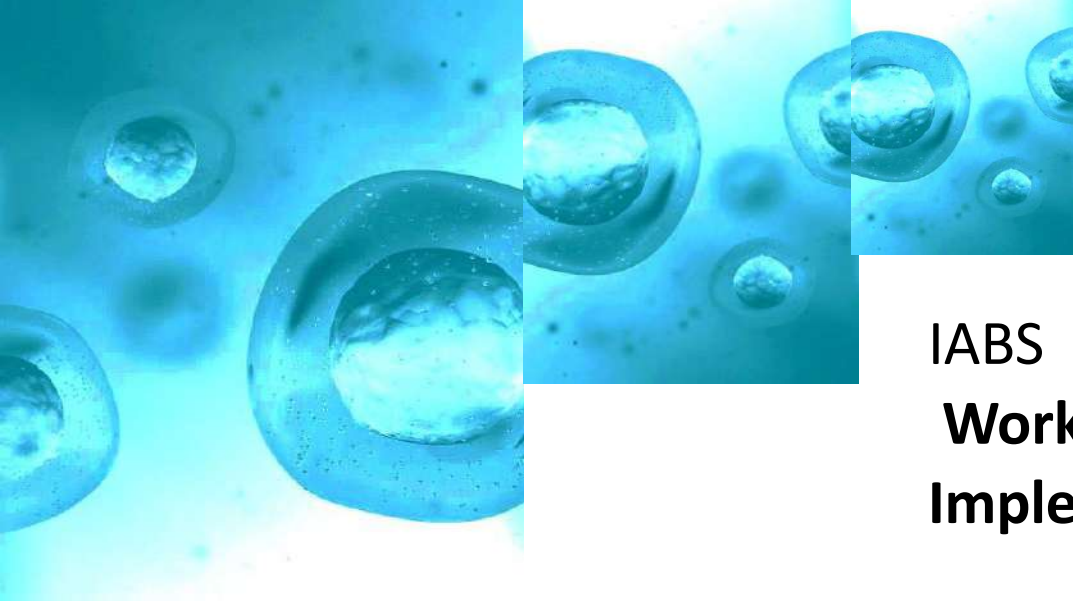


# Quality by Design (QbD)-based Cell and Gene Therapy (CGT) product manufacturing and life cycle management



IABS

**Workshop on Global Harmonization of Specification:  
Implementing A Patient-Centric, Enhanced Control Strategy**

Cyto-Facto Inc. CEO  
Kobe Univ. Dept of Science Technology and  
Innovation Project Professor

Shin Kawamata

2025 0624

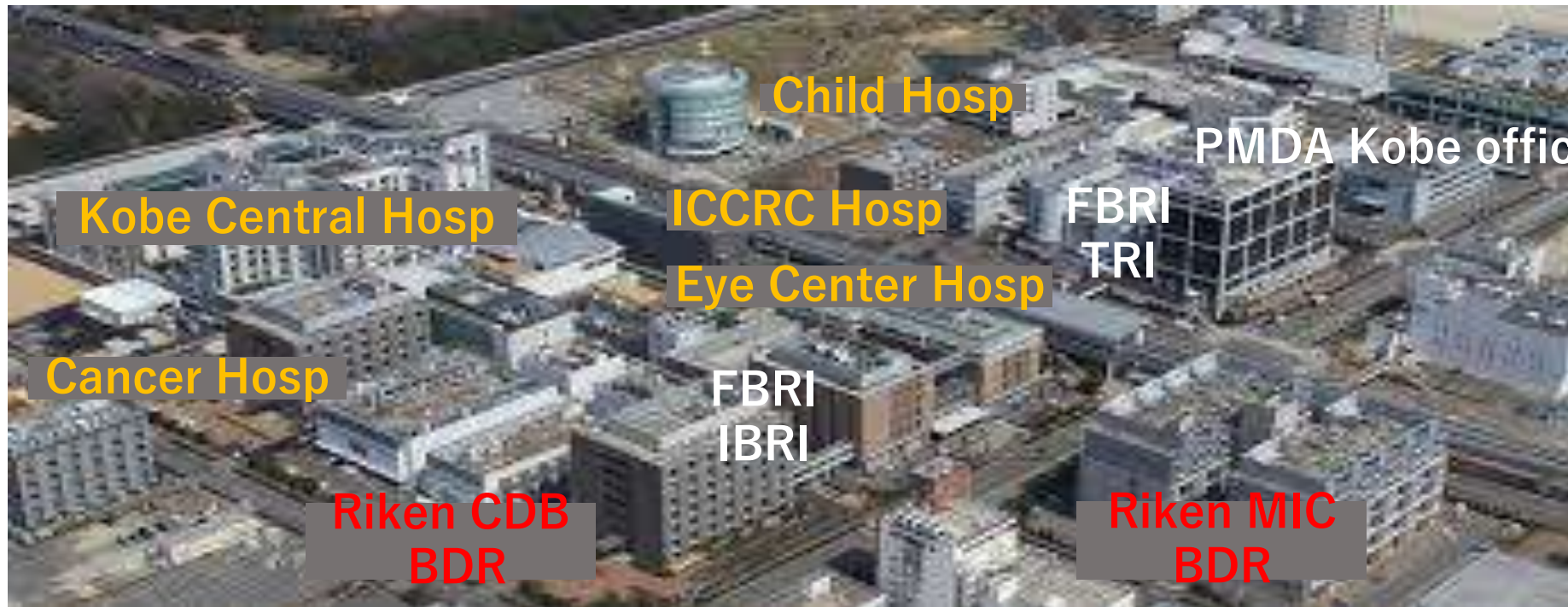
# Introduction of CMO/CDMO company Cyto-Facto Inc.



Kobe Port Island

# Cyto-Facto Inc. is a spinoff company

from Foundation for Biomedical Research and Innovation (FBRI) that aims to support Kobe BioMedical Innovation Cluster project



## Kobe BioMedical Innovation Cluster in 2023

2 Riken basic research centers

5 Hospitals with 1600 beds

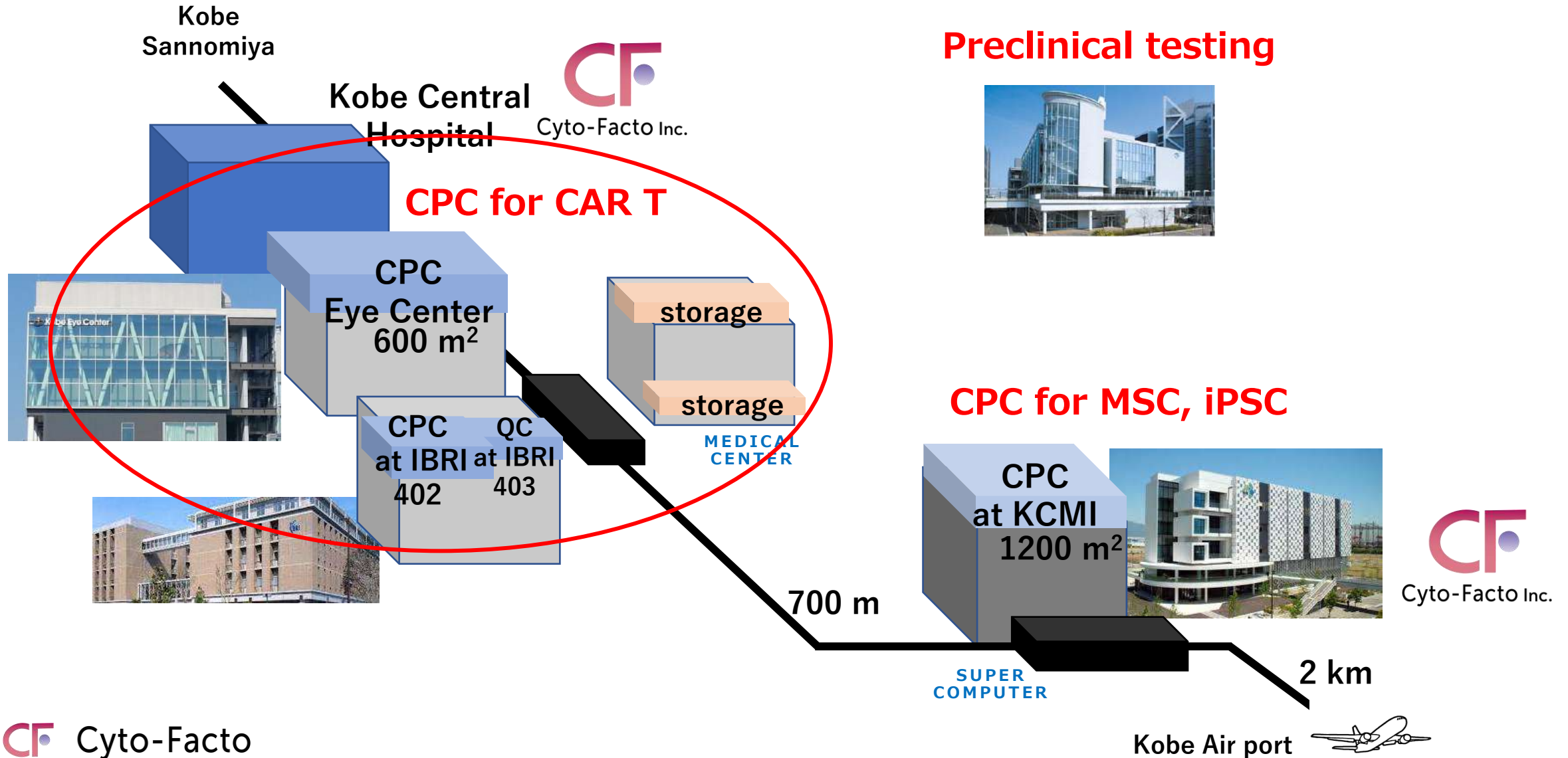
Translational Institution FBRI

PMDA branch office

5 universities and colleges

360 Biomedical companies

# Cell manufacturing facilities of Cyto-Facto Inc.



# CMO/CDMO business experience of Cyto-Facto (Its predecessor, the RDC of the FBRI)

- 2014** Launched CAR-T CMO project as R&D Center for Cell Therapy (RDC) of the FBRI. Technology transfer of CAR-T production (Kymriah®) by Novartis.
- 2017** Cell Processing Center in compliance with PIC/S GMP in the EC building in service.
- 2018** Began production of the clinical product Kymriah® for the Japanese market.
- 2020** Obtained approval for manufacture and sale of regenerative medicine products from HA. Commercial production of Kymriah® started.
- 2021** Technology transfer of MSC production (FF-31501) by Fujifilm.
- 2022** Completion and operation of the Cell Processing Center (CPC) on the 5th floor of KCMI
- 2023** FF-31501 investigational product manufacturing began. Several process development projects for CAR-T, MSC manufacturing started.

Cyto-Facto (its predecessor, the RDC of the FBRI) is **the first Asian company to manufacture commercial CAR-T products in compliance with PIC/S GMP**. Cyto-Facto has accumulated experience in manufacturing technology know-how and has launched several cell & gene manufacturing pipelines, including CAR-T, iPSC-based cells and mesenchymal stem cells (MSCs) of various developmental stages.



CPC in the Eye Center (EC) building. 6F



CPC in the Kobe Center for Medical Innovation (KCMI) building. 5F

# Introduction of Cell Processing Center

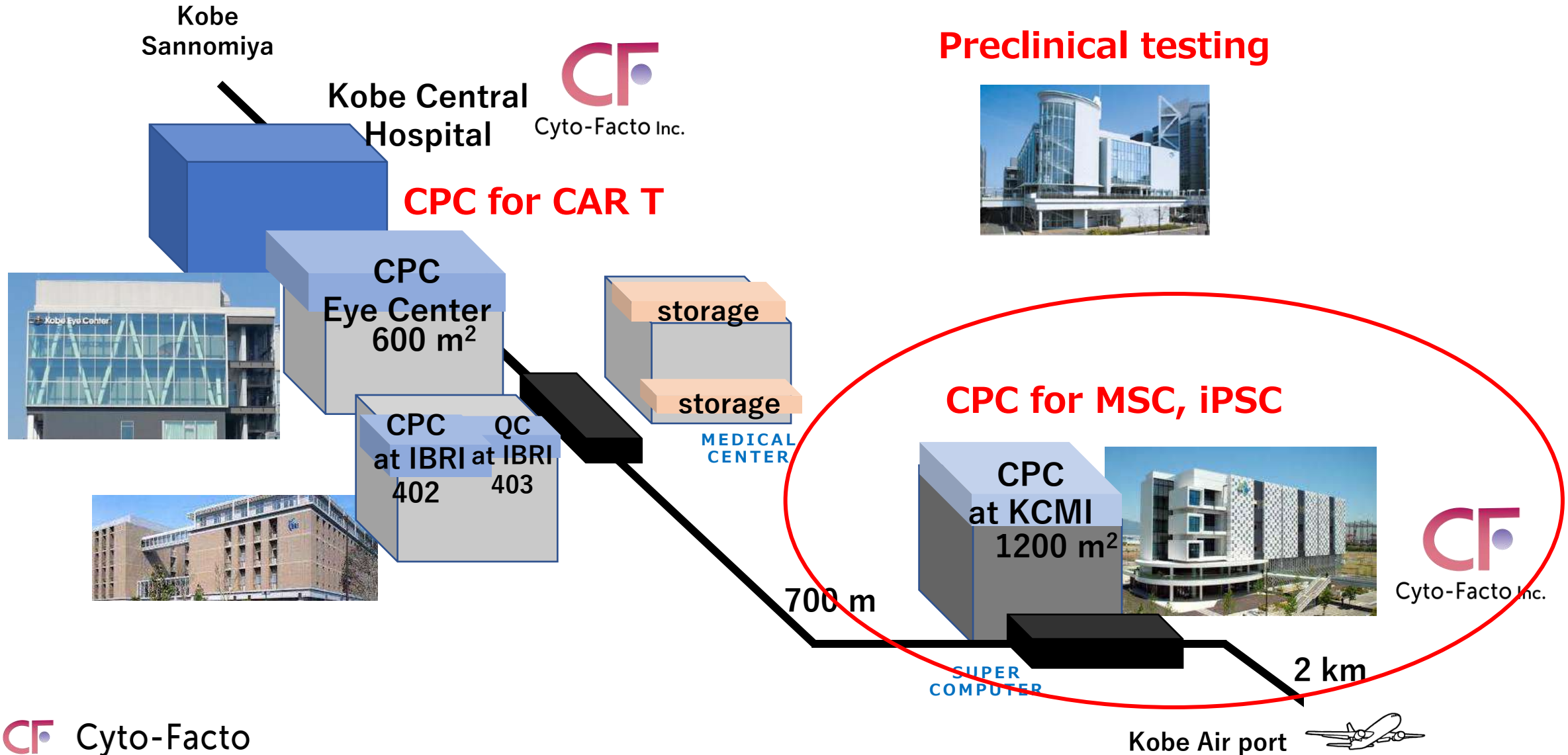


**PIC/S GMP compliance manufacturing facility  
That allows international shipment  
Shipping record to Australia**

# Introduction of Cell Processing Center



# Cell manufacturing facilities of Cyto-Facto Inc.



# CPC facility in KCM I 5F



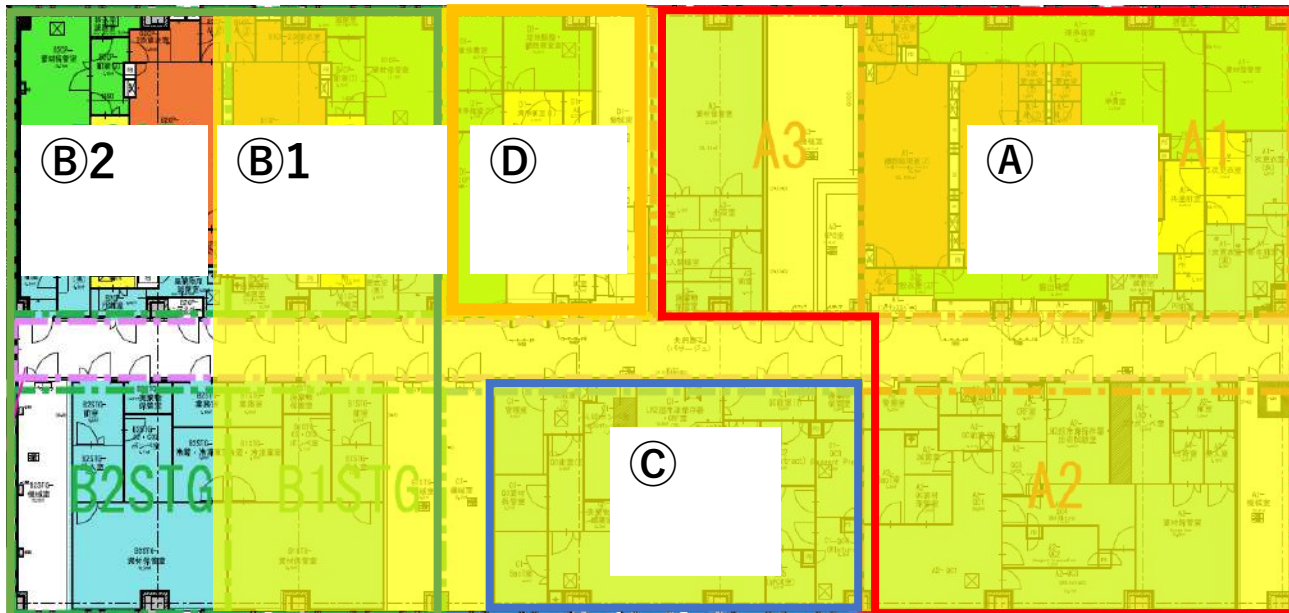
FUJIFILM  
Value from Innovation

Healios

SINFONIA

5CPCs  
Central QC Room  
Material Storage Room

Total 1,200m<sup>2</sup>



- Clinical Trial of **Autologous MSC**
- Clinical Trial of **eNK derived from iPSC**
- Central QC Room

How can we overcome heterogeneity in quality of  
Patient sample?

