

**QBD: A NEW ERA OF PHARMACEUTICAL DRUG DEVELOPMENT**

Divyesh Sharma\*, Khushbu Patel and Dr. C. N. Patel

Department of Pharmaceutical Quality Assurance, Shri Sarvajani Pharmacy College, Gujarat Technological University, Arvind Bag, Mehsana-384001, Gujarat, India.

**\*Corresponding Author: Divyesh Sharma**

Department of Pharmaceutical Quality Assurance, Shri Sarvajani Pharmacy College, Gujarat Technological University, Arvind Bag, Mehsana-384001, Gujarat, India.

Article Received on 20/03/2021

Article Revised on 10/04/2021

Article Accepted on 30/04/2021

**ABSTRACT**

Quality by design (QbD) is a critical component of today's pharmaceutical quality advancements. QbD is the most effective way to ensure that all pharmaceutical products are of high quality. This paper discusses Pharmaceutical Quality by Design (QbD) and how it can be used to ensure the quality of pharmaceutical analysis. It is critical to define desired product output report under this definition of being in the design and growth of the product. Identify important quality attributes and establish a target product profile (TPP) and a quality target product profile (QTPP). To understand how raw material critical material attributes (CAM) and critical process parameters (CPP) affect CQAs, as well as to identify and monitor sources of changeability. The ICH Guidelines are the cornerstone of Quality by Design. It is based on the International Conference on Harmonization (ICH) Guidelines Q8 for pharmaceutical production, Q9 for quality risk management, and Q10 for pharmaceutical quality systems.

**KEYWORDS:** Quality by design, Pharmaceutical Analysis, Critical Quality Attributes, Risk Assessment, Design of Experiment Regulatory.

**INTRODUCTION****Quality**

Quality refers to a product's "suitability or standard for intended use," and includes characteristics like potency, purity, and identity.<sup>[1]</sup>

Raise in the governing hurdles for the accordance of new molecular objects, patent terminations and enlarged healthcare costs have lead to in more focus in the charges connected with the manufacturing and development of pharmaceuticals. It has been valued that several pharmaceutical processes operate at 2.5 – 4.5 sigma quality levels, but source intensive pharmaceutical concern quality systems achieve 5 sigma quality levels by arrangement, alternative, and so on to prevent faulty product leaving the workshop. During the heydays of the pharmaceutical business, there was minor focus on the yields, number of faults, etc., and the quality administrations of the companies were more focused on obedience based on inspection of the final products. Most of the invention development tended to be iterative and empirically designed. Thus, changes were determined by the need to modify the process during scale-up or due to the formulation deteriorating to meet the desired shelf life of the product. During phase 3, changes were kept to a lowest to avoid the need for exclusive bioequivalence studies to bridge between the CTM and the viable product. Thus, manufacturing processes were fixed and the excellence of the product was measured by end product testing. In this case,

quality is not made in to the product and is accomplished by end product testing. This approach is ineffective and does not facilitate constant improvement. In the past, there also existed a notion that the regulatory processes and requirements barred manufacturing developments, which in turn prevented the renewal of the pharmaceutical industry. The initiation of the cGMPs for the 21st Century Creativity. and the publication of the PAT guidance<sup>[3]</sup> in 2004 by the FDA paved the way for the innovation of the pharmaceutical industry. In July 2003, experts from the three regional groups working on quality issues within ICH developed a structure for a future pharmaceutical quality system. This description recognises that this initiative will support regulatory activities by allowing them to better prioritise and distribute resources, and patients will benefit from increased access to drugs and improved quality as a result of this initiative.<sup>[2]</sup>

