamination Prevention:** Strict controls must be in place to prevent cross-contamination (e.g., dedicated facilities for hazardous substances) and mix-ups during labeling or packaging.
- **Standard Operating Procedures (SOPs):** Every step, including cleaning, sanitation, and environmental monitoring, must be documented in authorized, written SOPs.
- **Qualified Personnel:** Production must be supervised by personnel with the necessary qualifications and practical experience.
- **In-Process Controls:** Testing must be conducted at various stages of production (e.g., weighing, mixing, filling) to monitor performance and ensure the process remains within defined parameters.

2. Supply Chain & Distribution (GSDP)

The supply chain must maintain product integrity from the manufacturer to the end-user. This is often governed by Good Storage and Distribution Practices (GSDP).

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- **Supplier Qualification:** Manufacturers must only procure materials from approved and regularly audited suppliers.
- **Storage Conditions:** Products must be stored in well-ventilated, clean areas under strictly controlled temperatures (e.g., 2–8°C for refrigerated items, 15–25°C for controlled room temperature).
- **Traceability & Records:** Every shipment must have detailed records including batch numbers, expiry dates, and dispatch dates to ensure rapid and effective recalls if a defect is found.
- **Transportation:** Vehicles and equipment used for distribution must be suitable for the products, ensuring they are not exposed to conditions that could compromise their safety or quality.
- **Outsourced Activities:** Any contract manufacturing or distribution must be governed by a written contract that clearly defines the responsibilities of each party regarding quality.

WHO GMP Guidelines: Supply Chain

The supply chain under GMP ensures the integrity of materials and finished products from the source to the patient.

- **Supplier Qualification & Approval:** Manufacturers must qualify suppliers of starting materials (active substances and excipients) and packaging materials.
- **Documentation of Chain of Custody:** The entire supply chain must be documented and verified for each active substance, back to the manufacturer of the starting materials.
- **Storage and Handling:**
 - Warehouse areas must maintain appropriate temperature and humidity (e.g., cold chain monitoring).
 - Storage must follow "First Expired, First Out" (FEFO) or "First In, First Out" (FIFO) principles.
- **Transportation & Distribution:**
 - Vehicles and containers must maintain conditions that prevent degradation or contamination.
 - Products must be handled in a way that minimizes contamination risks.
- **Returns, Recalls, and Complaints:**
 - Returned products must be assessed by Quality Assurance (QA) before being returned to stock.
 - A robust, documented recall procedure must be in place to stop distribution of defective products.

Materials Management

- **Supplier Approval:** All materials (starting, intermediate, and packaging) must only be purchased from suppliers evaluated and approved by the Quality unit.
- **Quarantine and Release:** Upon receipt, materials must be kept in **quarantine** (physical or electronic) and cannot be used until they are sampled, tested, and formally released by Quality Control.
- **Storage and Segregation:** Materials must be stored under appropriate conditions (temperature, humidity) as specified by the manufacturer. Rejected, recalled, or returned materials must be stored in separate, secure, and clearly marked areas.
- **Traceability:** Each batch of material must be assigned a unique reference number to ensure full traceability throughout the production and distribution process.
- **Handling Precautions:** Materials stored in containers like drums or bags should be kept off the floor (e.g., on pallets) and cleaned before opening to prevent contamination.

4. Documentation & Data Integrity

- **Good Documentation Practices (GDocP):** Ensuring records are Attributable, Legible, Contemporaneous, Original, and Accurate (ALCOA+).
- **Standard Operating Procedures (SOPs):** The importance of written instructions for every critical step.

**5. Specialized WHO Annexes (Advanced Topics)**

- **HVAC Systems:** Specific WHO requirements for air handling in non-sterile vs. sterile manufacturing.
- **Water Systems:** Standards for Purified Water (PW) and Water for Injection (WFI).
- **Technology Transfer:** Guidelines for moving a process from R&D to full-scale production.

6. Global Context

- **The WHO TRS (Technical Report Series):** Understanding how to navigate different report numbers (e.g., TRS 986, 1010).
- **WHO vs. USFDA/EU GMP:** A brief comparison of global harmonisation efforts.

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8. WHO Good Manufacturing Practices for Pharmaceutical Products: Main Principles (TRS 986, Annex 2, 2014).
9. WHO Points to Consider when Including Health-Based Exposure Limits (HBELs) in Cleaning Validation (TRS 1033, Annex 2).
10. WHO Supplementary Guidelines on Good Manufacturing Practice: Validation (TRS 1019, Annex 3).
11. TRS 986 - Annex 2: WHO good manufacturing practices for pharmaceutical products: main principles (Provides the foundational principles for cGMP).
12. TRS 1025 - Annex 7: Good storage and distribution practices for medical products (Focuses on supply chain integrity and distribution).
13. TRS 1019 - Annex 3: WHO good manufacturing practices: guidelines on validation (Details the requirements for validating production processes).
14. WHO Technical Report Series, No. 986, Annex 2: WHO good manufacturing practices for pharmaceutical products: main principles (Covers the core principles of managing starting materials and packaging).
15. WHO Technical Report Series, No. 1025, Annex 7: Good storage and distribution practices for medical products (Focuses on the handling, storage, and movement of materials within the supply chain).