# The CAR-T therapy in Japan was started in 2018 through the network of JSTMCT

## Introduce FACT - Standards for IMMUNE EFFECTOR CELLS to Japanese apheresis sites

Set up and open apheresis sites in Japan for Kymriah manufacturing through the network of Japan Society of Transfusion Medicine and Cell Therapy under the technical support from NPKK.

All of the apheresis sites opened in Japan were set up based on the recommended plans stated in the Q&A in the journal of JSTMCT and web HP.



Keio Univ. Hemato  
Dr. Tanozaki



Kyoto Univ. Hemato  
Dr. Arai



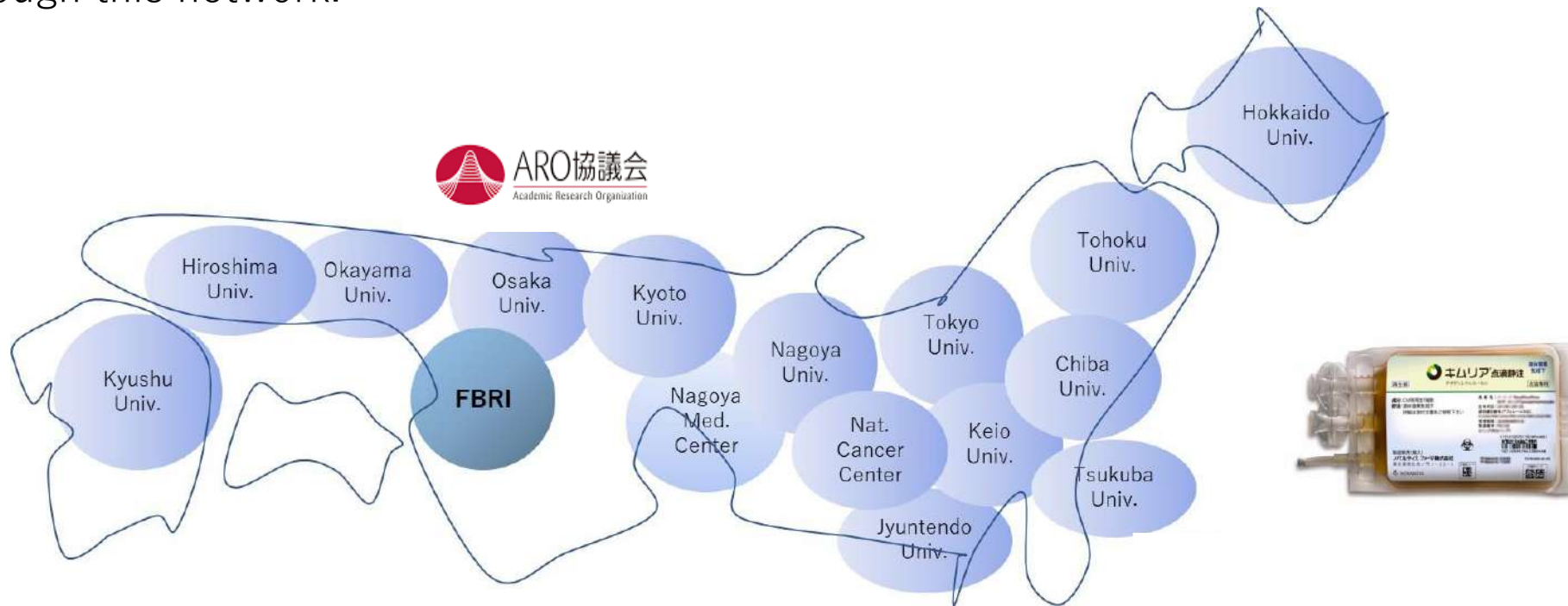
Kyoto Univ. Hemato  
FBRI  
Kawamata

# Network of ARO was utilized to organize the apheresis/hospital sites for CAR-T therapy in Japan

FBRI chairs the Academic Research Organization Liaison Council for Cell Processing Center.

The 17 major academic/governmental medical centers for cell therapy participate Liaison Council.

FBRI promotes the supply of Kymriah and collect the therapy-related issues need to be fixed through this network.



Chaired by FBRI  
Kawamata

# Cyto-Facto has a prestigious Kymriah manufacturing record, with manufacturing success rate of 95% (123 batches/129 batches)

ORIGINAL PAPER

## Risk factors for CAR-T cell manufacturing failure among DLBCL patients: A nationwide survey in Japan



British Journal of Hematology  
2023 April 13 Jo et al

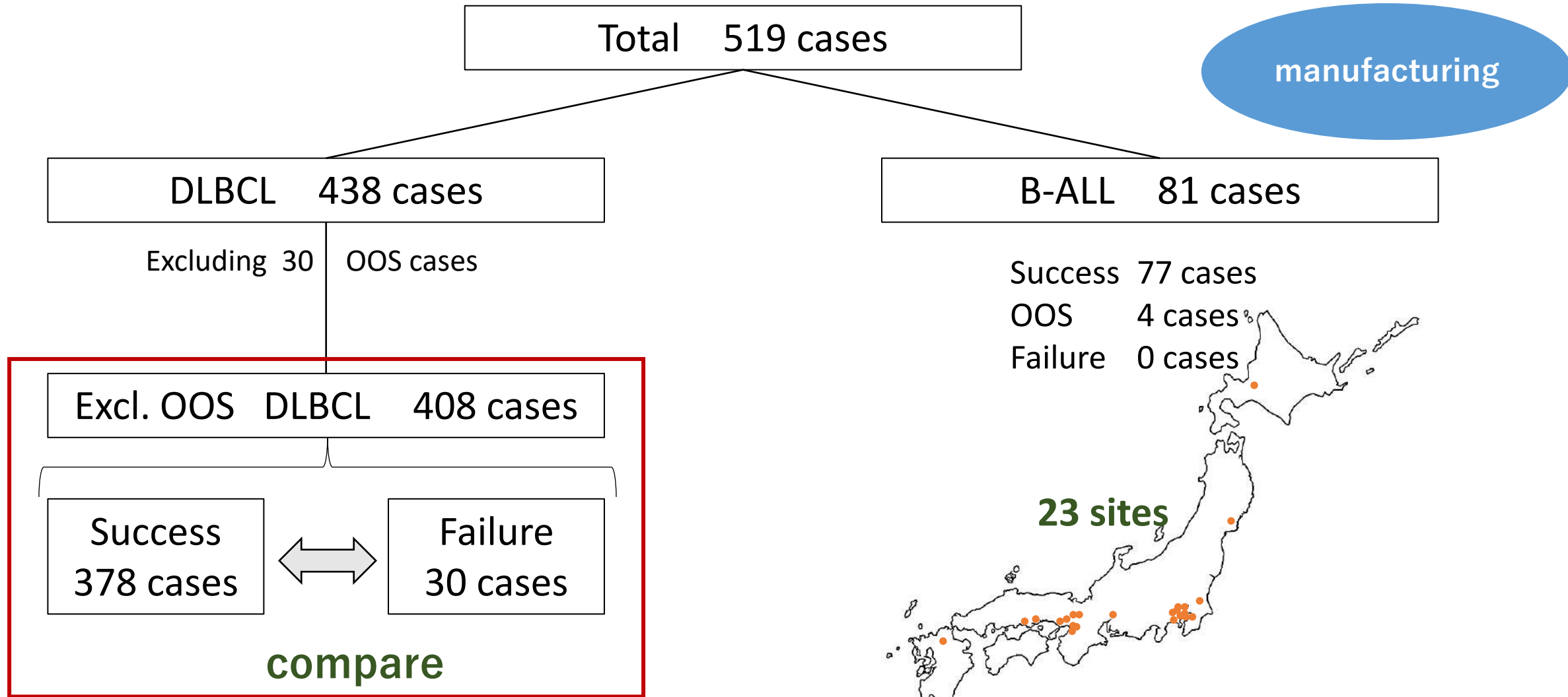
Tomoyasu Jo<sup>1,2</sup> | Satoshi Yoshihara<sup>3,4</sup> | Yoshiki Okuyama<sup>5</sup> | Keiko Fujii<sup>6</sup> |  
Tomoko Henzan<sup>7</sup> | Kaoru Kahata<sup>8</sup> | Rie Yamazaki<sup>9</sup> | Wataru Takeda<sup>10</sup> |  
Yoshihiro Umezawa<sup>11</sup> | Kentaro Fukushima<sup>12</sup> | Takashi Ashida<sup>13</sup> |  
Minami Yamada-Fujiwara<sup>14</sup> | Ryo Hanajiri<sup>15</sup> | Noboru Yonetani<sup>16</sup> | Yuma Tada<sup>17</sup> |  
Yuji Shimura<sup>18</sup> | Hidekazu Nishikii<sup>19</sup> | Norio Shiba<sup>20</sup> | Naoya Mimura<sup>21</sup> |  
Jun Ando<sup>22</sup> | Takayuki Sato<sup>23</sup> | Yasuhiro Nakashima<sup>24</sup> | Junko Ikemoto<sup>4</sup> |  
Keita Iwaki<sup>14</sup> | Shin-ichiro Fujiwara<sup>25</sup> | Masaki Ri<sup>26</sup> | Tokiko Nagamura-Inoue<sup>27</sup> |  
Ryuji Tanosaki<sup>8</sup> | Yasuyuki Arai<sup>1,2</sup>

JO ET AL.

Table 1 revised

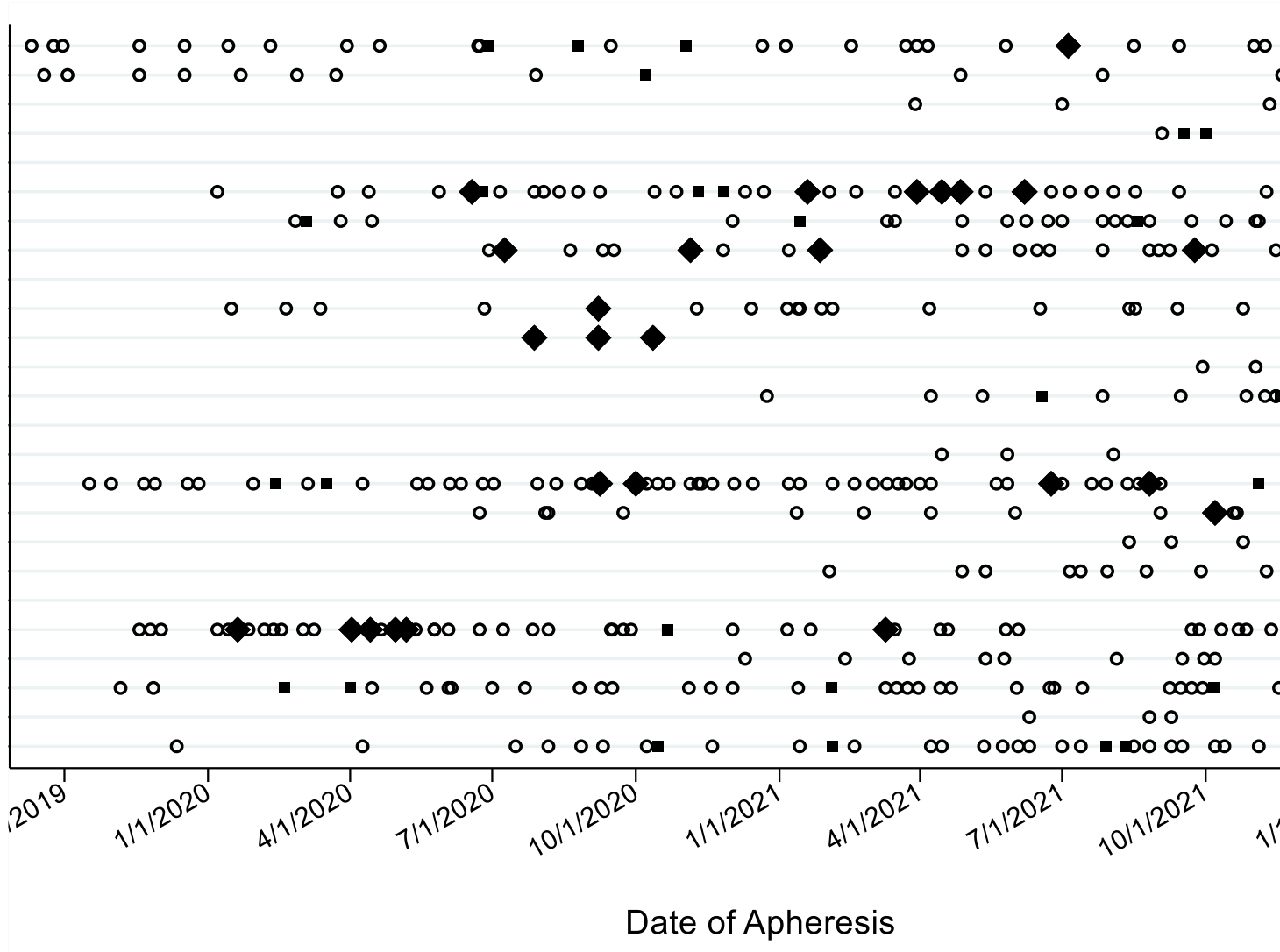
Factory	2019-2021 Dec	Successful	Failed	successful rate
Novartis Morris Plains NJ US		255	24	91%
Cyto-Facto (FBRI) Kobe Japan		123	6	95%

# CAR-T manufactured and infused to patients



# Kymriah product score for 23 Japanese sites (DLBCL)

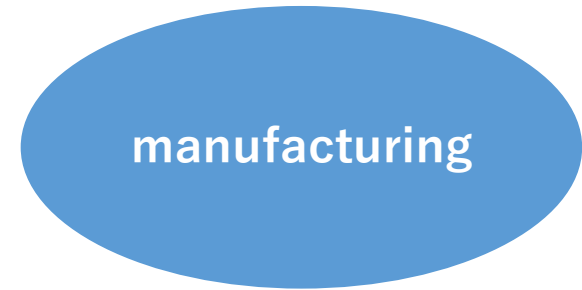
Facility



- Success
- OOS
- ◆ Failure

一般社団法人  
日本輸血・細胞治療学会

委員会名： 免疫・再生医療関連委員会  
ワーキンググループ(WG)・タスクフォース



**23 sites**  
**408 cases**

# Explore the factors that affect the success rate of CAR-T manufacturing

## Patient episodes for success or failure of CAR-T therapy

Female 20s

- Primary mediastinal Large B cell lymphoma
- Treatment
  - DA-EPOCH-R 6 courses : CR
  - Recurrence → R-ESHAP : no CR
  - R-GCD → Pola BR : no CR
  - **Apheresis → manufacturing OK**
  - IVAC → radiation : PR
  - **CAR-T : CR**
  - No event

Male 60s

- Diffuse large B lymphoma
  - Treatment
    - R-CHOP 1 course : PR
    - BR 4 courses : no CR
    - R-CHASE 1 course : PR
    - **Apheresis → manufacturing failure**
    - R-CHASE 2 courses
    - **Apheresis 2 → manufacturing failure again**
- Additional chemotherapy is not feasible.

Pretreatment  
conditioning

# Factors determine the success of CAR-T manufacturing

**Bendamustine risk category** High risk : > 3 courses, last Tx conducted within 3 M, Middle risk : > 6 courses last Tx conducted 3 after or within 24 M

		Odds ratio	95%CI	p value
<b>Risk by Bendamustine</b>	Low		Reference	
	Int	<b>5.520</b>	(1.436 - 21.215)	0.013*
	High	<b>57.088</b>	(3.370 - 966.996)	0.005*
<b>Platelet</b>	Every $10 \times 10^4/\mu\text{L}$ reduction	<b>2.020</b>	(1.107 - 3.690)	0.022*
	<b>CD4/CD8 ratio</b>			
	$\geq 1/3$		Reference	
	$< 1/3$	<b>3.249</b>	(1.314 - 8.036)	0.011*

Pretreatment conditioning

Platelet

CD4/CD8 ratio

## Interpretation

### Case 1

- ✓ Bendamustine : no use (Low)
- ✓ Platelet :  $20.0 \times 10^4 / \mu\text{L}$
- ✓ CD4/CD8 ratio: 1.0 ( $\geq 1/3$ )

Odds ratio

$$\begin{aligned} &\times 57.1 \\ &\times 2.0 \\ &\times 3.2 \\ &= \times \mathbf{365} \end{aligned}$$

### Case 2

- ✓ Bendmistine : 6 cycles & rest 2 months (High)
- ✓ Platlet :  $10.0 \times 10^4 / \mu\text{L}$
- ✓ CD4/CD8 ratio: 0.2 ( $< 1/3$ )

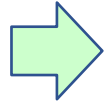
How can we address manufacture related CQAs ?