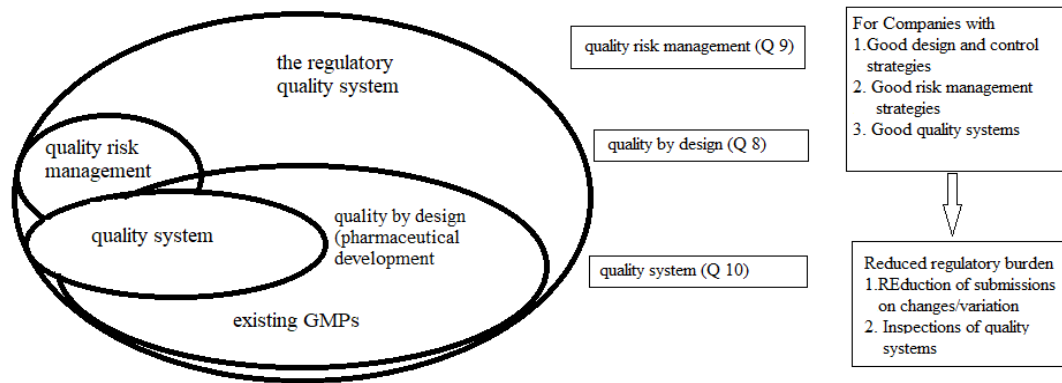


Figure 1: ICH vision for the future pharmaceutical quality system.

“Quality by design (QbD),” although a new idea to the pharmaceutical industry, is a annoyed and tested concept that has been in survival for quite a few years and has been broadly applied in the automotive, the semiconductor, and the petrochemical industry. Juran and Deming extensively documented the idea of building quality into goods. The popular theme running across all of the interventions is "scheduling for quality," or "building quality into the product" as opposed to the conventional paradigm of "checking for quality." Quality planning, quality management, and quality growth are three important aspects of quality planning according to the Juran trilogy definition. Quality planning is the process of identifying a customer's needs and designing a product and process to satisfy those needs.<sup>[3]</sup>

**ENABLERS OF QUALITY BY DESIGN**

The main enablers of QbD are information management and quality risk management. They play an important role in the growth and implementation of QbD. They aid in the realisation of a product, its launch and

maintenance of control, and, finally, continuous improvement.

**Quality Risk Management**

For the growth and application of QbD, QRM is a critical enabler. It allows capitals to be focused on the perceived serious areas that affect invention and method during growth. It's one of the tools that enables you to be proactive in identifying, measuring, and managing potential quality risks.<sup>[4]</sup>

**ELEMENTS OF QUALITY BY DESIGN ICH Q8(R2)**

The fundamentals of quality by design are covered in Pharmaceutical Growth. These, along with the enablers, form the foundation for the QbD development approach. In pictographic form, Figure 2 depicts the typical elements of QbD. This segment delves into each of the components in depth and shows how they're used in managed release items.

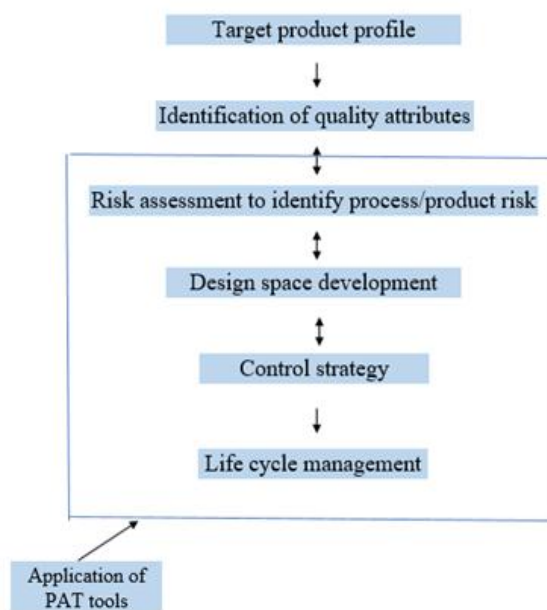


Figure 2: Elements of quality by design.

**Quality Target Product Profile (QTPP)****Essential Elements**

- Quality characteristics: sterility, purity etc. (including specific safety-related impurities where necessary)
- Pharmacokinetic characteristics: dissolution etc.
- Therapeutic effect
- Target patient population: neonate, adult etc., clinical diagnosis
- Shelf life: temperature, light conditions etc.

