Veterinary Medical Board

BUSINESS, CONSUMER SERVICES AND HOUSING AGENCY • GAVIN NEWSOM, GOVERNOR
DEPARTMENT OF CONSUMER AFFAIRS • VETERINARY MEDICAL BOARD
1747 North Market Blvd., Suite 230, Sacramento, CA 95834-2978
P (916) 515-5220 | Toll-Free (866) 229-0170 | www.vmb.ca.gov

MEMORANDUM

DATE	October 9, 2019
TO	Veterinary Medical Board
FROM	Richard Sullivan, DVM, Multidisciplinary Advisory Commitee
SUBJECT	**Agenda Item 7. Review, Discussion, and Possible Action Regarding State and Federal Laws Related to Pharmaceutical Compounding**

The following statement is from the United States Pharmacopeia (USP) website: "US Pharmacopeia develops scientific standards that help ensure the quality and safety of medicines, dietary supplements and foods. Regulators, manufacturers, healthcare providers and consumers trust USP standards to help protect the public's health."

Although US Pharmacopeia only develops Guidelines for various categories of foods, medicines, and chemicals, these guidelines are often adopted by regulatory agencies, especially for medications. That has happening in California by the passage of Assembly Bill (AB) 973 that codifies USP <795> non-sterile compounding preparations (NSCP) and <797> compounding sterile preparations (CPS) in California. However, that has been put on indefinite hold because there are many stakeholders that are appealing these guidelines including the veterinary profession through the actions of the American Veterinary Medical Association (AVMA); Val, Grant, and I have been actively participating along with AVMA staff.

USP forms "expert panels" of specialists to develop these guidelines. In the category of compounding of medications, these specialists are pharmacists, which except for one person have no experience in veterinary medicine. And the one pharmacist that has veterinary experience is the pharmacist at the North Carolina State University, College of Veterinary Medicine, hardly practical experience.

The new guidelines have removed all "dispensing" of compounded preparations for practitioners (physicians, dentists, and veterinarians) which greatly affects the practice of veterinary medicine since we not only need to get patients on medications right away but also we do simple compounding in our practices and need to send these medications with the clients. In addition to that, the California Board of Pharmacy thought that they were helping us by adding a section into their regulations that would allow us to dispense:

“Article 7 Sterile Compounding in Pharmacies

1751. Sterile Compounding in Licensed Pharmacies.

(d) Except as identified below, no CSPs shall be compounded prior to receipt by a pharmacy of a valid patient specific prescription document. Where approval is given orally, that approval shall be noted on the prescription document prior to compounding.

(1) A pharmacy may prepare and store a limited quantity of a CSP in advance of receipt of a patient specific prescription document.

(2) Notwithstanding this subdivision, a pharmacy may prepare and provide a limited quantity of CSPs to veterinarians for animal patients based on a contract between the pharmacy and veterinarian for office use administration only. The pharmacy and veterinarian practice are jointly responsible for compliance with this section. The contract shall require the veterinarian to provide the pharmacy with the records documenting the dose administered to each patient or destruction record of CSPS. The pharmacy shall be prohibited from providing the same CSPs to the veterinarian until the pharmacy has received and evaluated the records for compliance with this provision.”

This is a draft; although approved by the compounding committee, it has not been approved by the Board.

As you can see, this creates a number of logistic and legal issues since the VMB has not even discussed this issue yet. And as I read this, it would still not allow a veterinarian to dispense; only while the patient is in the hospital.

Decisions on Appeals to USP <795> and <797>

USP's Compounding Expert Committee (CMP EC) has issued decisions on appeals to recent revisions to General Chapters <795> Pharmaceutical Compounding – Nonsterile Preparations and <797> Pharmaceutical Compounding – Sterile Preparations. USP remains committed to keeping stakeholders and the general public informed of the progress of these standards, which are anticipated to become official on December 1, 2019.

Background

On June 1, 2019, USP published major revisions to General Chapters <795> and <797>, which are intended to minimize the risk of patient harm in the areas of nonsterile and sterile compounding. The revisions represent more than nine years of deliberation and stakeholder engagement in the form of public comment review, roundtables, workshops, open face-to-face meetings, and open microphone sessions. USP received diverse input and participation from pharmacists, practitioners, representatives from healthcare organizations, academicians, federal and state regulators, and many others. Changes to these chapters reflect advancements in science and clinical practice, clarification of sections that were frequently misconstrued, and input from more than 6,400 public comments received. Over the course of the revision process for both <795> and <797>, the CMP EC considered all input and worked towards achieving patient access to quality compounded preparations while minimizing the risk of harm.