# Cell manufacturing is still not industrialized !

## Complicated manual operation in cell processing center



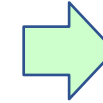
Change clothes to dust-free wear



Wear gloves and mask



Change into clean shoes



2<sup>nd</sup> gowning  
to enter into CPC



Open culture system

Verify operator's performance with a checklist

Work in extremely uncomfortable clothing



**A robot that copies or mimics manual operation would eliminate human error and certainly improve efficiency ...**

**However, a robot without a sensor and without a data collection function requires “verification” of the final product for each shipment.**

**Pharma 3.0**



[www/ indiantelevision.com](http://www.indiantelevision.com)



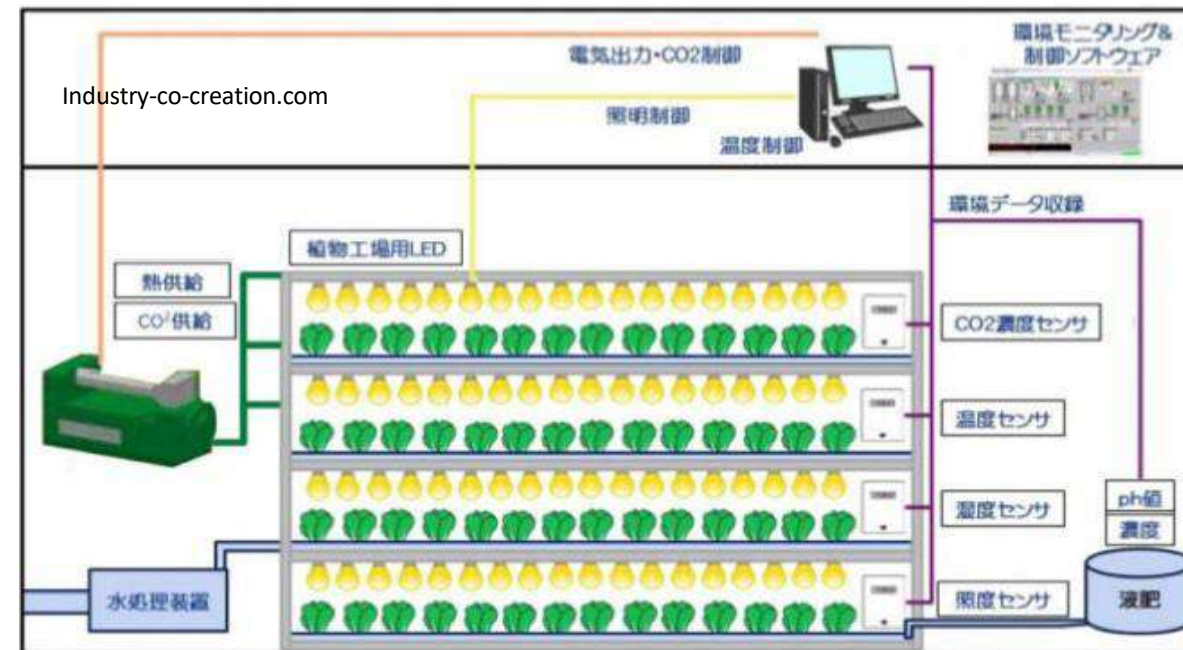
[skipara.worldpress.com](http://skipara.worldpress.com) Kawasaki

# How can we assure the quality of living materials, such as vegetables are manufactured as designed ?

First, the developer must have an image of the product with defined efficacy and then set up SOPs and process parameters (PPs) within the design space (DS). Next, confirm the quality of the product by ensuring the PPs are within the DS through in-process monitoring.

This is the Quality by Design (QbD)-based manufacturing.

Pharma 4.0



# Aquaculture of Fugu is an example of Quality by Design (QbD)-based manufacturing

First, we need to have a clear **image of Fugu with taste**. Second, set up SOP to aquaculture Fugu from fry of heterogeneous in size, and set up PPs and DS along with PPs. Then, confirm that tasty Fugu is aquacultured as designed without eating by confirming PPs are within DS.

Fry are heterogeneous in size



Delicious Fugu in 1.5-2.0 years

Manufacturing control of aquaculture of Fugu

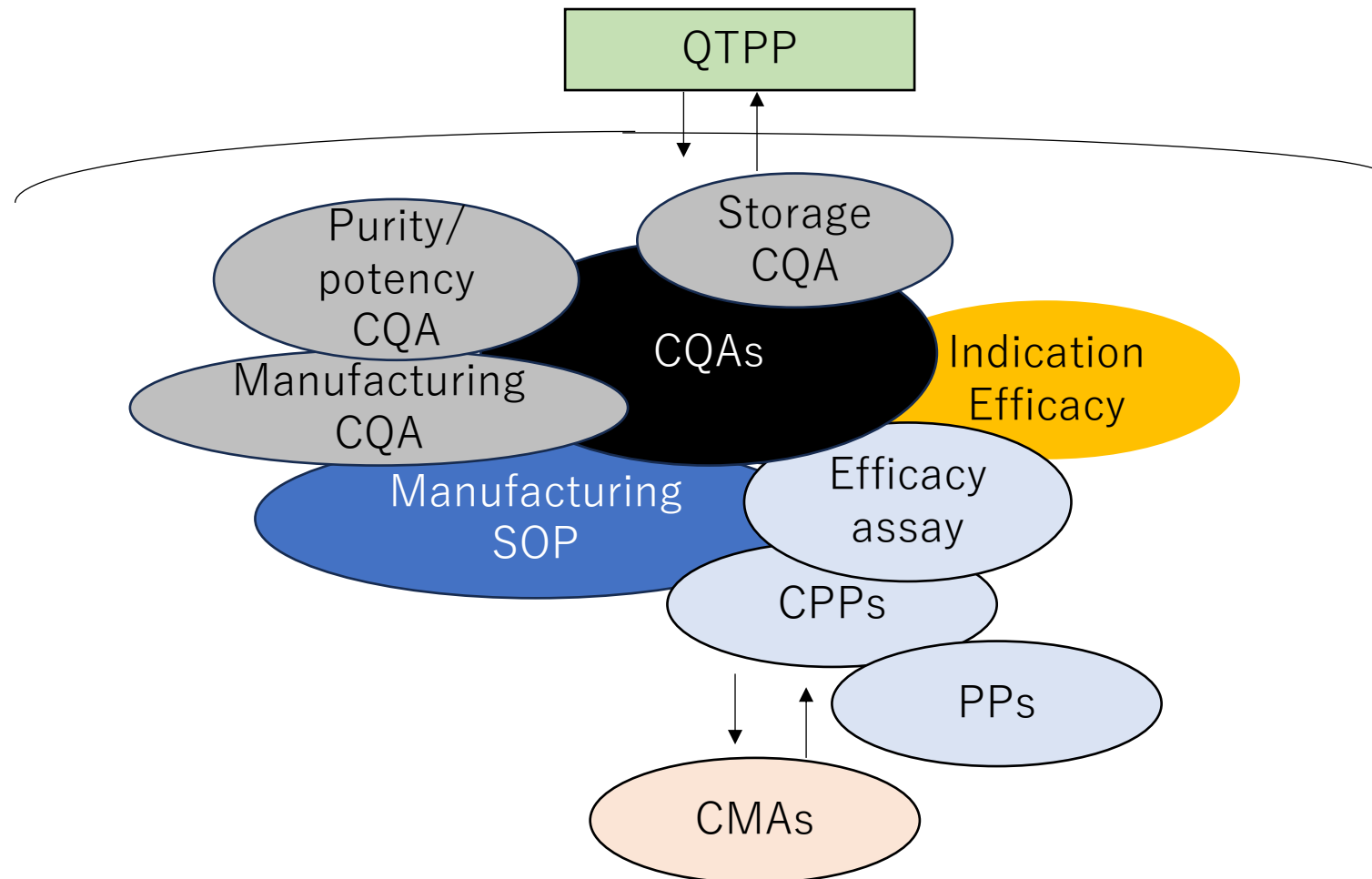


Guarantee the same good taste without eating



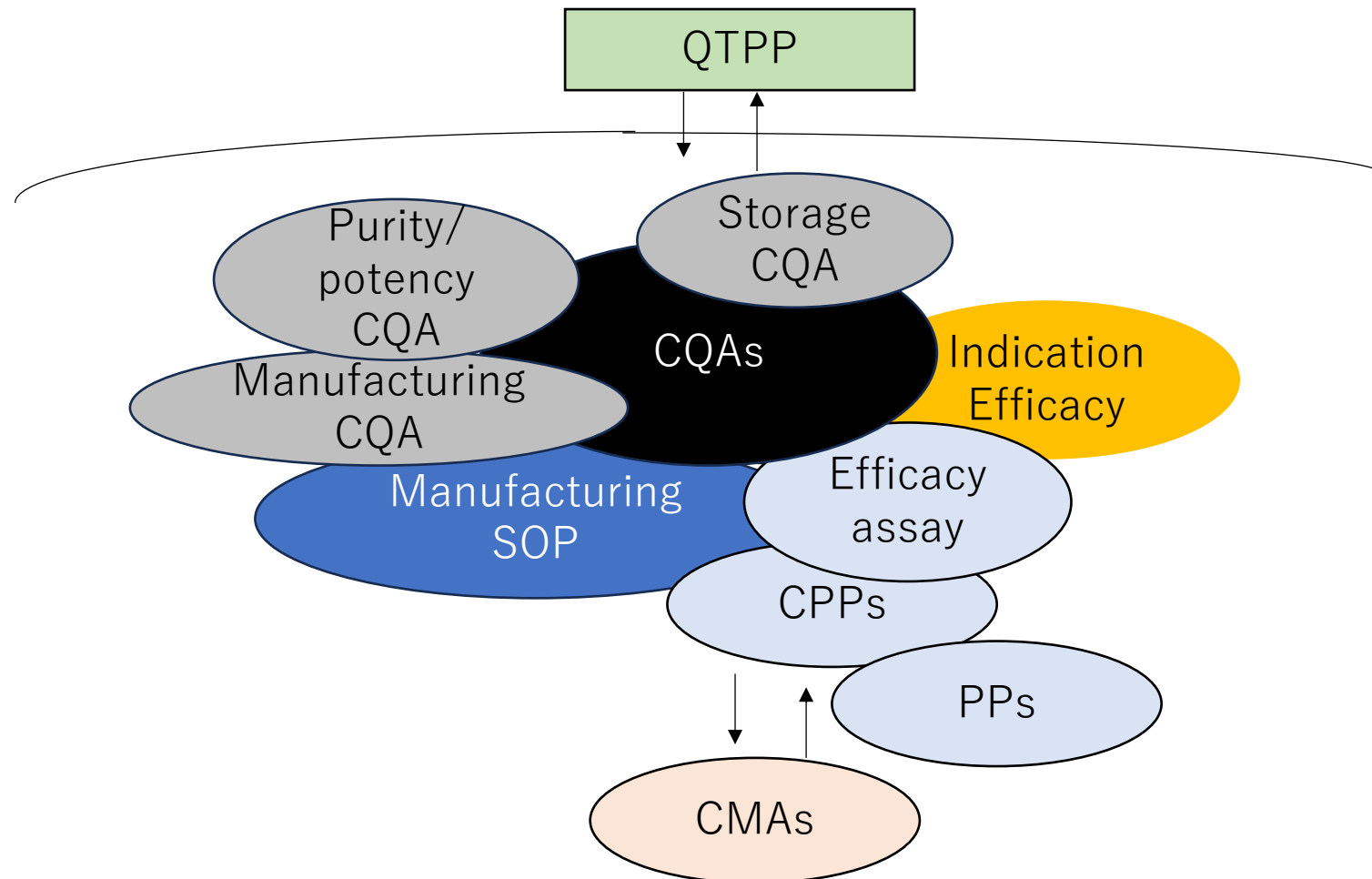
Process record obtained by in-process monitoring is batch record for release.

# Schema for Quality by Design (QbD)-base manufacturing



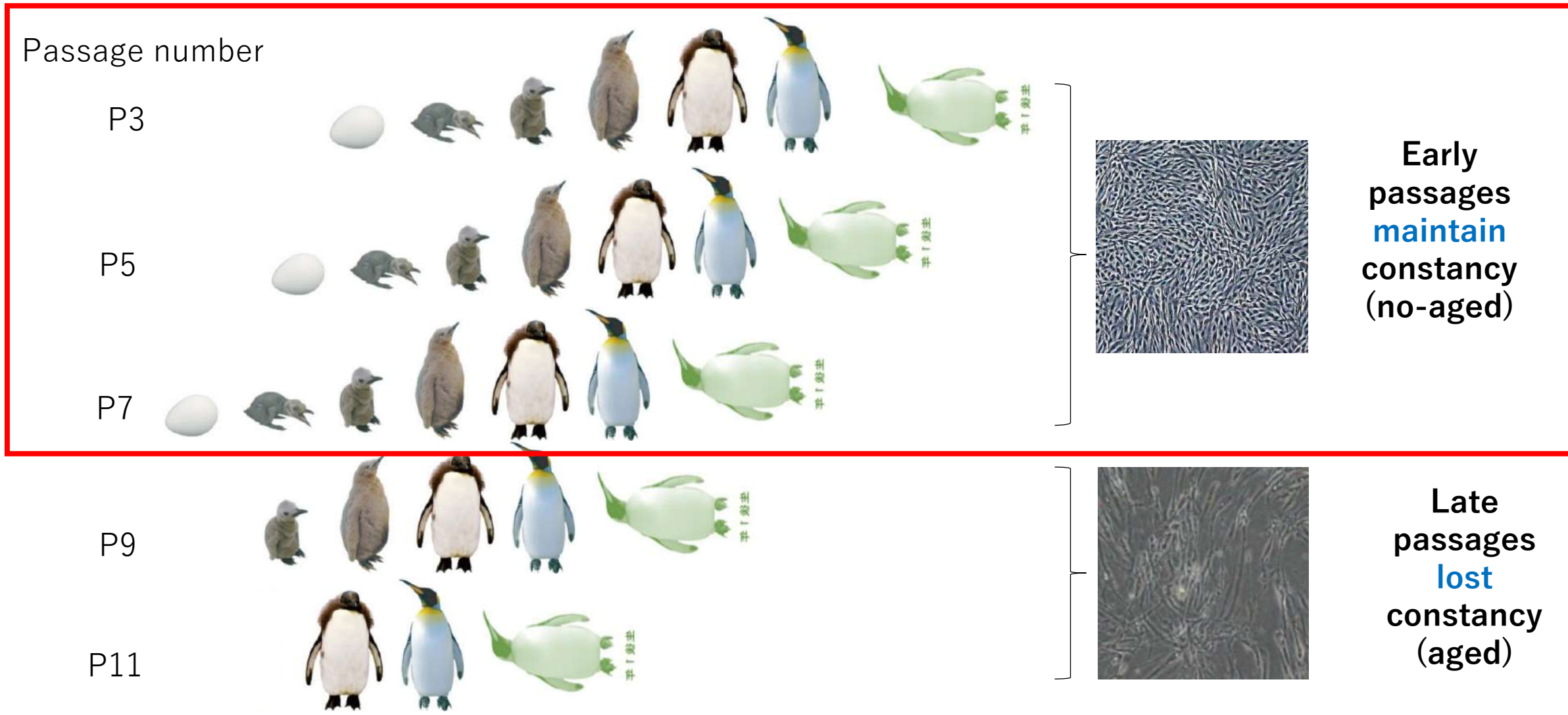
# Then, how can we set up PPs for MSC?

**First, we need to define efficacy of the product.  
In this case, efficacy of MSC is defined as anti-inflammatory effect.**



# Schema for MSC: mesenchymal stem cells in culture

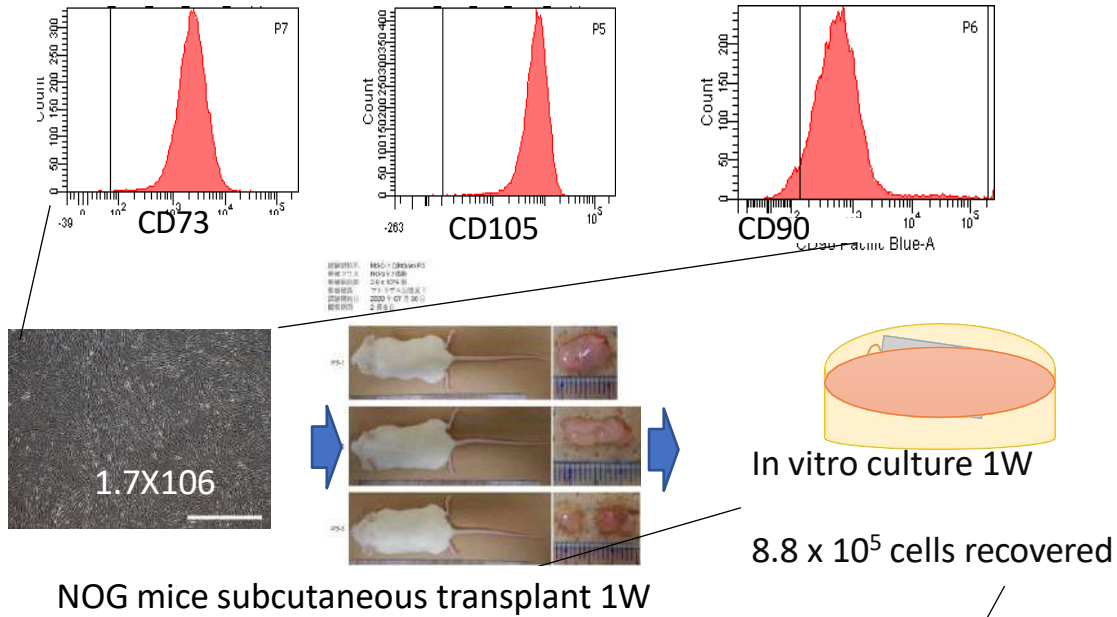
Heterogenous in shape and proliferation potential, but maintain constancy as a population until certain passages