**Desired Elements**

- Dosage form: liquid for injection, solid tablet etc.
- Route of administration: oral, IV, IM, SC
- Clinical setting: self or clinic administration
- Primary/secondary packaging: glass or plastic vial/syringe; blister packaging etc.

**Identification of Critical Quality Attributes****Critical Quality Attributes (CQA)**

Method characteristics and method parameters are included in CQA for analytical methods. Different critical quality characteristics apply to each analytical

approach. Diluent, Mobile phase buffer, pH, column choice, organic modifier, and elution method are all key quality characteristics in high performance liquid chromatography. oven temperature, Gas flow and programme, injection temperature, sample diluent, and concentration are all important quality characteristics in gas chromatography processes. polarity, boiling point, Solubility, charged functional groups, pH value and solution stability are all essential quality characteristics for analytical method growth that can be defined by the nature of impurities and DS.

**Risk Assessment**

Risk evaluation is a science-based technique that can understand material properties and process parameters and is used in quality risk management. Risk assessment may be done at any point in the method creation process, from the beginning to the end. Analytical quality by design includes defining threats early on in the process, then designing adequate mitigation plans in accordance with regulator strategies. The Ishikawa fishbone diagram can be used to define and measure risks in general.<sup>[5]</sup>

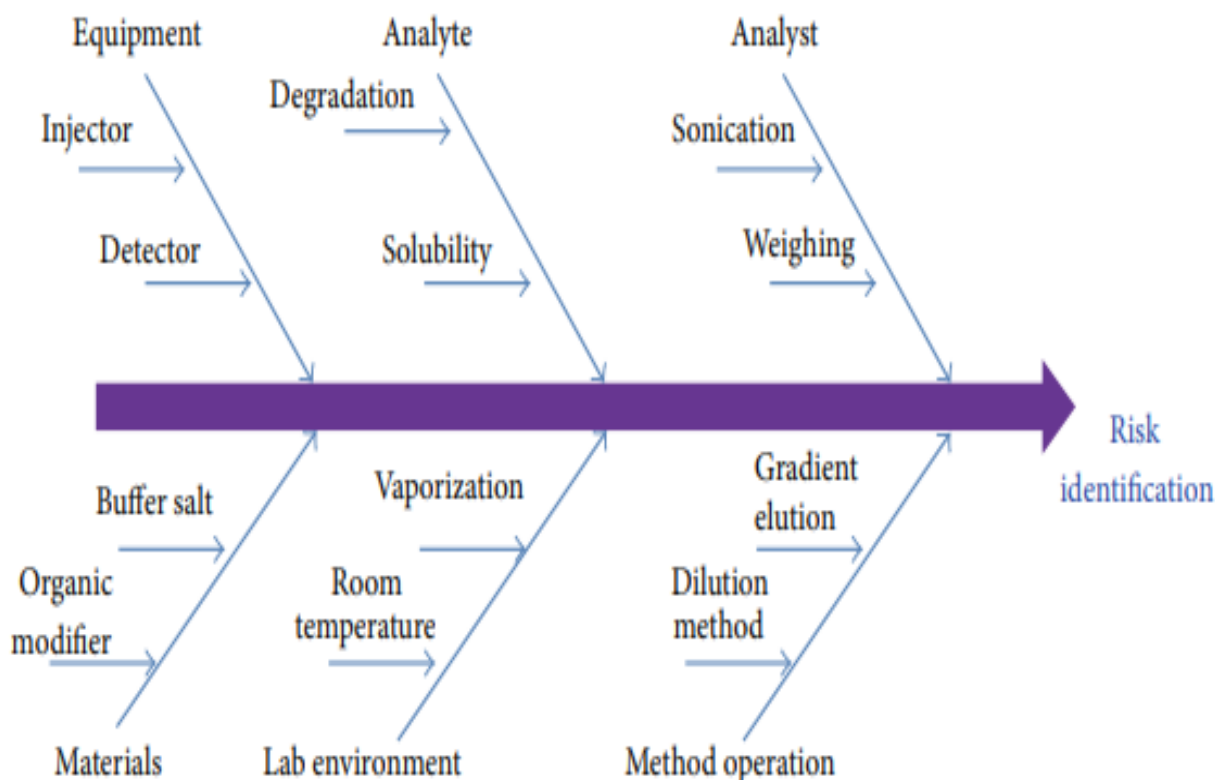


Figure 3: Fishbone diagram.

**Design of Experiments (DoE)**

Design of experiments may be used to sanction and modify important process variables based on statistical significance.

