

Martina Kirwan
EPA Inspector
Licence Enforcement,
Office of Environmental Enforcement,
Environmental Protection Agency,
Seville Lodge, Callan Road,
Kilkenny.
Date: 22-May-2009

Abbott Ireland Limited IPPC Licence: P0847-01

Re: Request for Waste Stream Re-Classification

Dear Martina,

In accordance with Condition 1.4 of Abbott's IPPC Licence (P0847-01) Abbott would like to advise the agency that Abbott is seeking to make classification changes to one of its waste streams and requests prior agreement from the Agency to do so. The waste in question is 'DES Solid Waste'. Currently all wastes leaving our Drug Eluting Stent (DES) Manufacturing Suite are considered hazardous (EWC: 070513*). Abbott would like to split the waste coming from DES into two waste types:

1. **'Drug contaminated wastes'**: wastes that have been in direct contact with drug materials (eg, drug powder and/or drug in solution.) Types of wastes that fall into this category include drug pouches, drug contaminated wipes, contaminated gloves, drug coated stents, expired drug powder and/or drug solution, etc. These wastes will continue to be disposed of under the current 070513* classification.
2. **'DES general wastes'** (eg, paper, plastic packaging, cardboard, etc.). These wastes are not hazardous as they have no hazardous constituents and have no direct contact with drug nor do they originate from manufacturing areas where drug powder is being weighed or mixed, eg, drug formulation rooms.

Abbott would like to advise the agency that following a comprehensive study of the background levels of drug contamination in its DES manufacturing suites Abbott now is satisfied that 'DES General Waste' is not Hazardous and should be classified as: EWC 070514 – Solid Waste other than that mentioned in 070513*.

This request is supported by the completion of appropriate testing. Based on the levels of contamination identified in the attached study 'DES General Wastes' are not hazardous.

Kind Regards,

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Environmental Coordinator
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Appendices: (1) Hazardous Waste Process Description (2) Hazardous Waste Classification Worksheet (3) Contamination Study.

Appendix 1 - Hazardous Waste Process Background

Waste Origin Description:

Small quantities of drug powder (typically <20g) is weighed out 3 to 4 times a week in a dedicated powder weighing hood which is located in a separate room (Formulation Room) within the DES manufacturing suite. The powder once weighed is transferred to an adjacent fume cupboard where the powder is mixed with solvent to form the coating solution used to coat the cardiac stent. All waste removed from the formulation room is considered hazardous and is disposed of as such. This is a safety first approach to plan for any accidental contamination of general waste items (eg, paper) within the room. All operatives handling drug are trained on procedures to be taken to avoid accidental contamination.



Powder Hood

The coating solution is removed for the Formulation Room and transferred to the DES manufacturing area where it is then used within contained 'glovebox' systems to coat the stent.



Glovebox

Waste items removed for the inside of the glovebox (eg, cleaning wipes, scrap stents, etc.) are disposed of as hazardous waste. All other non chemical 'general wastes' produced within the manufacturing suite (eg, paper, plastic packaging, etc.) which are not in direct contact with drug are not deemed to be hazardous.

Note: The medical device industry uses only small quantities of drug in a cleanroom environment and would have similarities in scale with use of a hazardous powder within a laboratory fumehood. The items used directly within the fumehood and items of PPE like gloves would be considered hazardous but other general waste items produced within the lab (eg, paper, plastic, etc.) would not be considered hazardous.

The manufacturing process at Abbott Vascular does not use bulk quantities of drug and as consequence the likelihood of accidental contamination is remote. Where accidental contamination was to occur the levels of surface contamination would only be at trace levels in the low micrograms. This level does not pose any risk to persons and/or the environment.

The assessment methodology used for assessment of 'DES general waste' materials is as follows:

1. Waste Description:

The waste stream in question is made up of mixed general solid wastes (eg, paper, plastic wrapping, cardboard packaging, etc.) arising from the DES production facility at Abbott Vascular in Clonmel. These general wastes have no hazardous constituents and the risk of surface contamination by hazardous substances (drug) is considered very low, as verified by the attached study.

The facility manufactures cardiac stents that are coated with a potent compound called 'Everolimus'. Everolimus is a hazardous substance and whilst this substance is handled by trained operatives in dedicated drug handling devices (ie, powder hoods and gloveboxes) there is a remote risk that general waste items may be accidentally contaminated with trace amounts of drug. Abbott had taken the prudent decision to classify all wastes leaving the DES area as Hazardous in the absence of a comprehensive contamination study to verify the actual levels of contamination in the manufacturing suite and on general waste items. This 'safety first approach' is inline with the policy followed by our sister manufacturing site in California.

Abbott has now completed a full study of contamination levels in the DES area and based on the results of this study is seeking to re-classify 'DES General Waste Items' as being Non-Hazardous.