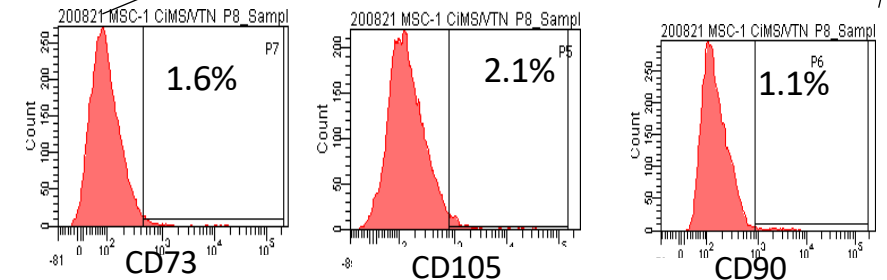
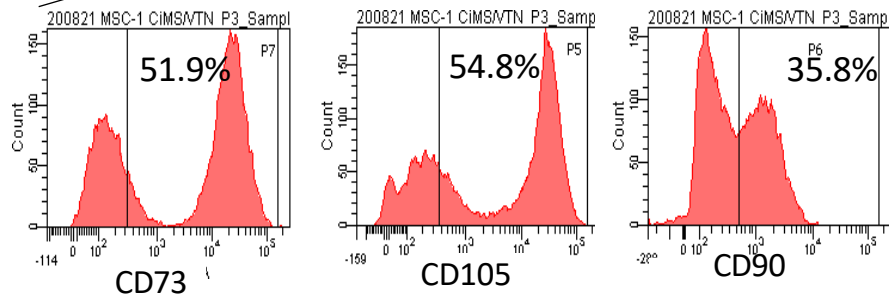
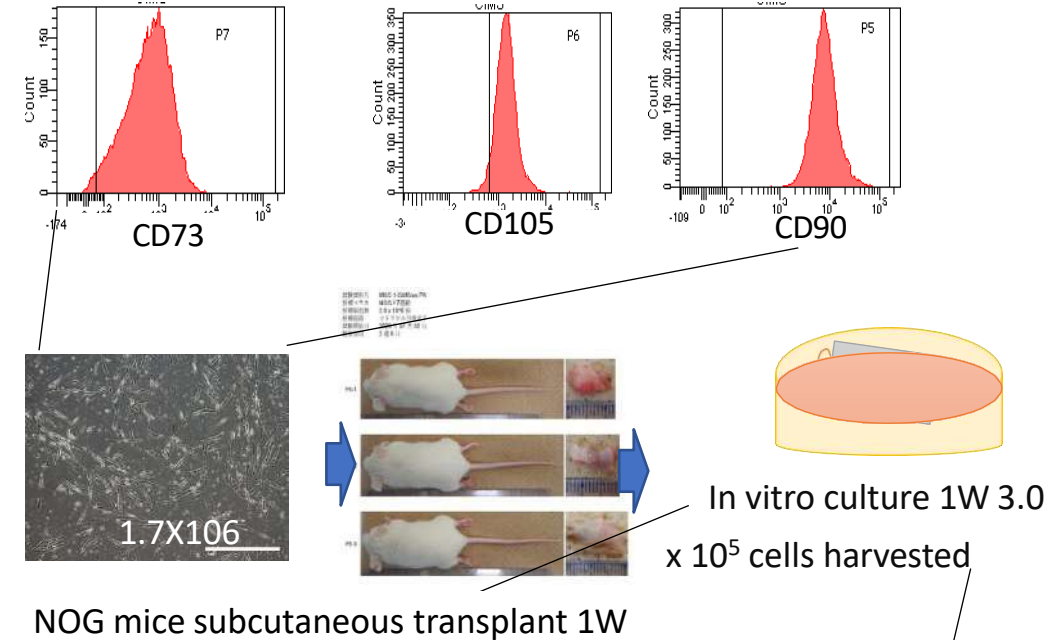
# Is there any pharmaceutical difference between no-aged and aged population?

Yes, MSC with **early passages may retain pharmaceutical potential**, whereas **late passages may not**.  $\Rightarrow$  need to determine the permissible passage number that maintains pharmaceutical potential.

## P3 (stem cells) CiMS MSC-1



## P8 (non-stem cells) CiMS MSC-1

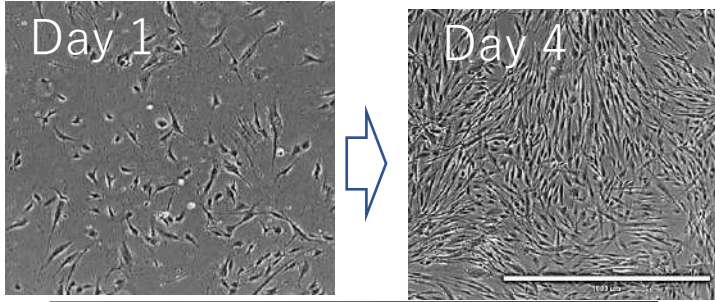


# However, MSCs stop growing in late passages regardless of medium or cell source

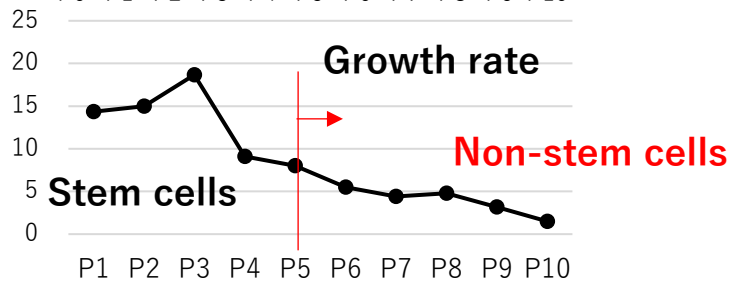
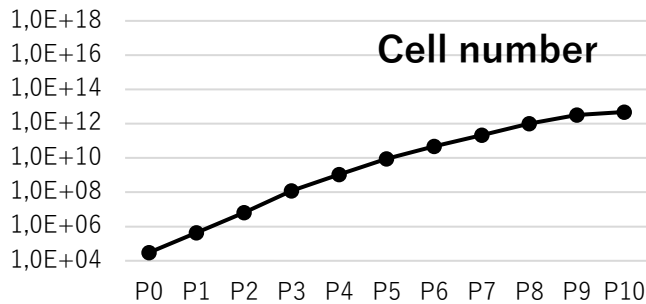
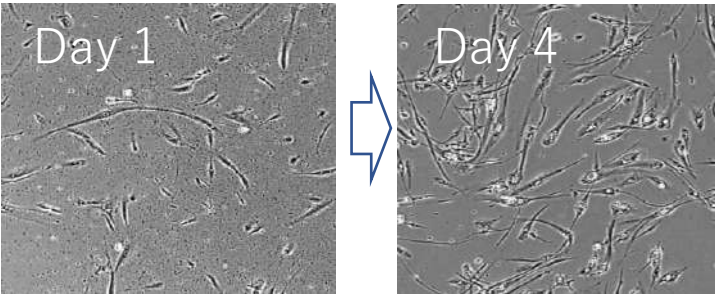
## Non-attenuating cell growth in early passage can be a characteristic feature of all MSCs

CiMS

P3

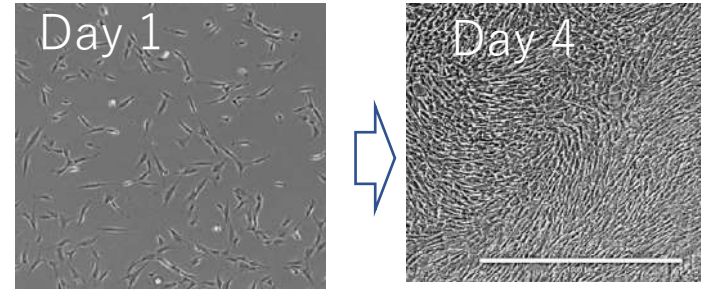


P8

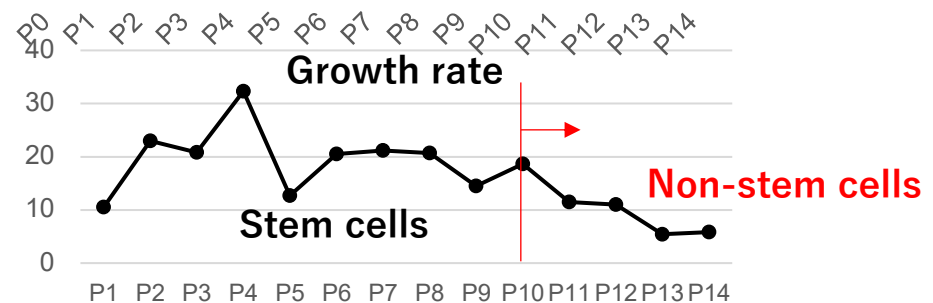
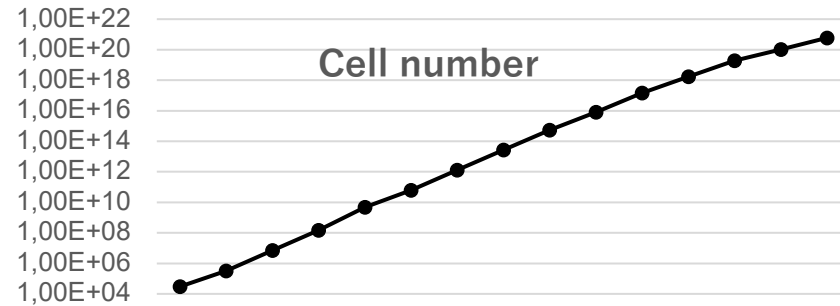
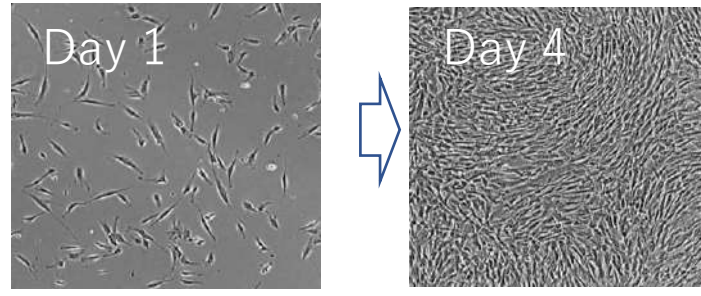


Cellartis

P3



P8

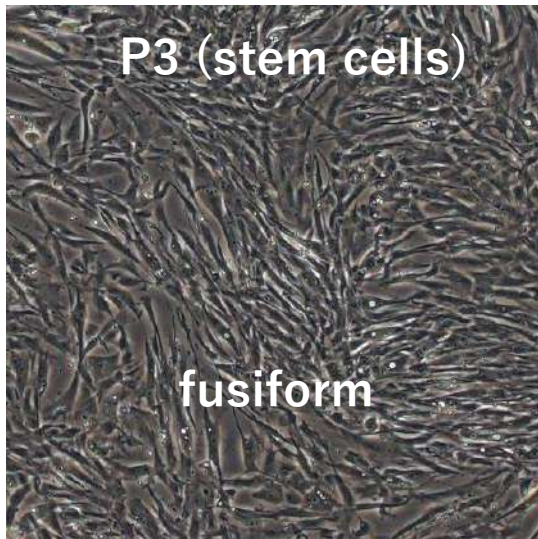


Stem cell population:  
Cell population **retains**  
self-renewal potential

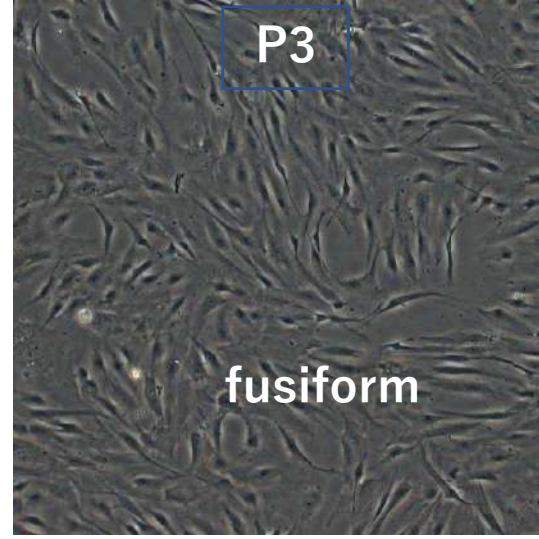
**Non-stem cell population:**  
Cell population **loses**  
self-renewal potential

**Cell morphology in early passages may differ from that in late passages.  
⇒ Cell morphology can be a process parameter (PP) to harvest the target cells**

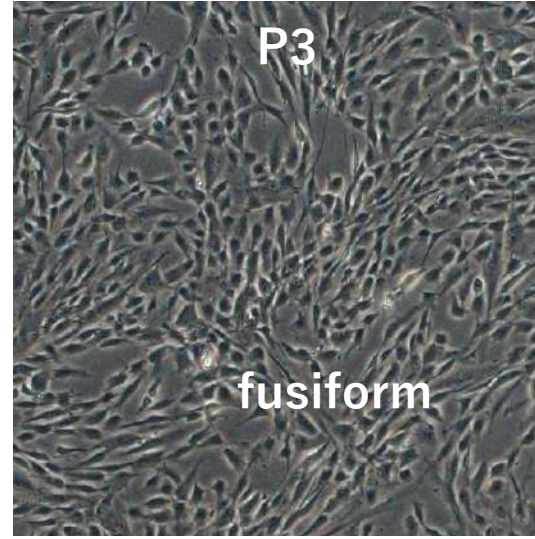
**CiMS**



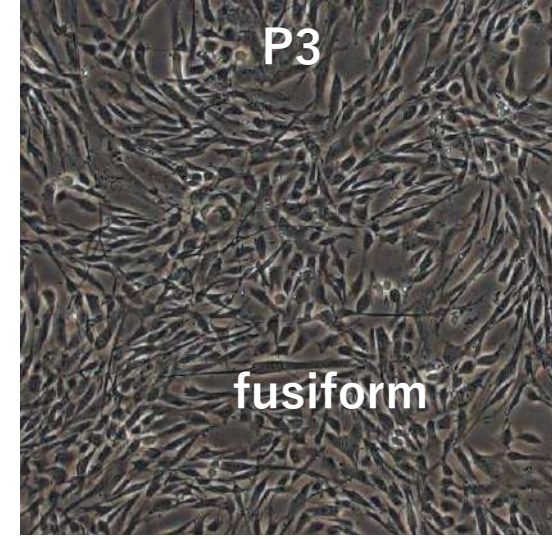
**StemPro**



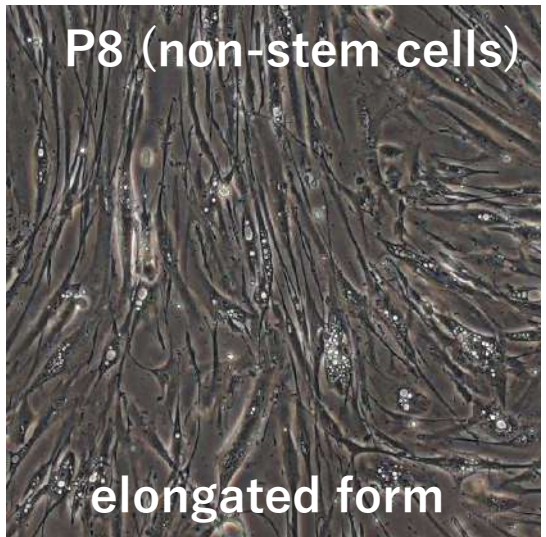
**ADSC-4**



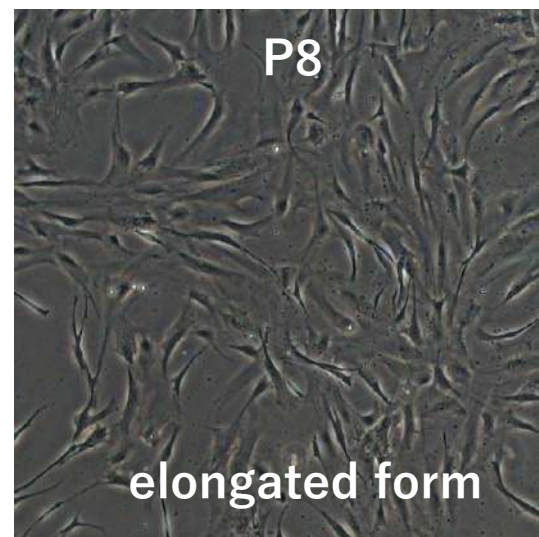
**Cellartis**



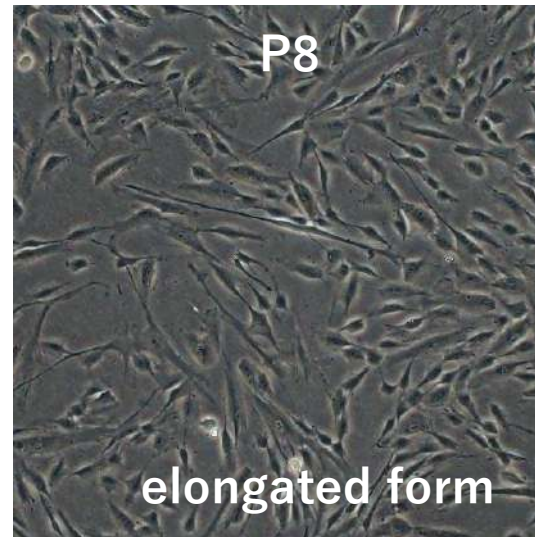
**P8 (non-stem cells)**



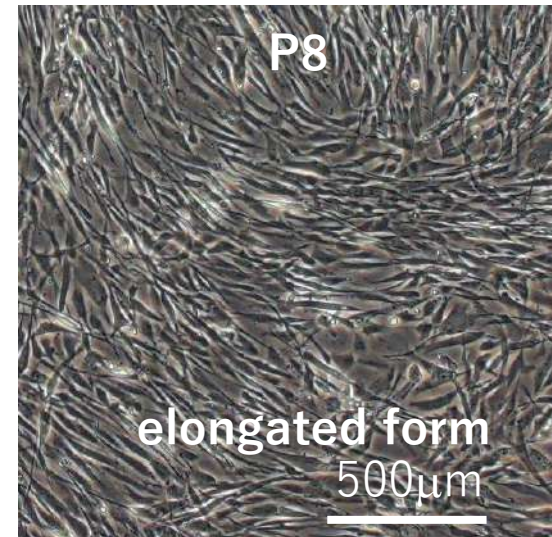
**P8**



**P8**



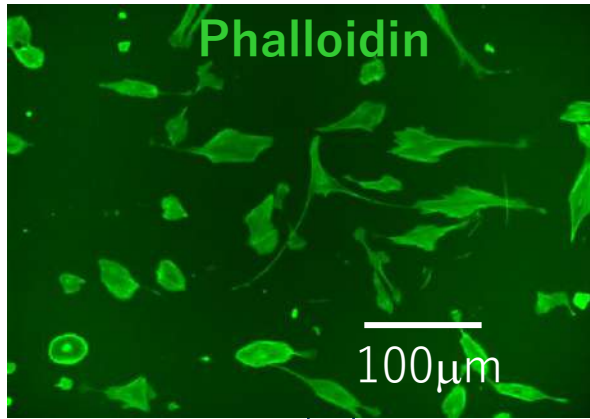
**P8**



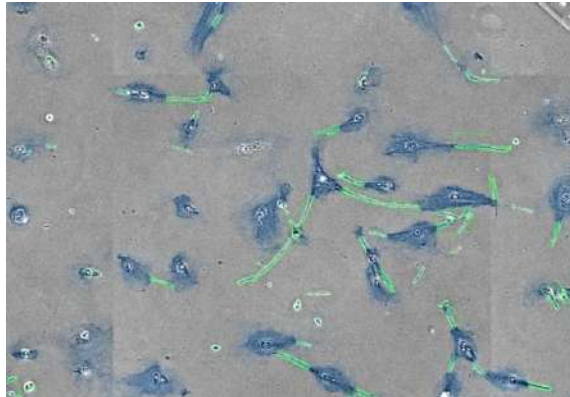
**MSC-4 (adipocyte origin)**

# Cell morphology defined by area of pseudopods with AI can be a PP

Cell pocket Shimadzu



Detection of pseudopods



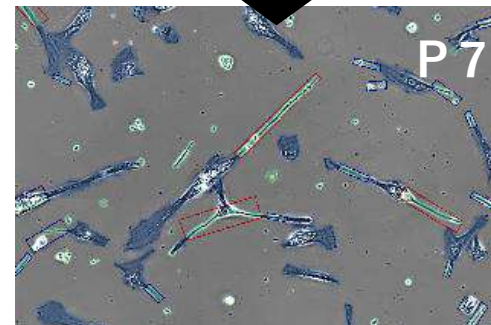
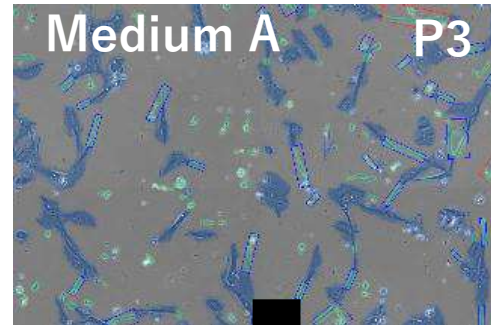
Retain Homeostatic feature  
Target (stem cells)

off-target (non-stem cells)

