

# Improving Manufacturing in the Pharmaceutical Industry through the Implementation of Continuous Processing Sarah Hunter, Process Engineer, R&D

Batch Processes have and will continue to fulfill an important role in the manufacture of Active Drug Substance; they allow multiple recipes to be executed in the same core equipment. However, the compromise is, batch fails to deliver the precision, speed of manufacture and intensification of a flow process.

Here I present how, at GSK, we are developing flow processes for organometallic chemistry. Using process understanding generated using batch methods, and a combination of insilico simulation and physical demonstration we are able to redefine conventional operating parameters for this type of chemistry and industrialise processes which are not feasible in batch due to risk of scale.

We believe this will allow us to deliver more medicines of value to patients, both in affordability and function

# Flow Chemistry at GSK

Where We Are







#### Where We Aim to Be

Pharma has been working on a knowledge and trial and error principal. Development has been governed by statistical models and small scale increment changes until manufacturing scale.

GSK is partially converting its API batch portfolio to continuous with a great ambition to reach up to 50% by 2020.

To support this strategy, simulation has to be integrated at the centre of process development to;

- Accelerate process development
- Provide more robustness in the development phase
- Ensure and understanding from scale to scale

Batch is following the transition and integrate simulation as part of the workflow.

# **Organometallic Chemistry**

**Batch Process** 





# **Organometallic Chemistry**

Flow Process



A team at GSK have been developing process workflow for effective design and scale up of continuous organometallic processes which is currently being applied to a number of processes in active development.



# How do We Allow the Transition to Happen



From Laboratories to Manufacture



# Case Study

P38 Kinase Inhibition of Inflammatory Pathways



- Rheumatoid Arthritis Candidate selected 2003
- Atherosclerosis
- Depression
- Neuropathic pain
- Acute Coronary Syndrome Phill
- COPD
- Focal Segmental Glomerular Sclerosis
- Stage 1 Flow Synthesis



Losmapimod (GW856553X) (Oral)

### **Case Study**



#### Flow Stage Development



# **Process Understanding**

Kinetics & Calorimetry



### **Kinetics**

#### **Main Reaction**



#### Degradation – Batch Time Course



### Calorimetry

#### Deprotonation



# Simulation



PFR Model



#### Matching ;

- Temperature profile
- Residence times
- Reagent concentrations & flow rates

# Define process parameter ranges and the equipment performance;

- Heat Transfer Coefficient
- Surface Area to Volume Ratio
- Micro mixing
- Bodenstein Number



# **User Requirement Specification**

Continuous Process



The simulation demonstrates process robustness low sensitivity to parameter inputs allowing the simplest design concept.

Plug flow reactor with static mixer;



PFR Model









### Continuous Process





Process Control







Work Up



- Initial intent: to flow directly into a quench pot containing the trimethyl borate
- Extended addition time gave higher levels of the borinic acid

Addition time (min)	Borinic acid level HPLC (%a/a)
0.5	1.3
3.5	4.2
8	7.9



gsk

Work Up



- If k<sub>1</sub> and k<sub>3</sub> fast but k<sub>2</sub> slow?.....
- Rate of addition relative to progression of the "ate" complex controls borinic levels
- Rapid trimethyl borate addition to the Grignard solution preferable

# Simulation



#### Design Space and QbD



## Industrialisation



### Scale Independent Design



# Industrialisation

In Practice

Processes have been demonstrated at production rates of;

• Lab scale ~100g/hr

Isolated Yield 70% th Isolated Quality 99.7% a/a

Pilot plant scale ~500g/hr.

Operating as a flow process

- Enabling operating conditions which are not feasible as a batch operation.
- Eliminating a potential critical quality attribute.

A recent pilot plant campaign produced 88.2 kg of clinical material.







Yields averaged 84.95% th.



#### **Continuous Primary Team**

Flavien Susanne, Andrew Rutter, Charles Wade

#### **Project Teams**

Robert Whitten, Thoralf Hartwig, Mark Schilling, Lindon Francis, Kathryn Southgate David Pascoe, Mike Webb, Jason Cooke, Sophie Duffield, Peter Skett, Laura Palmer