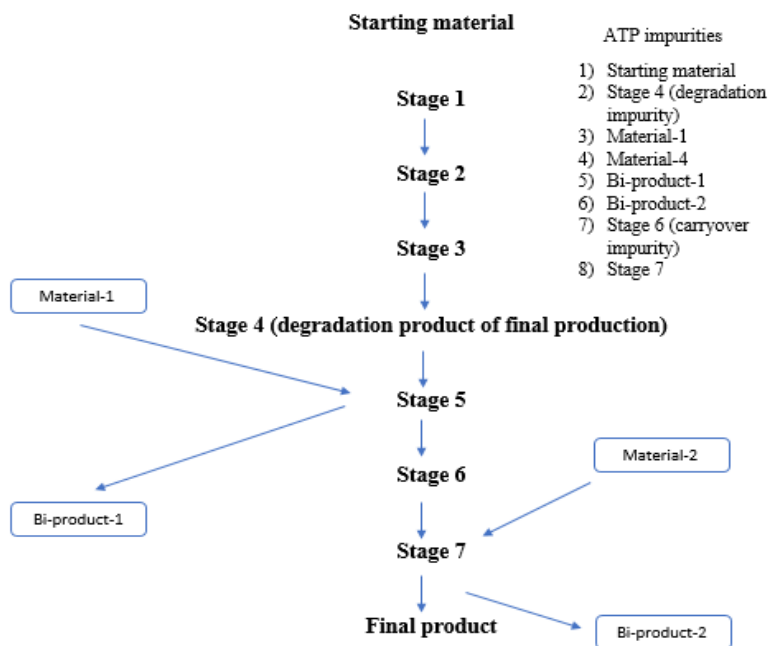


Figure 4: analytical QbD relation with synthetic development.

It can be measured per-unit-phase or as a combination of multiple system variables, their interactions, and responses. This method is an excellent way to test a large number of scenarios with a small number of trials. Then, based on the results, identify extreme method variables as well as the required optimal ranges for method variables where a robust region for the crucial method attributes can be obtained using statistical methods. Robustness is described by the ICH Q8 as a process' ability to withstand material variability, as well as

changes in the process and equipment, without sacrificing performance. The drug constituent artificial process robustness, impurity profile, physicochemical properties, process ability, and stability will be influenced by the initial materials properties. By analysing various operating conditions, weights, and equipment, process comprehension can provide appropriate information for evaluating robustness parameters.<sup>[6]</sup>

Serial number	Method requirements for impurity profile
1	Number of analytes (API and impurities)
2	Separation of all analytes
3	Mobile Phase (buffer and organic modifier)
4	Elution method (gradient or isocratic)
5	Sample concentration
6	Sample diluent
7	Sample solution stability
8	Sample preparation process (dilution process and sonication time, etc.)
9	Filter or centrifuge
10	Impurity specification limits
11	Column type (stationary phase and dimensions)
12	Detection (UV/RID/ELSD)
13	RRT, RRF establishment
14	Flow rate
15	Injection volume
16	Column oven temperature
17	Runtime
18	System suitability parameters selection with limits
19	LOD and LOQ concentrations establishment
20	Impurities calculation method
21	Recovery establishment