Loss Homeostatic feature

MSC-1 CiMS

Passage number	%
	MSC-1
3	3.2
4	3.8
5	3.8
6	5.7
7	6.8
8	8.8
9	9.7
10	10.7



Retain Homeostatic feature

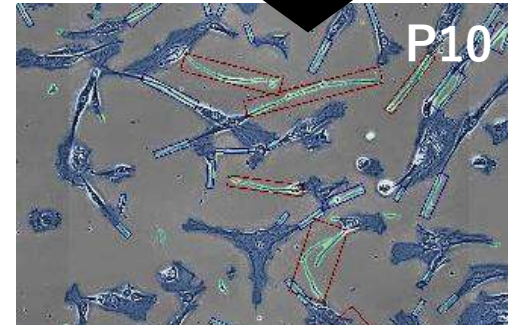
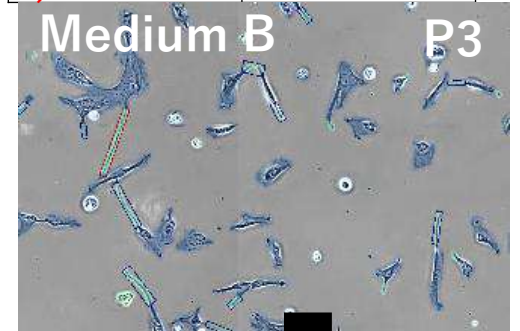
Target (stem cells)

off-target (non-stem cells)

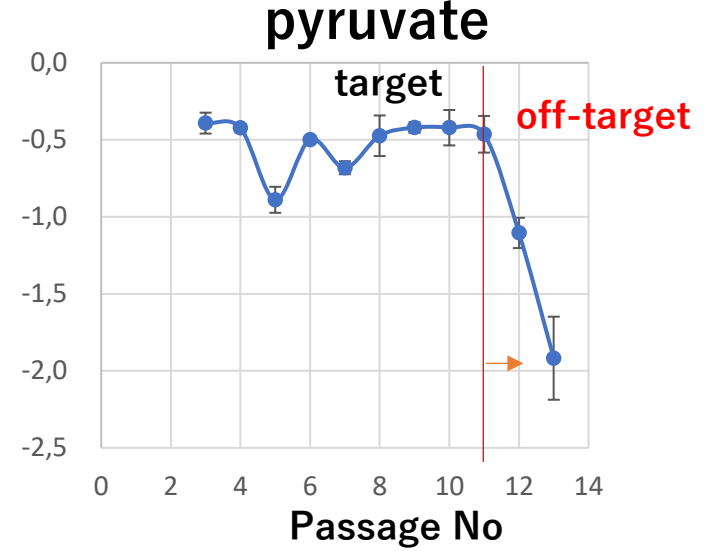
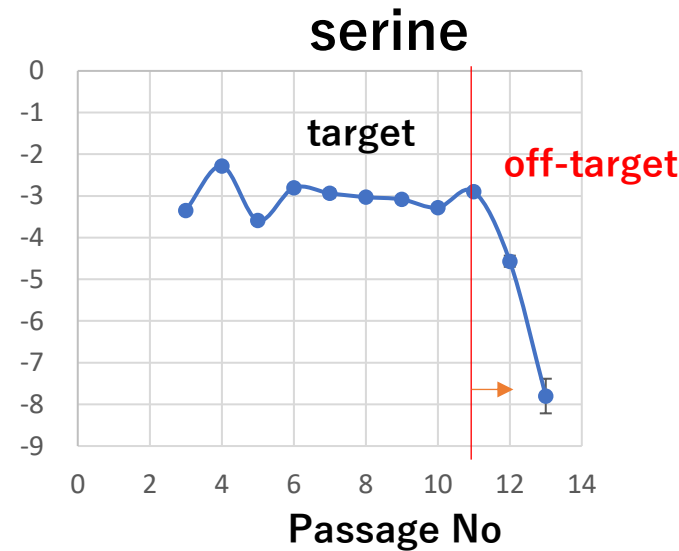
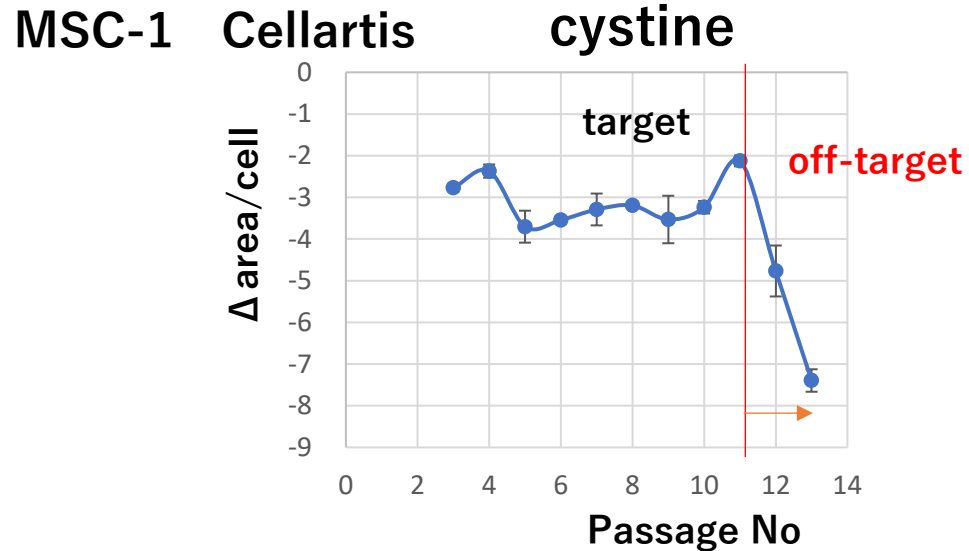
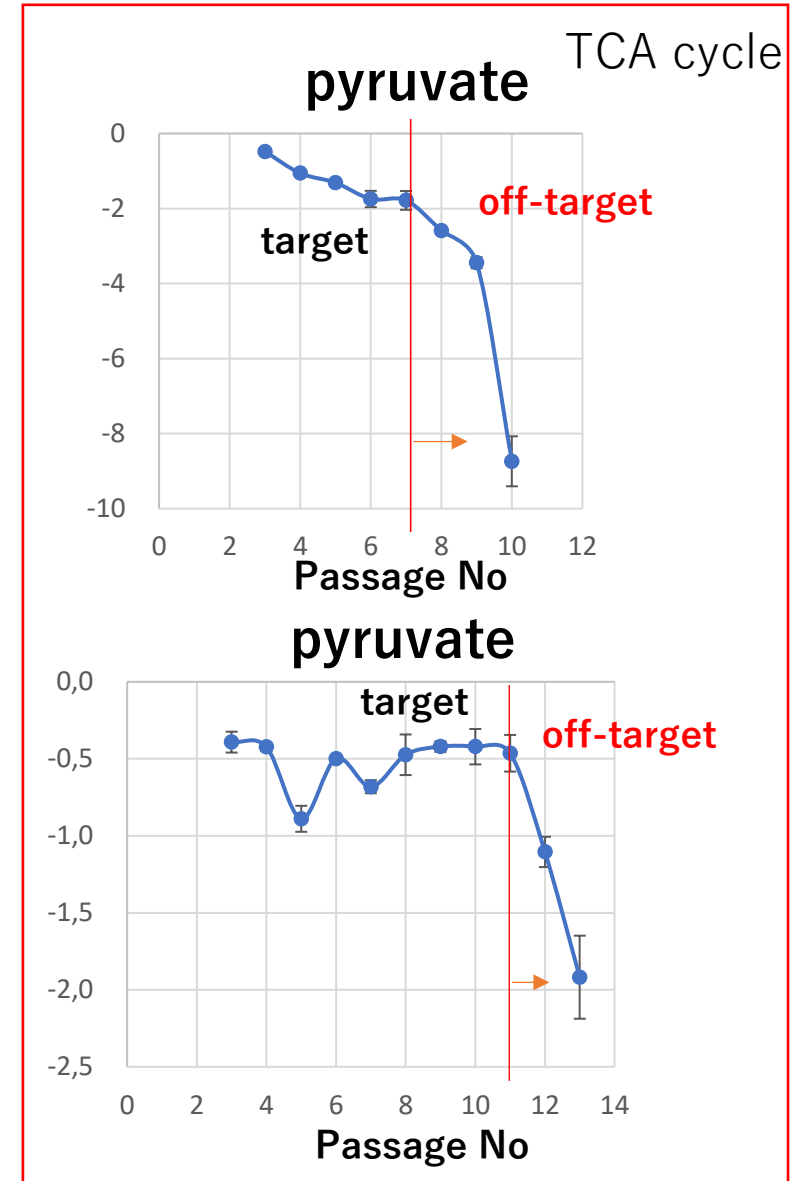
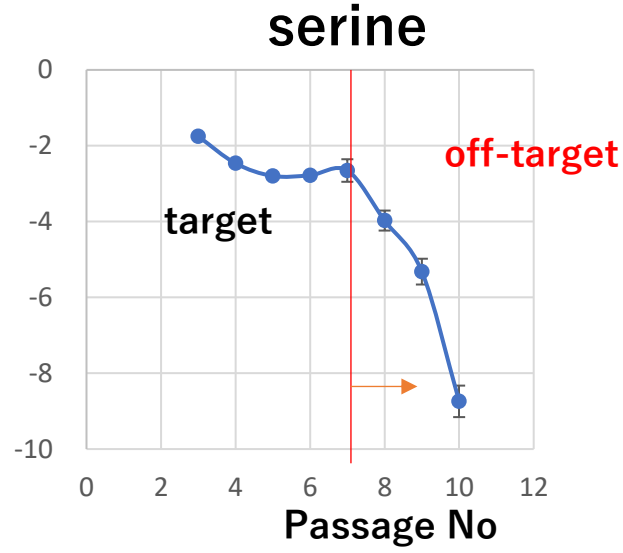
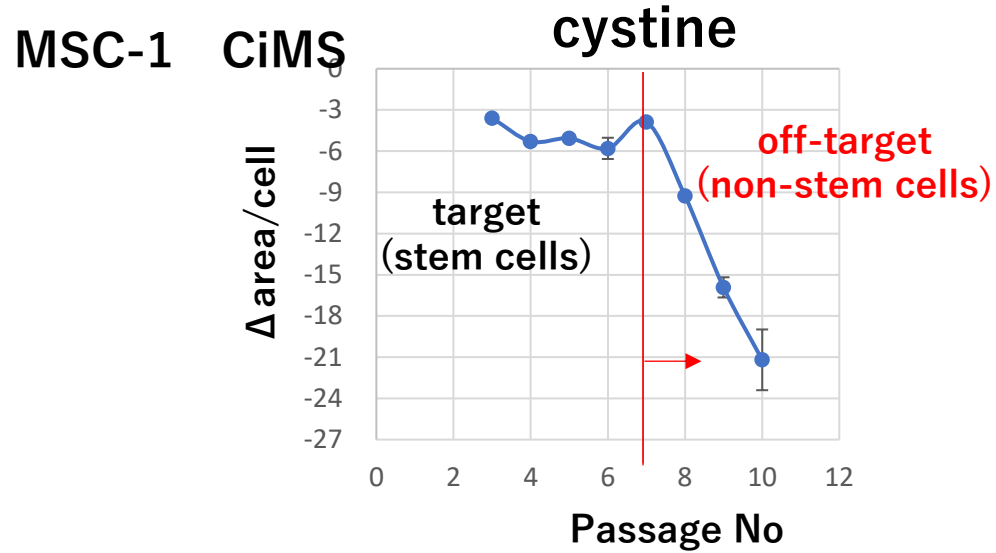
Loss Homeostatic feature