Waste Material	EWC Code	Main Source	Quantity		On-site Recovery / Disposal	Off-Site Recovery, Reuse or Recycling	Off-Site Disposal
			Tonnes / month	M3 / month	(Method & Location)	(Method, Location & Undertaker)	(Method, Location & Undertaker)
Solid waste potentially contaminated with trace quantities of Drug (everolimus)	070513*	D.E.S Production	2.41	-	N/A	N/A	Indaver Licence: Ref W0036-02 Final Destination: D10, AVG Germany, Licence: 107ZEB002 Indaver, Belgium: Licence: MLAVI/9800000485

2. Relevant EWC Listing

The waste stream in question (DES General Waste) has been classified up to this point as **070513* 'Solid Waste Containing Dangerous Substances'**. Abbott has previously considered this waste stream to be hazardous in the absence of definitive analytical evidence to prove otherwise.

3. Hazardous Substance Quantification

DES General Waste is not hazardous in nature unless accidentally contaminated by drug (Everolimus) above threshold limits. Accidental contamination although unlikely could occur with drug being picked up on gloves and transferred accidentally to other 'clean' areas and/or items.

There are strict documented procedures and formal training programs in place to avoid inadvertent contamination when drug or drug contaminated items are being handled.

In January 2009 Abbott completed a comprehensive surface contamination study of the manufacturing suite and 'general waste items' leaving it. (See section 6. Full results are also attached in Appendix 1.)

4. Hazardous Nature of Surface Contamination

Everolimus is an active pharmaceutical ingredient (API). The hazard classification of Toxic has been assigned to Everolimus: **R48** (Danger of serious damage to health by prolonged exposure.) and **R25** (Toxic if swallowed).

Ref. N° or	Material/ Substance ⁽¹⁾	CAS Number	Danger ⁽²⁾ Category	Amount Stored	Annual Usage	Nature of Use	R ⁽³⁾ - Phrase	S ⁽³⁾ - Phrase
001	Everolimus	159351-69-6	Toxic	0.25kg	1.5kg	DES Stent Drug Coat	R48/25	S22, 45

5. Relevant Hazardous Waste Threshold limits

Based on the classification of Everolimus, DES solid waste could display the following hazardous properties:

Classification		Substance Risk	Hazards	Hazardous
Category of Danger	Risk Phrase			Waste Threshold Limit
Xn/T	R48	Danger of serious damage to health by prolonged exposure.	H6 (H5)	>= 3%
T	R25	Toxic if swallowed.	H6 (H5)	>= 3%

6. DES Solid Waste Contamination Levels Summary

110 swab samples were taken to measure actual levels of contamination on fixed equipment and surfaces (eg, tables, walls, floors, etc.) within the DES manufacturing suite and general waste items removed from the area. A summary of the results are as follows:

- 98.2% of swabbed items (108 samples) showed zero drug contamination.
- 1.8% of samples (2 samples) showed minute trace levels of drug but at levels that were less than 1/5th of the acceptable occupational surface limit (occupational limit: 100mcg/100cm²) for Everolimus. Levels were found to be 10 and 17mcg/100cm². (See detailed report Appendix 1.)

6 air samples were also taken and no drug was identified., ie, levels were below the level of detection for the analytical method, ie, <2.3mcg/m³.

In summary, little or no contamination is present within the suite. The items that showed trace levels of contamination were on fixed equipment, not waste items. And none of the 19 waste items that were sampled for drug contamination showed any drug whatsoever.

7. References

1. European Waste Catalogue and Hazardous Waste List, 2002, Environmental Protection Agency.
2. Hazardous Waste Classification Worksheet (Aug 2004).

Appendix 3 – Everolimus Surface Swab Analysis Results



GEHS - EUROPEAN REGIONAL SUPPORT

REF	AV Clonmel Everolimus January 2009		
DATE OF ISSUE	9 th March 2009	ISSUE N°	1
AUTHOR	Jon Peers	PROJECT N°	1141

TITLE: AV CLONMEL: ASSESSMENT OF THE AIRBORNE & SURFACE SAMPLE CONCENTRATION OF EVEROLIMUS IN DES SUITE 1 & 2.

EXECUTIVE SUMMARY: Surface wipe samples for Everolimus were undertaken in the following areas to ascertain the potential for drug present on surfaces of the room and articles that leave the room currently labelled as '*hazardous waste*'.

- DES Suite 2,
- Formulation laboratory,
- QA Write-up Area
- Waste Storage Area
- Waste Handling Area

110 Surface swabs samples were taken with 98.2% of samples showing no detectable levels of Everolimus contamination.

Only 1.8% of samples (2 samples) showed detectable levels of Everolimus. These two samples showed Everolimus contamination levels which were below the Occupational Dermal Limit of 100mcg/100cm², ie, 12 and 17 mcg/100cm². The samples were located at the keyboard of the PC at Isolator 40 on Line 5 and the "glass" of isolator 53 on Line 4.1.