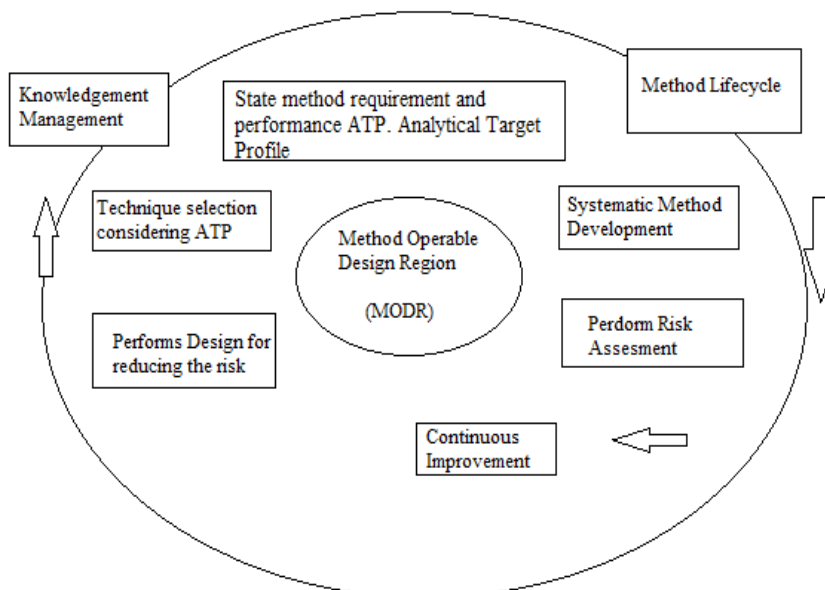
Figure 5: Method requirements for impurity profile.

**Analytical quality by design Method Validation**<sup>[7-19]</sup>

The validation of analytical methods through a variety of API sets is referred to as analytical consistency by design method validation.<sup>[7]</sup> It creates process validity for all forms of API manufacturing changes without revalidation by combining design of experiments and MODR specifics.<sup>[8]</sup> The approach includes details on relations, measurement uncertainty, and control technique, as well as the ICH validation fundamentals.<sup>[9]</sup> This method necessitates more resources than the conventional validation method while retaining high quality.<sup>[10]</sup>

There are a number of approaches and options for method construction, according to Reid et al, including

the use of different types of software, stationary stages, columns, and so on.<sup>[11]</sup> No single approach, they say, is "correct," but a more efficient approach will have a better understanding of the separation space and process robustness faster than less organised approaches.<sup>[12]</sup> The most important factor to consider is that the implementation method must be suitable for the proposed purpose, as demonstrated by method creation, and that method performance must be checked as required. The system specifications must be defined in detail, and these parameters are used to create a method that satisfies the program's requirements. As seen in the diagram below, they proposed a work flow for analytical consistency by design.<sup>[13]</sup>



**Figure 6: A QbD workflow by George L. Reid (Pfizer USP).**

In an AqBd setting, the following 5 steps are used to establish analytical methods:

- ❖ **First step-** It defines ATP by displaying the method requirements and performance criteria. A suitable instrument technique may be chosen based on the method's basics, allowing the method to achieve the desired results.<sup>[14]</sup>
- ❖ **Second step-** Following the selection of an appropriate analytical tool, a standardised procedure for sample preparation and analysis will be developed through a series of trials. The aim of an activity trial is to get a rough understanding of robustness and set the method condition.<sup>[15]</sup>
- ❖ **Third step-** Risk evaluation can make use of the information gained during method creation. Risk evaluation is used to classify risk factors that should be investigated further in a DOE.<sup>[16]</sup>
- ❖ **Fourth step-** The machine operable architecture region (MODR) and a control strategy are created using the design of experiments. The definition of Reid et al's method operable design region is the same as Design Space. At any point during the

MODR, the method's Normal Operating Condition (NOC) will be considered, and the method's operable architecture region and NOC will be tested and validated.