MSC-1 Cellartis

Passage number	%
	MSC-1
3	2.9
4	3.4
5	3.5
6	4.0
7	4.0
8	5.4
9	10.7
10	11.2

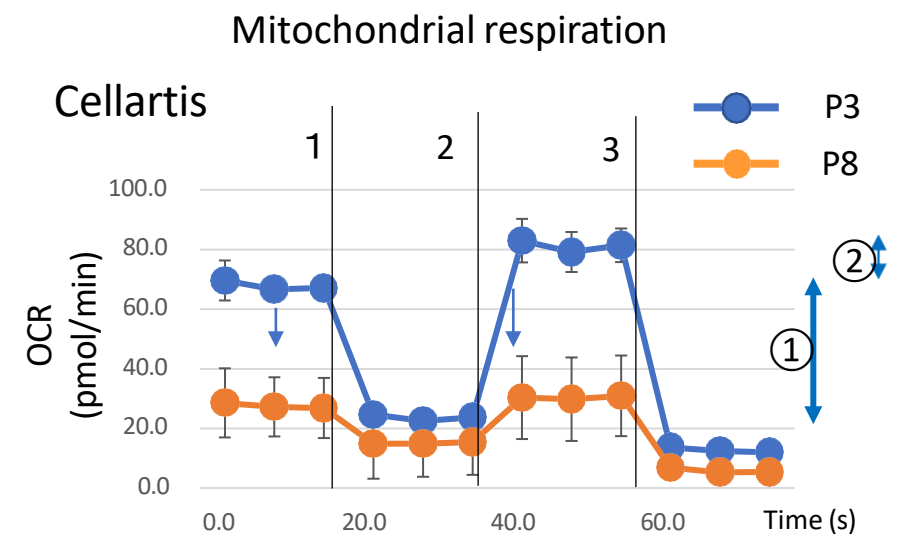
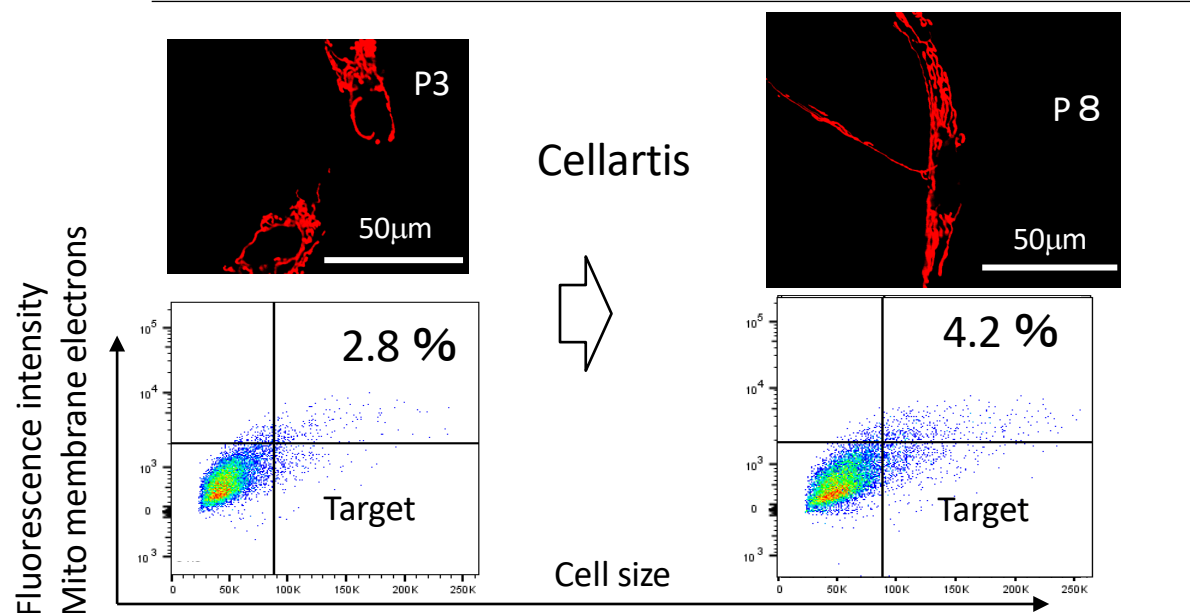
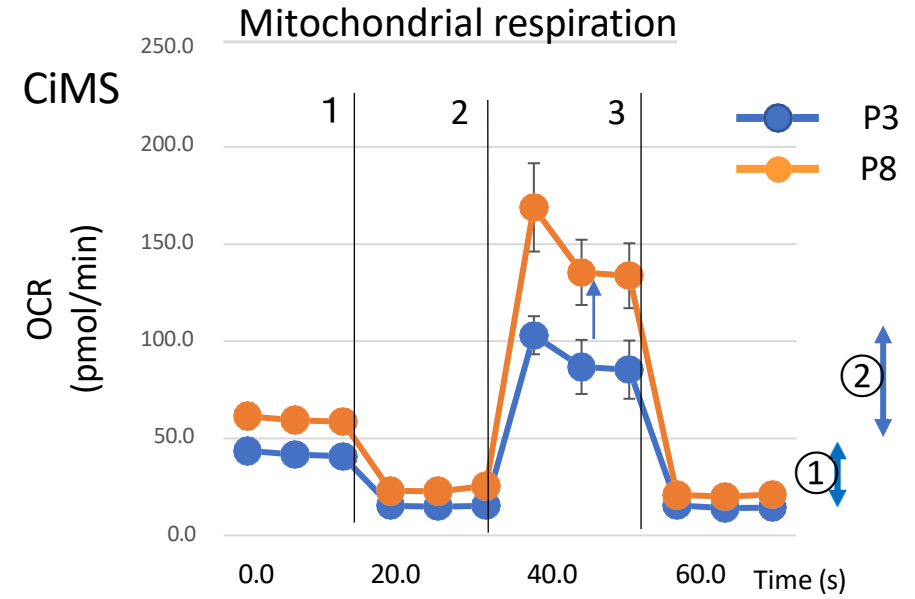
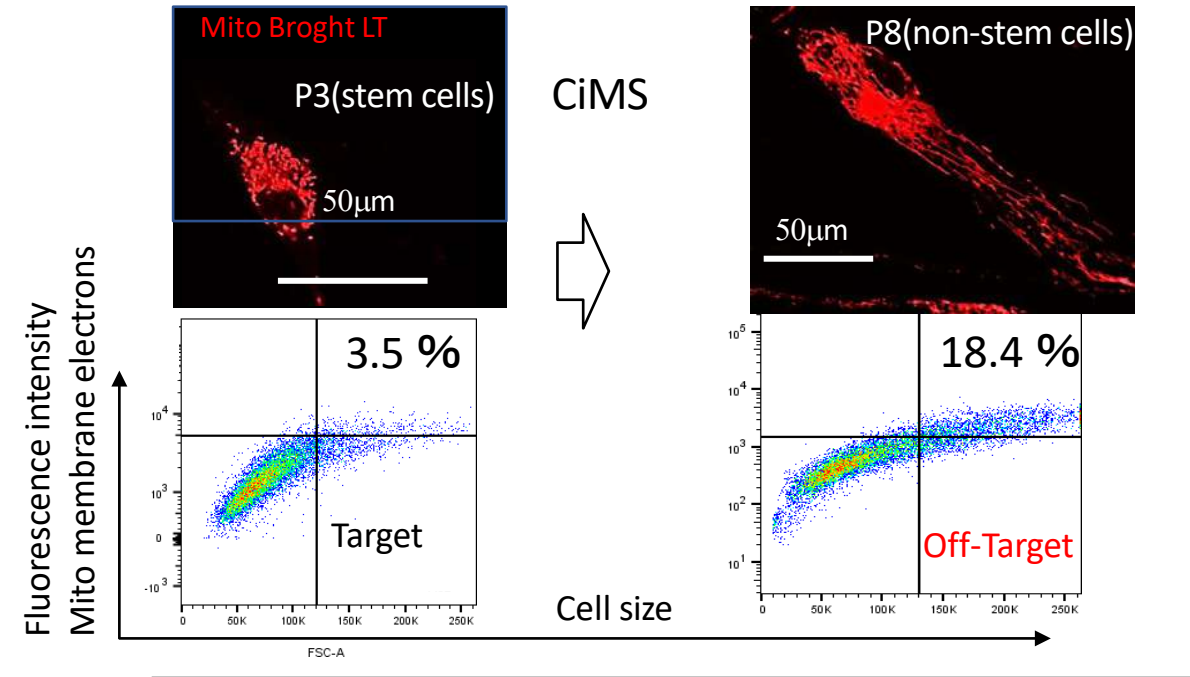


# Quantitative analysis of reluctant consumption in medium can be a PP

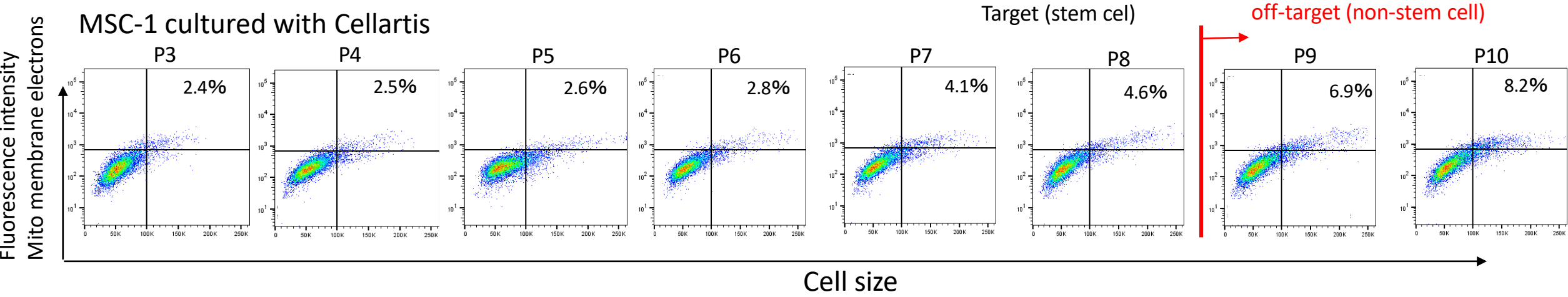
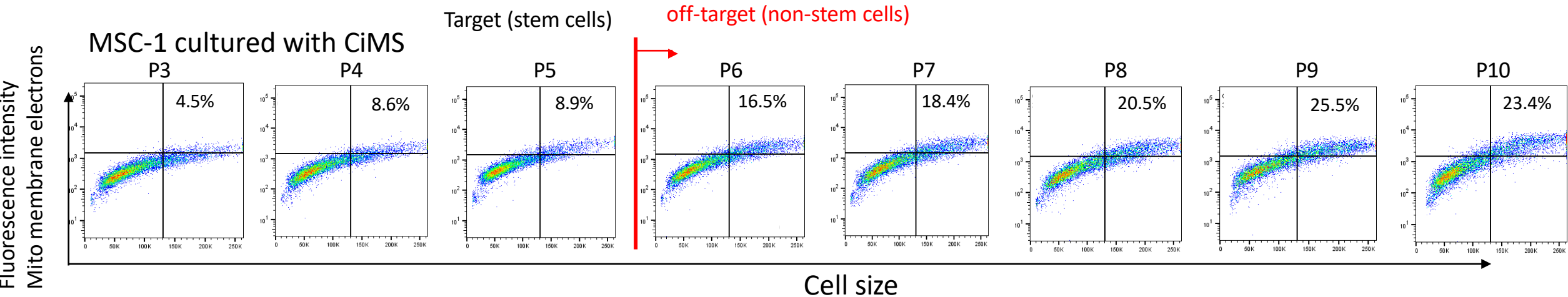


Δarea/cell: area of the analyte peak of the relevant amino acid by LC-Mass for its quantification /single cell

# Deterioration of mitochondria is medium type and passage number dependent



# Mitochondrial size measured by membrane electrons and size of MSCs can be critical PP for harvesting target cells



# PPs that can define the CQAs related manufacturing of MSC

## Process parameters (PPs) and their tentative control values that enable to harvest cells retaining self-renewal potential

	CiMS	Cellartis
No reduction of cell growth : growth rate > X 10	P<6	P≤10
Retain homogenous cell morphology : Pseudopods ≤5.4%	P<5	P≤11
Retain Redox balance : cystine consumption ≥ -3, serine consumption ≥ -3 Δarea/cell	P<7	P≤11
Retain TCA cycle activity : pyruvate consumption ≥ -1.0 Δarea/cell	P<7	P≤11
No mitochondrial deterioration by ROS : membrane bound electron/cell size ≤ 4.6%	P<5	P≤8

CPP

## Anti inflammatory potency of cells harvested with PPs

IL-6 PBMC co-culture with MSC 24 h and 72 h 20 ng/mL

IL-10 PBMC co-culture with MSC 24 h and 72 h 1.0 ng/mL

Treg induction at 72 h from PBMC co-culture with MSC > 5.0 %



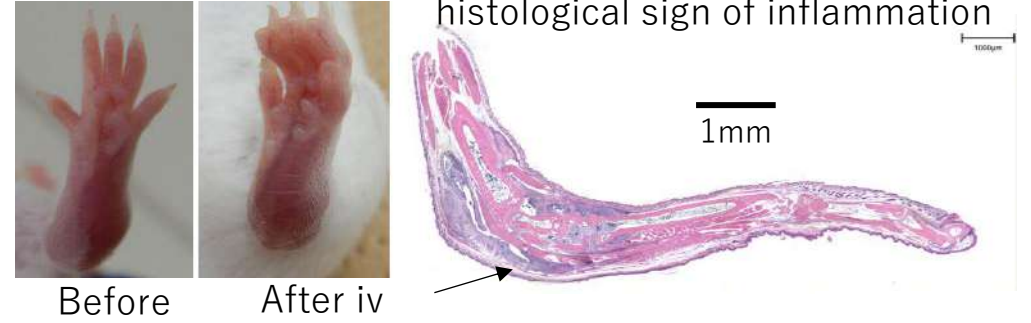
Efficacy of cells harvested with stipulated PPs can be verified in vivo, which in turn serves as validation of the stipulated PPs.

# Harvest cells by PPs $\Rightarrow$ check validity of cells harvested by PPs *in vivo* $\Rightarrow$ check validity of stimulated PPs $\Rightarrow$ determination of CPPs and CQAs

Non treated (SKG mouse)



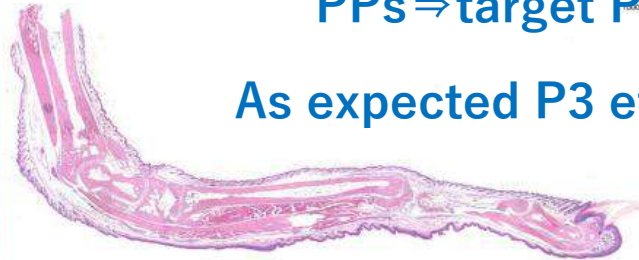
PBS



CiMS P3 (target cells)



PPs  $\Rightarrow$  target P3-P5  
As expected P3 effective



Cellartis P3 (target cells)



PPs  $\Rightarrow$  target P3- 8  
As expected P3 effective



CiMS P8 (off-target cells)



As expected P8 not effective



Cellartis P8 (target cells)



As expected P8 effective



# Automated cell manufacturing system with in-process monitoring that realizes QbD-based manufacturing

## Intelligent Cell Processing System



Refrigerator module

Incubation module

- ✓ Closed automated culture system
- ✓ Real-time vision tool
- ✓ In process medium analysis
- ✓ Auto sampling for off-line QC
- ✓ Manufacturing data in IT format



Registration of raw materials

### MATERIAL

These are registered materials. If you want to Edit / Delete, touch name of material and push button in right side.

Type	Manufacturer, Model, Name	Material ID (1-17 digit)	Expiry date	Comment	Register, Update
Reagent bag	Thermo Fisher, SS00118-1, Reagent bag for Dissociation TriplEselect(concentration 0.0625)	2 12 20181118 000001	2022/12/31	XXXXXXXXXX XXXXXXXXXX XXXXXXXXXX	2018/10/05 下午05:00 2018/10/05 下午05:00
Reagent bag	Thermo Fisher, SS00118-1, Reagent bag for Essential8 +Rocknhhibitor	2 31 20181118 000001	2022/12/31	XXXXXXXXXX XXXXXXXXXX XXXXXXXXXX	2018/10/05 下午05:00 2018/10/05 下午05:00
Vessel	XXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXX XXXXXXXXXXXXXXXXXX	1 D1 20181118 000001	2022/12/31	XXXXXXXXXX XXXXXXXXXX XXXXXXXXXX	2018/10/05 下午05:00 2018/10/05 下午05:00

Buttons: Edit, Delete, + New

Batch\_181119

Culturing with cellstack 2 layers.  
Passaging with cellstack 10 layers.  
Imaging with cellstack 2 layers.

GUIDANCE  
2018/11/24 12:00  
Scan material ID code.

REAGENTS  
2018/11/23 10:50 -  
pH calibration water (high)

HOME CULTURE MATERIAL RECIPE SETTINGS

List of registered raw materials



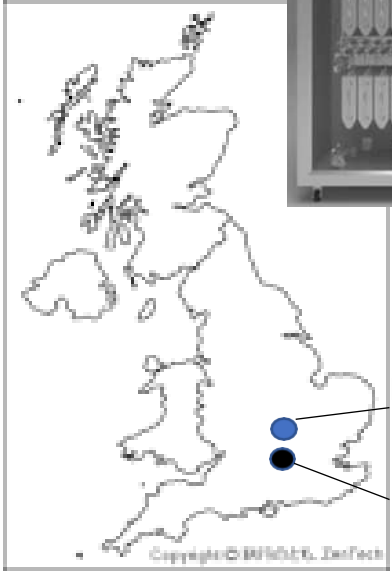
Installation of fully closed cell culture unit



Setting culture parameters and instrument functions



# The QbD-based automated cell manufacturing system CellQualia was evaluated by UK Stem Cell MHRA, a mirror image experiment



Patters Bar  
MHRA NIBSC  
UK Stem Cell  
London



Kobe  
KCM I

Comparability test

MHRA trialling pioneering stem cell robot that could transform the availability of life-saving cell therapies - GOV.UK ([www.gov.uk](https://www.gov.uk/government/news/mhra-trialling-pioneering-stem-cell-robot-that-could-transform-the-availability-of-life-saving-cell-therapies))<<https://www.gov.uk/government/news/mhra-trialling-pioneering-stem-cell-robot-that-could-transform-the-availability-of-life-saving-cell-therapies>>

# Automated closed cell manufacturing system CellQualia was highly rated by MHRA, UK Government

<https://www.gov.uk/government/news/mhra-trialling-pioneering-stem-cell-robot-that-could-transform-the-availability-of-life-saving-cell-therapies>

March 16, 2023

 GOV.UK

[Home](#) > [Health and social care](#) > [Medicines, medical devices](#)

Press release

## MHRA trialling pioneering stem cell robot that could transform the availability of life-saving cell therapies

The MHRA's UK Stem Cell Bank is one of only two places in the world to test this technology.

From: [Medicines and Healthcare products Regulatory Agency, Department of Health and Social Care](#), and [The Rt Hon Steve Barclay MP](#)

Published 16 March 2023

 SINFONIA

 Cyto-Facto

An innovative new robot that grows stem cells, the CellQualia™ Intelligent Cell Processing System, is being trialled by the Medicines and Healthcare products Regulatory Agency (MHRA). This robotic system has the potential to bring safer and more cost-effective treatments to people with a wide range of diseases. It is currently the only one in the world outside of Japan, where it was developed.

This trial is part of a UK-based international research programme, launched in 2021, and a partnership between the MHRA, SAKARTA (a Scottish Regenerative Medicine start-up), and Sinfonia Technology Co. Ltd (a Tokyo-based electrical equipment manufacturer), supported by Foundation for Biomedical Research and Innovation at Kobe (FBRI). The UK Stem Cell Bank is testing the robot over a 12-month period to see whether the cells produced by the fully automated Intelligent Cell Processing System meet the standards needed for them to be used in the manufacture of potentially life-saving treatments.



# Automated cell manufacturing award (2023) UK



## Developing cell therapies with a stem cell robot

The UK was the second country to trial a pioneering stem cell robot to improve the manufacture of safe and cost-effective cell-based therapeutics. The CellQualia™ Intelligent Cell Processing System, which was developed in Japan, automates the culturing of cells in real time and stabilizes the process by utilizing intelligent process analytical technology.