After the revisions were published, USP received appeals to these chapters. In accordance with USP's Bylaws, the CMP EC worked with a sense of urgency to reconsider and issue decisions on these challenges. In light of the significant work that the CMP EC has undertaken to date on the revision to <795> and <797>, the Committee was prepared to evaluate the appeals expeditiously. See this link for further information about USP's formal appeals process. A summary of key provisions appealed and the decisions of the CMP EC are provided below.

Appeal Topics and CMP EC Decisions

Key topics covered in the appeals to <795> and <797> included:

- Beyond-Use Date (BUD) provisions in <795> and <797>
- Removal of Alternative Technology provision from <797>
- Applicability of <795> and <797> to veterinary practitioners

BUD Provisions

Several appeals challenged the BUD approaches in the revised chapters. In response to these appeals, the CMP EC decided to:

- Maintain the BUD framework for compounded nonsterile preparations (CNSPs) in <795>
    - Stability-indicating assays will be required to extend BUDs based on their ability to quantitate the active ingredient and its degradation products or related impurities.
    - The BUDs in Table 3, which are assigned based on the consideration of stability, compatibility, and microbial proliferation in the CNSP, will be maintained. The BUD framework takes into consideration water activity and the susceptibility of some oils or fatty acid bases (e.g., nonaqueous formulations) to be reactive to certain substances.

- Maintain the BUD provisions for compounded sterile preparations (CSPs) in <797> with the commitment to develop resources for extending BUDs to include stability, sterility, and monitoring (personnel and environmental) considerations.
    - The maximum BUDs in Table 11 for Category 2 CSPs are intended to mitigate the risk of inadvertent contamination or the risk of not sterilizing the CSP. Contaminated vials stored for longer periods of time allow for microbial proliferation and increased risk of harm to patients. The CMP EC determined that extending BUDs for CSPs may need additional testing such as stability, sterility, endotoxin, container-closure integrity, and particulate matter, in addition to personnel and environmental monitoring which are specific to each facility.

See USP's BUD Fact Sheet for further information about the approach to BUDs in revised <795> and <797>.

Alternative Technology Provision

The CMP EC was asked to reinstate the following specific provision (Alternative Technology provision) in <797> to provide greater flexibility for modalities used in pharmacy compounding:

> *"The use of technologies, techniques, materials, and procedures other than those described in this chapter is not prohibited so long as they have been proven to be equivalent or superior with statistical significance to those described herein."*

In response to this request, the CMP EC decided to:

- Reinstate the Alternative Technology Provision from the 2008 Version of <797>
    - The CMP EC recognized that <797> may not capture all modalities used in pharmacy compounding. However, the CMP EC also intends to publish a Frequently-Asked-Question (FAQ) to clarify that the reinstatement of the Alternative Technology provision is not intended to permit BUD extension or to extend the time during which single-dose containers may be used.

Applicability to Veterinary Practitioners

The CMP EC was asked to postpone the applicability of <795> and <797> with respect to veterinary practitioners until such time that USP publishes a veterinary-specific compounding chapter. In response to this request, the CMP EC decided:

- Not to Postpone these Chapters and to Maintain Veterinary References
    - <795> and <797> do not state compendial requirements for animal drug compounding under federal law. Section 503A of the Federal Food, Drug and Cosmetic Act, which makes <795> and <797> applicable to pharmacy compounding, applies only to pharmaceuticals for human use.
    - <795> and <797> contain provisions that are intended to be relevant and useful for veterinary practitioners. For this reason, it is the CMP EC's view that continued reference to veterinarians in both <795> and <797> may serve value, from a best practice standpoint. The requirements of these chapters are relevant to ensuring quality CSPs for both human and animal patients.

The CMP EC's decisions do not foreclose the possibility of future revisions to these chapters. Standards in the *USP-NF* are in continuous revision, and the CMP EC is committed to further engagement with stakeholders to develop additional resources, including those for extending BUDs.