- ❖ **Fifth but continuous step:** Analytical quality by design entails knowledge management, which means that knowledge gained through process optimization, creation, verification, and use should be gathered, applied, and shifted across the method's life cycle.<sup>[17]</sup>

**Applications of QbD in analytical method development**

Pharmaceutical companies are embracing the definition of QbD because it helps to advance a rugged and robust/strong system that helps to comply with ICH guidelines. This approach assists in method development over time.<sup>[18]</sup>

1. For Chromatographic technique
  - for UHPLC
  - for the detection of impurities
  - for the purpose of stability checks

- for the purpose of chromatography column screening
  - for the production of an HPLC system
  - for the content of drug products
  - for capillary electrophoresis
2. For hyphenated technique
    - for LC-MS method development
  3. for bioanalytical method development
  4. for dissolution studies
  5. spectroscopic measurement
    - for IR spectroscopy
    - for mass spectroscopy
    - for handling complex spectroscopic data
  6. for modified release products
  7. for tableting process
  8. Nanosuspension preparation
  9. for analysis of API and Excipients
  10. for Biopharmaceuticals

#### Advantages of QbD for industry

In the event of a change of circumstances, the proven approach would be more stable, providing a higher degree of assurance.<sup>[19]</sup>

- ❖ It leads to a deeper understanding of the process.
- ❖ When moving a process from the examination stage to the quality control department, this technique has a higher success rate.
- ❖ The design space concept avoids post-approval modifications, which could result in a high fee for any firm.
- ❖ It offers a space for the advancement of cutting-edge techniques by continuous improvement over the life cycle.

#### For Food and Drug Administration

- ❖ Promote greater flexibility in decision-making.
- ❖ Strengthen the conceptual foundation for research
- ❖ Confirms conclusions based on research rather than observational evidence
- ❖ Have superior quality

#### Pharmaceutical aspects: Traditional vs. QbD Approach<sup>[20-21]</sup>

**Table 1: Traditional vs. QbD Approach.**

Traditional Analytical Method Development	QbD (Lifecycle) Analytical Method Development
As specified in the ICH Q2 guidance, Validation of Analytical Procedure: Text and Methodology, methods are validated as a check-box tool.	Suitability of a system is demonstrated against an analytical target profile, which determines the process management strategy's basic characteristics and parameters.
Differences in method parameters have a less well-understood impact on method efficiency.	A systematic methodology focused on science for detecting and investigating method variables and their effects.
Method transfer is seen as a different operation from validation.	System-transfer practises are called change management exercises and are seen as components of the life cycle approach. Effective method implementation and verification actions are decided through assessment.
In a conventional approach, concepts like process verification, method, method validation, and revalidation can be confusing.	More specific concepts associated with method validation and equipment certification terminology are used in the lifecycle approach.
Method validation was once a one-time event that took place after the method construction was completed.	During the entire life cycle of a system, method life cycle validation was used to conduct all activities that ensure the method produces fit-for-purpose results.
Method transfer refers to the events that occur when a method is transferred from a transmitting unit to a receiving unit, demonstrating that the two units are equivalent.	The tasks conducted to ensure successful system setup in the routine operating environment, as well as information transfer from the sending device, are included in method installation.
Method testing ensures that pharmacopeial methods work in real-world situations; revalidation is done after adjustments to validation characteristics that are likely to be affected.	Demonstrating that a system works as expected after a change in the method's operating conditions or operating environment is called method output verification.

#### CONCLUSION

This paper discusses the idea of QbD and describes how it varies from traditional approaches. After reading this document, you should have enough knowledge to determine how and when to incorporate QbD in your business.

Using QbD correctly can have a range of advantages in terms of growth and manufacturing:

- ❖ More cost-effective usage of production time and resources
- ❖ Willingness to comply with FDA submission criteria and standards
- ❖ FDA approval times are shorter, and there are fewer questions.

❖ Immediate reaction to any manufacturing flaws.