# Automated cell manufacturing award (2024) Japan



2024年で43回目を迎えた「日経優秀製品・サービス賞」では、グローバル市場に挑戦する製品・サービスが目立った。あらゆる分野で課題となっている人手不足に対応するものも多く、医療や宇宙など先端分野に自社で培った技術を応用する地域企業も存在感を示した。



生産財

## 自動細胞培養装置「CellQualia」

シンフォニアテクノロジー

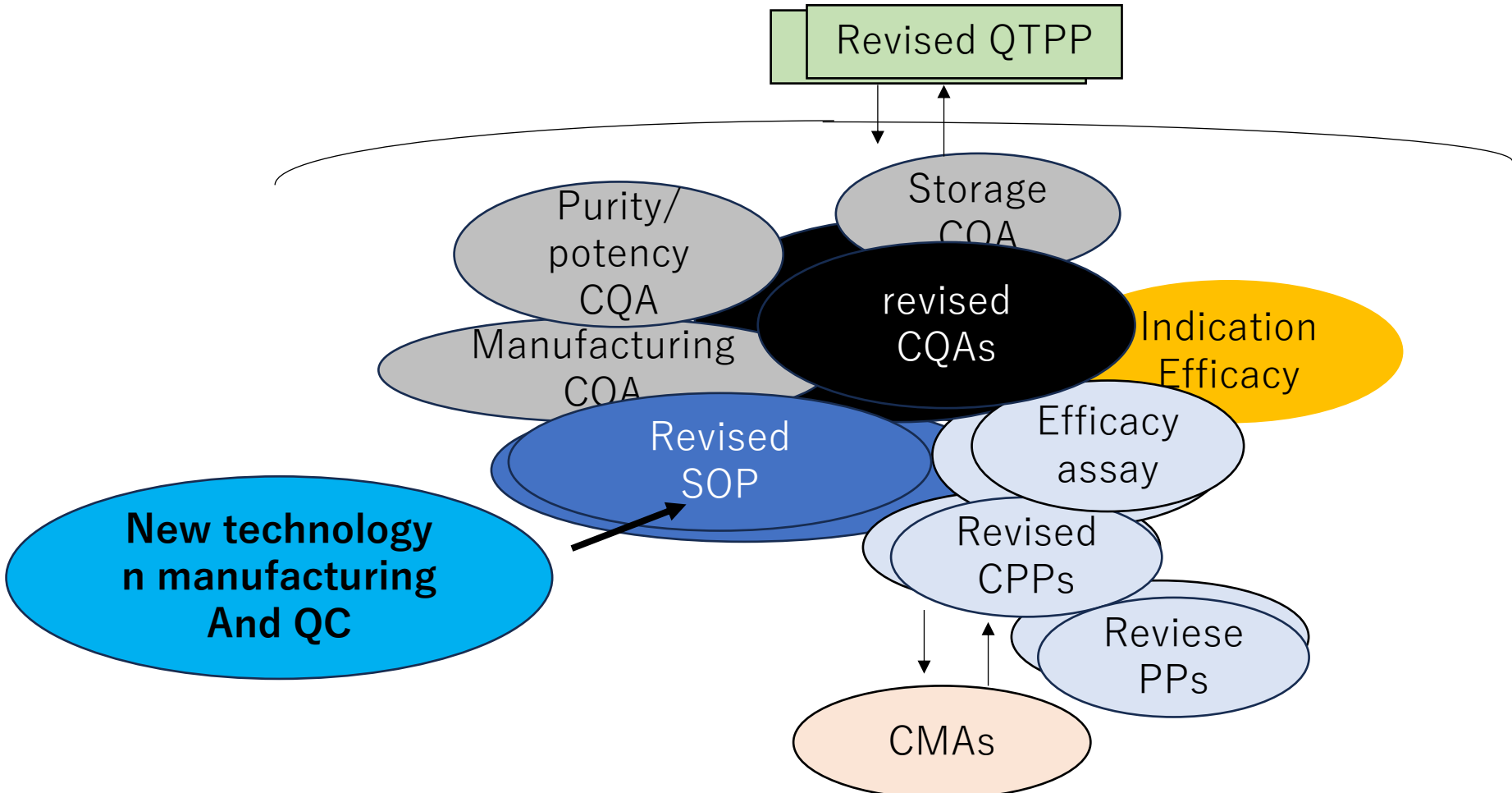
密閉型の自動細胞培養装置。神戸大学の川真田伸特命教授と共同で開発した。人体の組織や臓器を再生して体内に移植する再生医療ではあらゆる細胞に分化するiPS細胞の活用が期待が高まっている。ただ、高品質な細胞の大量生産が課題になっている。

新装置は細胞培養の工程を密閉された機器内で自動で繰り返す。培養データを常に監視しているため、細胞の品質も担保できる。培養後の検査などのコストを少なくできるといった利点がある。

細胞培養は通常、タネとなる細胞を培地にまいて増やしより大きな培地に移し替え、さらに増やす工程を繰り返す。手作業では技術者の練度に左右される。できあがった細胞に雑菌が混じっていないかの検査も必要になっている。

<https://www.nikkei.com/edit/news/special/newpro/2024/>

# How can the life cycle development of a product be achieved through a QbD-based approach?



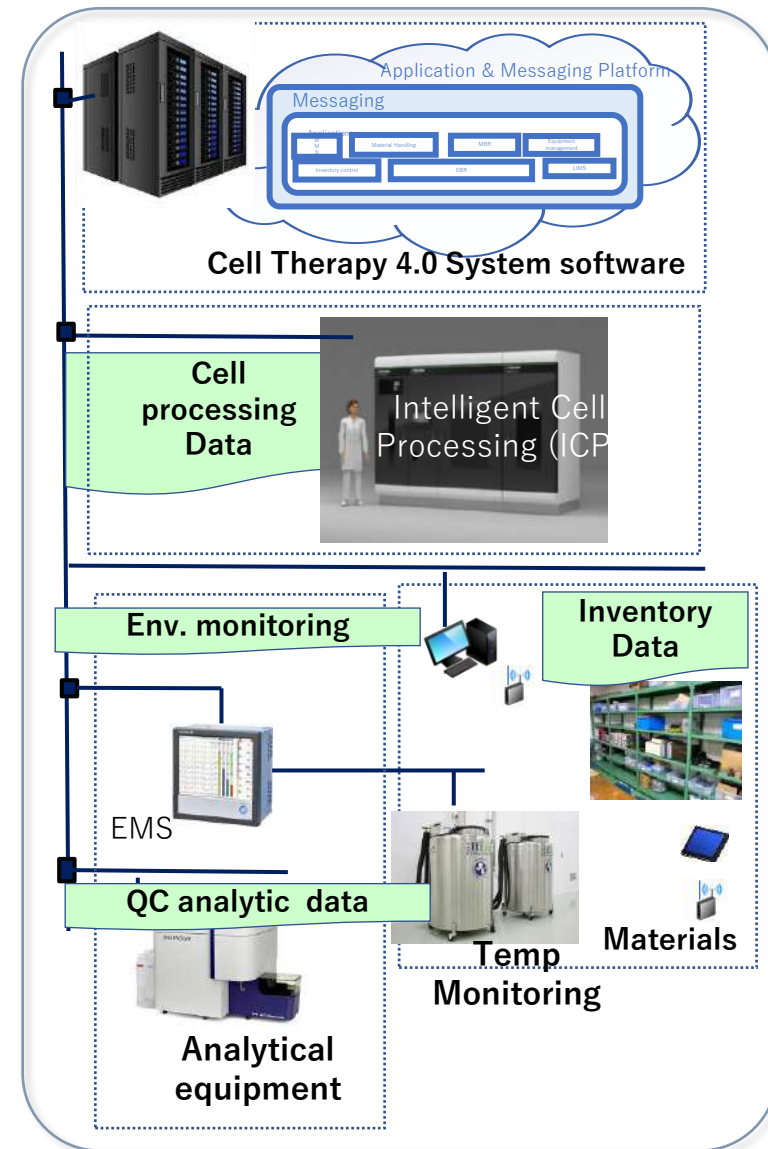
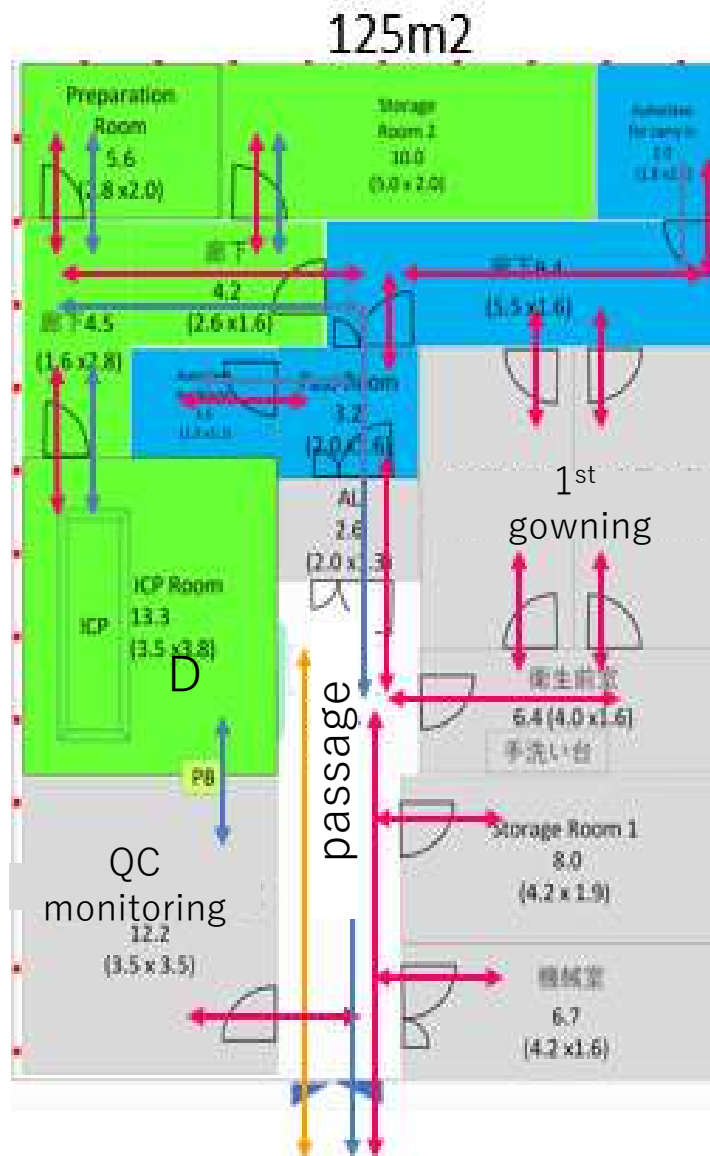
How does QbD-based manufacturing become feasible ?

Though digitization of the manufacturing related data.

# QbD based-cell manufacturing Solution Lab in KCMCI



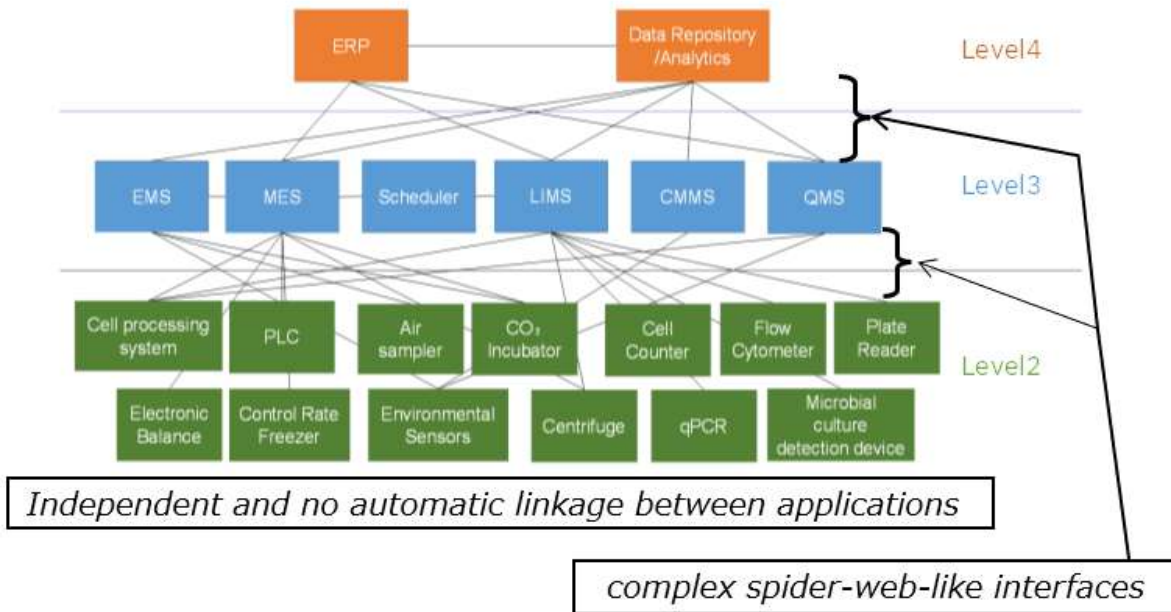
## Cloud AMP C&G system



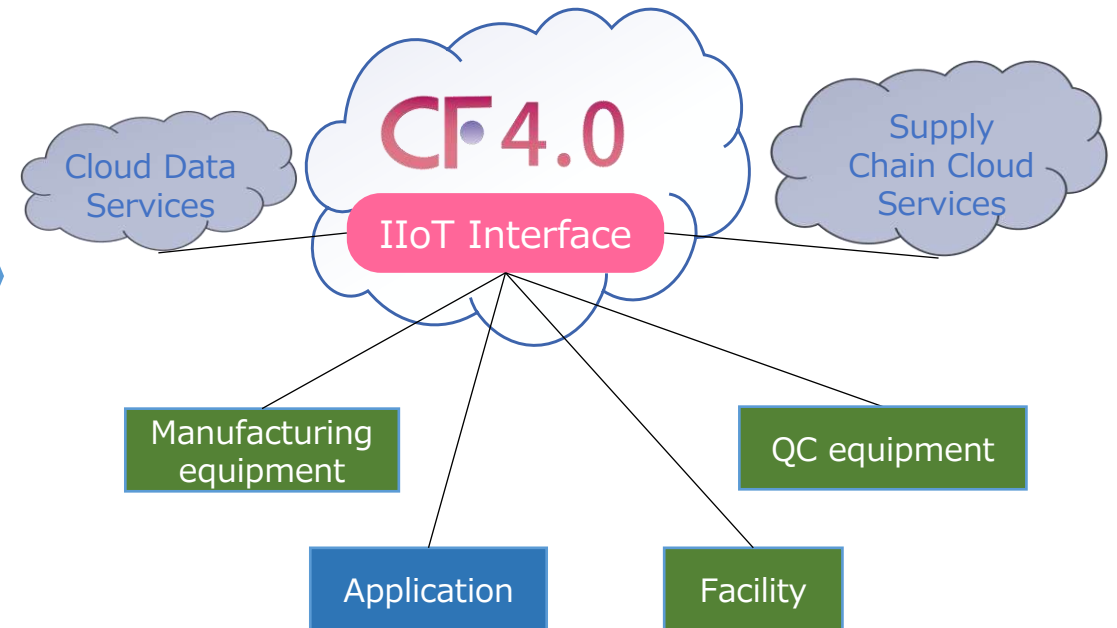
# System Architecture

- SaaS Cloud Service (Azure/AWS) connected with secure leased line
- Automatic linkage integrated through IIoT Interface
- Seamless information connection with Manufacturing equipment, QC equipment, Facility, Application, and various Cloud Services

Before



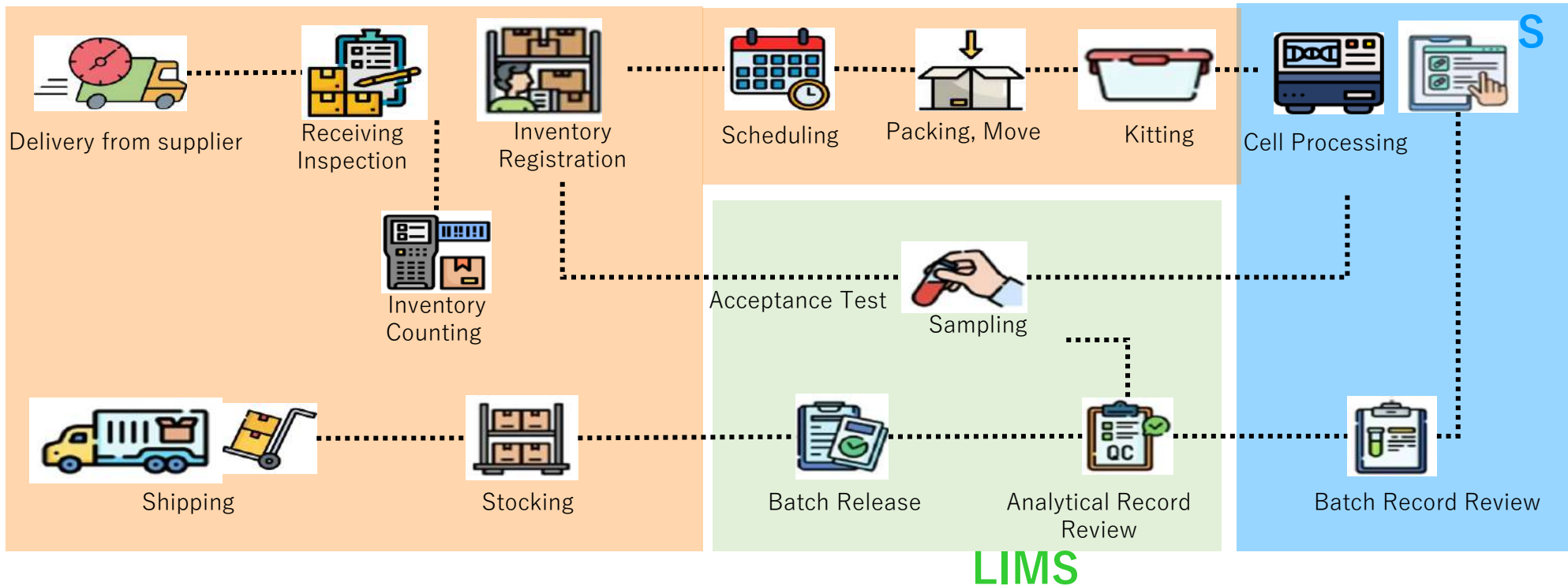
After



# The Conventional System cannot Fully Manage the Entire Process

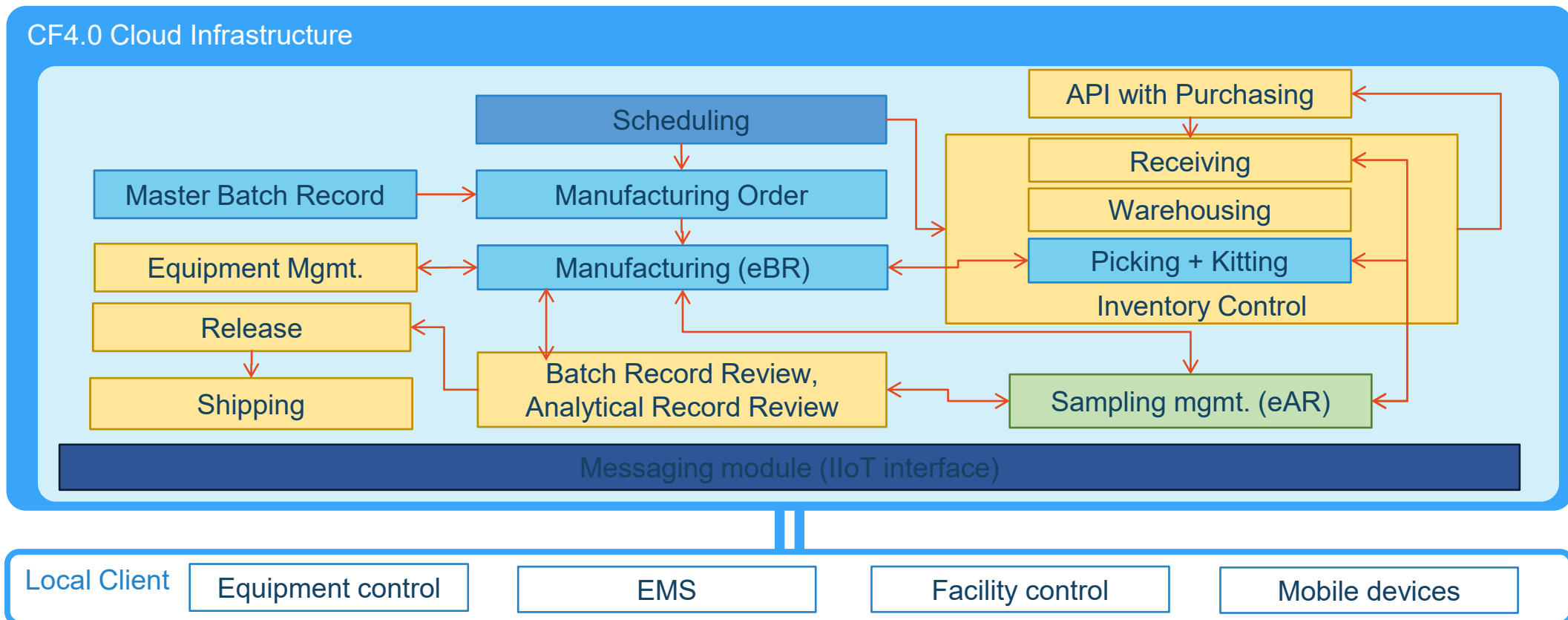
- CF4.0 includes all end-to-end standard process models for Cell & Gene Therapy manufacturing in one platform.