Bad production that spirals out of control can have disastrous consequences for the advertised product. Fortunately, using QbD, a more modern, scientific method that formalises product design and production and removes trial-and-error troubleshooting, these costs and delays can be prevented.

Despite the many tangible benefits of QbD, most businesses are unaware of the definition, its meaning, or how to effectively execute it. QbD implementation requires a committed, disciplined, and long-term commitment.

Additionally, a sense of urgency now exists as the FDA began strongly encouraging all drug product applicants to use QbD. Deficiency letters will now explicitly cite the lack of QbD.

## REFERENCES

1. The metamorphosis of manufacturing, IBM Business Consulting Services Executive Briefing, <http://www.ibm.com/services/us/imc/pdf/ge510-4034-metamorphosis-of-manufacturing.pdf>.
2. Innovation and continuous improvement in pharmaceutical manufacturing pharmaceutical CGMPs for the 21st Century, U.S. Food and Drug Administration, 2004. September, Available from: URL:<http://www.fda.gov/cder/gmp/gmp2004/manufSciWP.pdf>.
3. PAT—A Framework for Innovative Pharmaceutical Development, Manufacturing, and Quality Assurance, September, 2004. <http://www.fda.gov/cder/guidance/6419fnl.pdf>.
4. Juran JM. Juran on Quality by Design – The New Steps for Planning Quality into Goods and Services, Free Press, 1992.
5. ICH Harmonized Tripartite Guideline on Pharmaceutical Quality Systems Q10, step 4 version, dated, 2008.
6. L. K. Garg, V. S. Reddy, S. S. Sait, T. Krishnamurthy, S. J. Vali, and A. M. Reddy, “Quality by design: design of experiments approach prior to the validation of a stability-indicating HPLC method for Montelukast,” *Chromatographia*, 2013; pp. 1697–1706.
7. <http://www.mournetrainingservices.co.uk/Previewbookmethod-validation.pdf>.
8. <http://www.pcte.edu.in/jper/issues/2013-june-volume-4-issue1/paper-03.pdf>.
9. <http://www.hplc.hu/PDFs/ZirChromRPGuide.pdf>.
10. <http://www.zirchrom.com/pdf/DRPMDG.pdf>.
11. <https://www.chem.agilent.com/Library/eseminars/Public/Microsoft%20PowerPoint%20%20Rapid%20HPLC%20Method-%20Development.pdf>.
12. <http://www.chem.agilent.com/Library/Support/Documents/a10424.pdf>.
13. <http://www.pharmacopeia.cn/v29240/usp29nf24s0c621s12.html>.
14. <http://www.cvg.ca/images/systemstabilitytests.pdf>.
15. <http://www.perkinelmer.com/CMSResources/Images/44-74522WTPWhySSTisnosubstituteforAIQ.pdf>.
16. S. Scypinski, D. Roberts, M. Oates, and J. Etse, “Pharmaceutical research and manufacturers association acceptable analytical practice for analytical method transfer,” *Pharmaceutical Technology*, 2002; 84–88.
17. Q9: Quality Risk Management. ICH Harmonized Tripartite Guidelines. International Conference on Harmonization of Technical Requirements for Registration of Pharmaceuticals for Human Use, 2006.
18. Sangshetti JN, Deshpande M, Arote R, Zaheer Z, Shinde DB. Quality by design approach: Regulatory need. *Arab J Chem*, 2014.
19. Munson J, Gujral B, Stanfield CF, A review of process analytical technology (PAT) in the U.S. pharmaceutical industry. *Current Pharmaceutical Analysis*, 2006; 405–14.
20. Chavan SD, Pimpodkar N V, Kadam AS, Gaikwad PS, Pharm PD. Research and Reviews: *Journal of Pharmaceutical Quality Assurance Quality by Design*, 2015; 1(2): 18–24.
21. Sangshetti J N, Chitlange S S, Zaheer Z, Quality by Design in Pharmaceuticals, 1st edition, 2015.