ERP

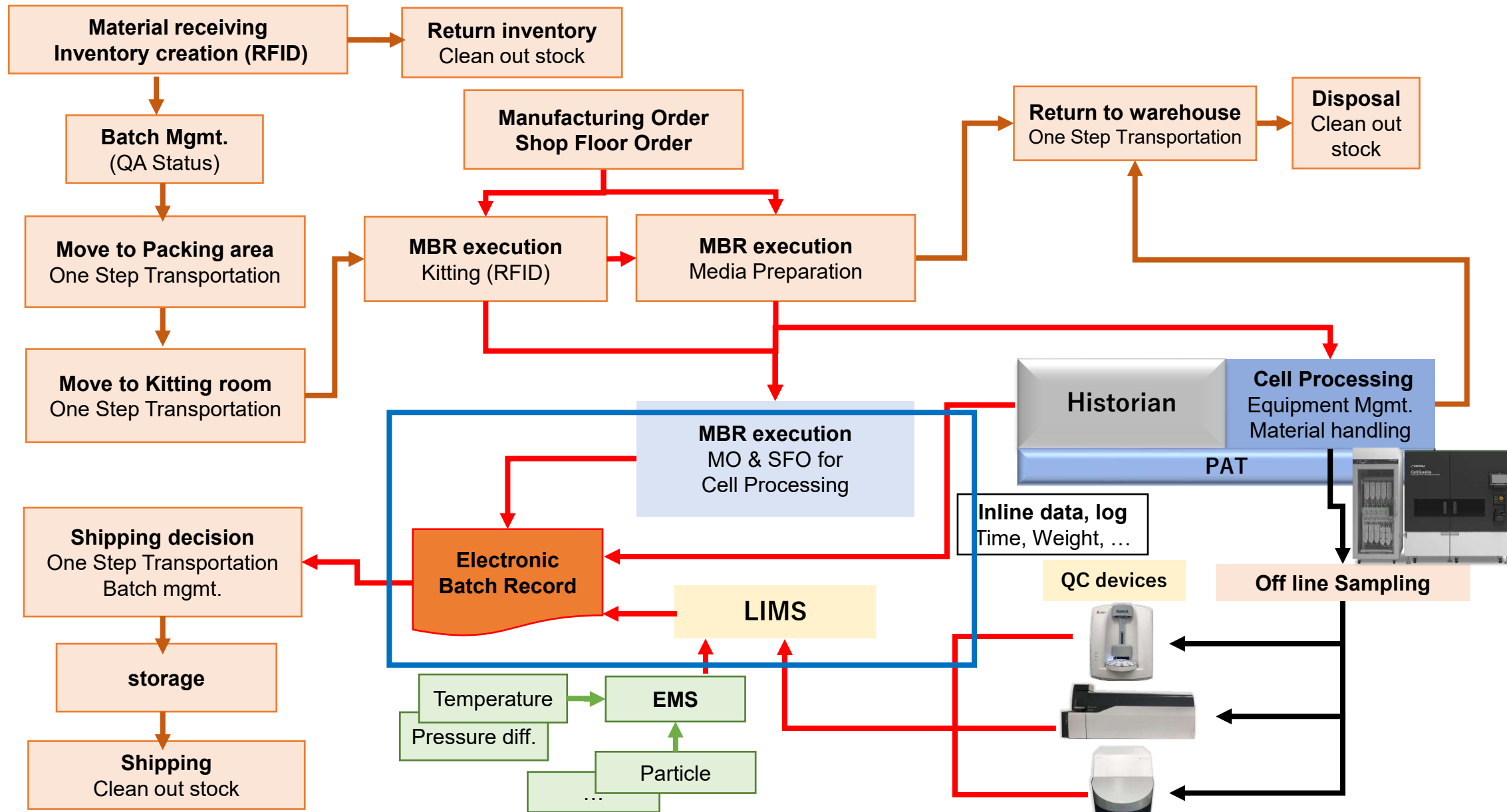


# Application Architecture

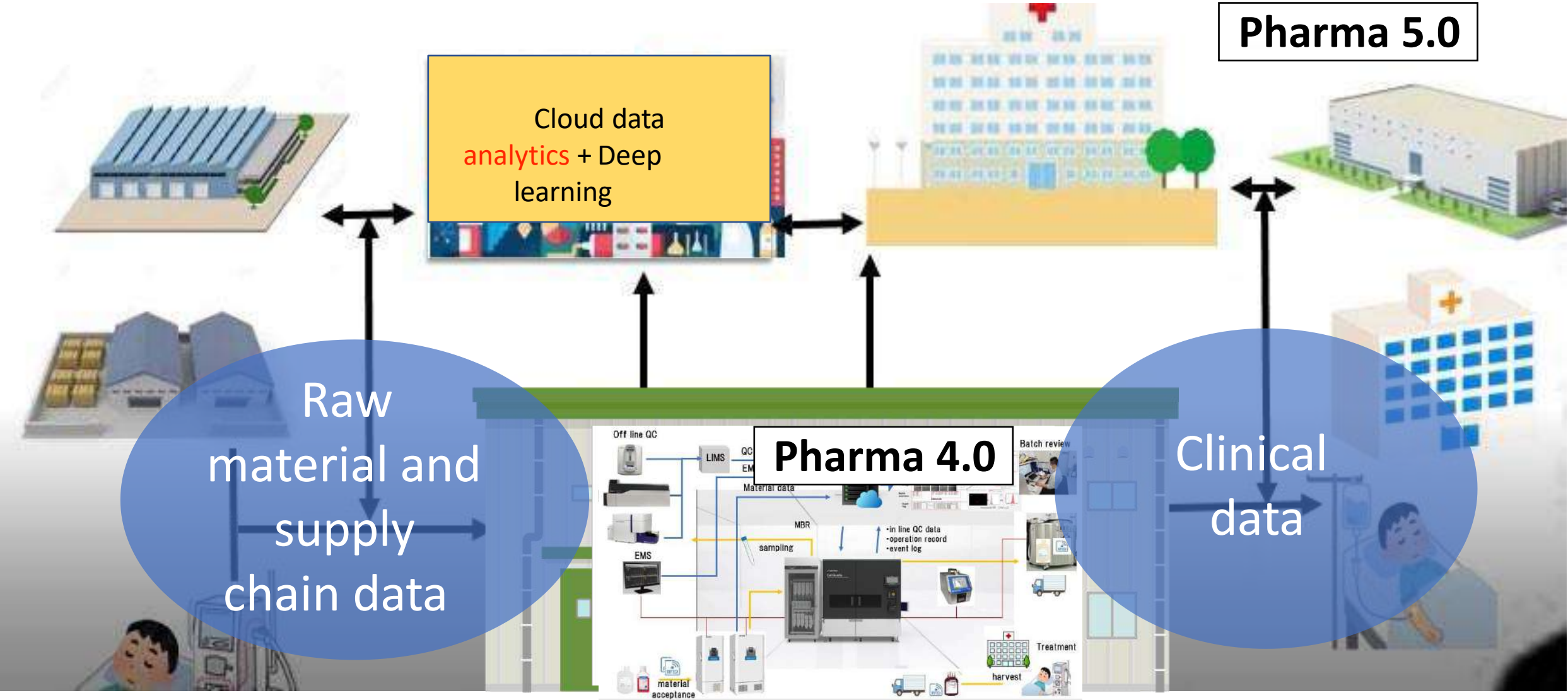
- Provide all necessary functions for Cell & Gene Therapy manufacturing processes
- Integrate all process modules of ERP, MES, LIMS, Scheduling, ... into single on Cloud-based architecture
- Collect all data/records from Equipment, Facility, Mobile, and Application



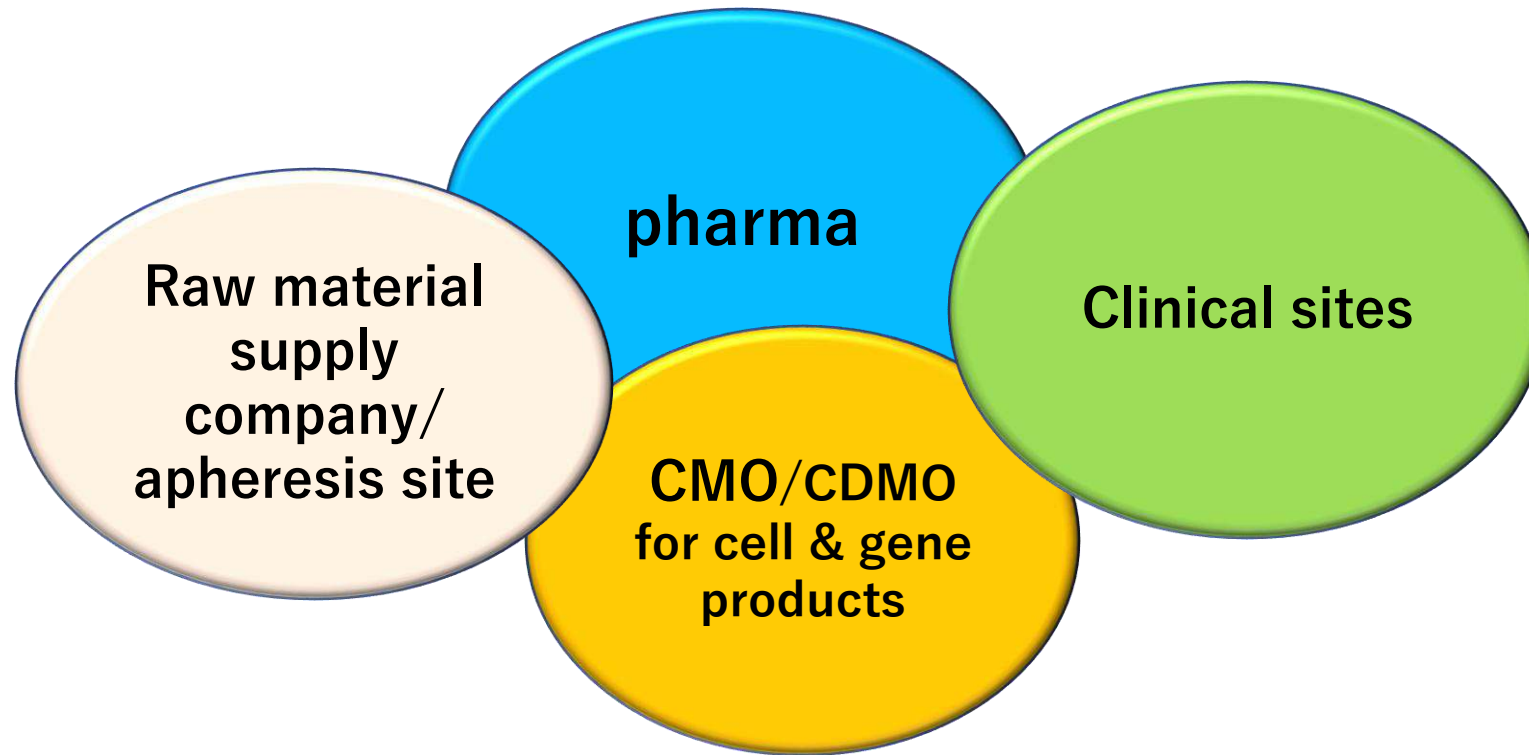
# Development of cell manufacturing control system



# Manufacturing information in IT format can enable linkage to manufacturing, supply chain and clinical data



**For improved treatment outcomes and new drug development, the formation of an ECO system through information sharing is essential.**



**Manufacturing information shall be digitized on the CMO side to combine it with supply chain and clinical information data  
⇒ Need for QbD-based manufacturing**

# Digitization of process and QC information of cells manufacturing is essential for cell product development

Online Exclusives | November/December 2022

<https://ispe.org/pharmaceutical-engineering/november-december-2022/why-qbd-and-digitalization-are-foundations-cell>



CONFERENCES & TRAINING | MEMBERSHIP & COMMUNITIES

PHARMACEUTICAL  
ENGINEERING

SECTIONS

TOPICS

WHITE PAPERS

ISSUES

ISPEAK BLOG

ABOUT

JOIN ISPE

Article by David Margetts of Factor Talk

PHARMACEUTICAL ENGINEERING / NOVEMBER / DECEMBER 2022 / WHY QBD AND DIGITALIZATION ARE FOUNDATIONS FOR CELL THERAPIES

Online Exclusives | November / December 2022

## Why QbD and Digitalization Are Foundations for Cell Therapies

By David Margetts



*An interview with Shin Kawamata of Japan's Foundation for Biomedical Research and Innovation (FBRI) highlights exciting work to move cell therapy toward reliable and scalable commercialization.*

### RECENT UPDATES

[The "Graziella Molinari Women in Pharma Award" Announced for 2022 Edition at the ISPE Italy Affiliate](#)

1 December 2022

[ISPE Singapore Affiliate Conference and Exhibition – 2022 Highlights](#)

1 December 2022

[Data Integrity: An Alternative Approach To Eliminate Blind Spots](#)

1 December 2022

[Making Maintenance a True Asset in Pharma Manufacturing Through Digitalization](#)

30 November 2022

[ISPE Communities of Practice Leaders – Nik Krpan](#)

30 November 2022

[Aseptic Manufacturing Case Studies Preview](#)

29 November 2022

# Conducting

# QbD-based cell manufacturing virtual training course twice/year since 2023

<https://drive.google.com/file/d/1XEdllzMAwkBTwjLAPzS-JPaZyZNeBrZq/view>



Support human resource through the ISCT-CMaT training course

- On line lecturing a QbD-based cell manufacturing -

## THE PRINCIPLES & APPLICATIONS OF CELL THERAPY BIOMANUFACTURING, CHARACTERIZATION & REGULATORY

Live-Virtual Course • September 23 – November 29, 2024

“  
THE COURSE COVERS THE CONCEPT OF A QBD-BASED AUTOMATED CELL MANUFACTURING SYSTEM WITH IN-PROCESS MONITORING. HOW DOES IT COMPARE TO A CONVENTIONAL PRE-PROGRAMMED ROBOT-BASED CELL MANUFACTURING SYSTEM ?

LEARN HOW QBD-BASED MANUFACTURING DATA WILL BE DIGITIZED, ENABLING THE MANUFACTURING PROCESS TO BE VISUALIZED TO HELPING TO DEFINE MANUFACTURING-RELATED CQAS AND THE SEAMLESS DEVELOPMENT OF THE PRODUCT THROUGHOUT ITS LIFECYCLE



Shin Kawamata, MD, PhD  
Cyto-Facto  
Course Speaker

**REGISTER NOW**



WWW.ISCTGLOBAL.ORG

# Summary

First, the developer must have an image of the product with defined efficacy and then set up SOPs and process parameters (PPs) within the design space (DS). Next, confirm the quality of the product by ensuring the PPs are within the DS through in-process monitoring. **Pharma 4.0** This is the Quality by Design (QbD)-based manufacturing.

A robust "efficacy" assay ensures the quality of product manufactured by QbD-based approach. This enables acceptance of changes in raw materials, manufacturing processes, and QC technologies, provided that the product demonstrates the same efficacy. **This is life-cycle development of a product using a QbD-based manufacturing approach.**

We can increase new data set leading to the improvement in manufacturing process, selecting new parameters as well as the development of new product, if the digitized manufacturing information obtained by QbD-approach is connected with clinical data.

**Pharma 5.0**



**Thank you for your attention**