Based on the surface results obtained the risk of dermal exposure to employees may be considered as minimal, similarly the risk of general items leaving the suite with significant levels of surface contamination can be considered extremely remote.

6 air samples were taken with results below the level of detection (<2.3mcg/m³).

DISTRIBUTION:		
Nigel Hickey	Environmental Coordinator	
Annabelle Donovan	EHS Group Lead	
Michael Ryan	Facilities/EHS Manager	
Steven Moylan	Abbott Global EHS Support.	

1.0 OBJECTIVE

Surface wipe samples for Everolimus were undertaken in the following areas to ascertain the potential for drug contamination on surfaces of the room and 'general waste articles' that leave the room currently labelled as 'hazardous waste'. The data presented in this report represents conditions existing at these locations on the days of these studies. The areas targeted were areas where the risk of surface contamination would be considered greatest. The areas targeted were:

- DES Suite 2,
- Formulation laboratory,
- QA Write-up Area
- Waste Storage Area
- Waste Handling Area

1.1 OCCUPATIONAL EXPOSURE LIMIT

The Abbott EEL is a health-based limit, derived solely from health-related data. It is expressed as an average concentration of a substance present in the breathing zone of a person over a specified reference period. The EEL's value is such that there is no evidence, according to current knowledge, that the substance is likely to have any effect on the health of employees if they are exposed by inhalation, day after day, to that concentration.

1.1.2. Everolimus EEL/OEL – 5mcg/m³

1.1.3 Occupational Dermal Limit

Occupational Dermal Limit (CL) (mcg/100 cm²) = $\frac{\text{EEL (mcg/m}^3\text{)} \times \text{air breathed (m}^3\text{)}}{\text{skin absorption factor [100 cm}^2\text{ sampled]}}$

Assumptions:

- use appropriate EEL (5mcg/m³)
- skin absorption factor (Use 50% (0.5) unless for the API the exact dermal absorption rate is known) typically very conservative
- 10 m³ air breathed/8 hr workday
- area of exposed skin is assumed to 100 cm²

Occupational Dermal Limit = **100 mcg/100cm²**.

1.2 METHODOLOGY

See Appendix A




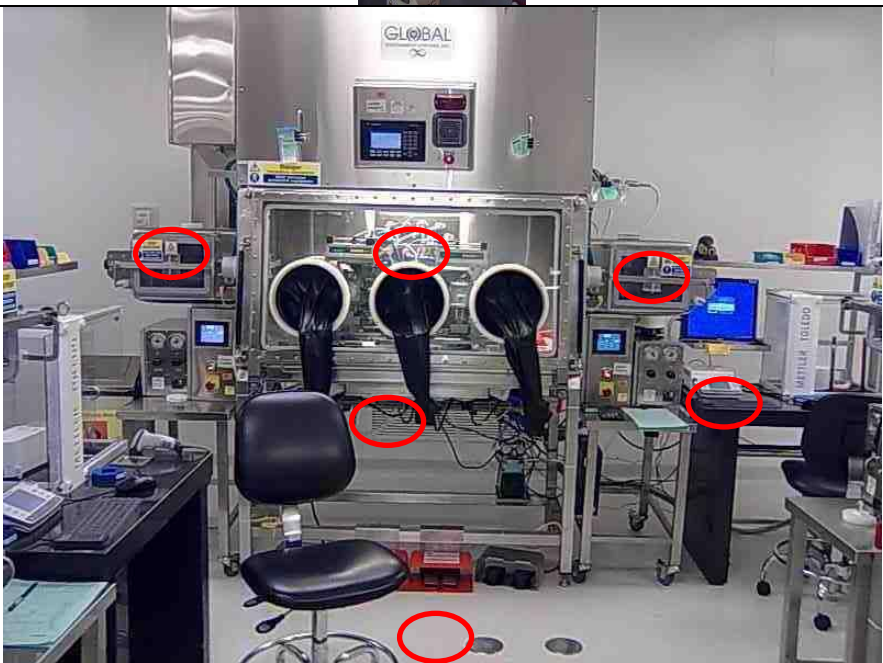
- Air Samples were taken using Abbott GEHS Laboratory method 6115.
- Surface Samples were taken using Abbott GEHS Laboratory method 6126.

2.0 RESULTS/DISCUSSION

Surface Swab Samples Summary Table:





DES LINE 2	Line 6.2		Line 6.1		Line 5		Line 4.1	
	27 th January		27 th January		27 th January		28 th January	
Location	Ref	Result mcg/100cm ²	Ref	Result mcg/100cm ²	Ref	Result mcg/100cm ²	Ref	Result mcg/100cm ²
End of line	7497	<10	7515	<10	7512	<10	7581	<10
PC Workstation table	7525	<10	7550	<10	7573	<10	7584	<10
Automatic Stamp	7438	<10	7594	<10	7508	<10	7480	<10
Balloon Fold station	7583	<10	7489	<10	7595	<10	7473	<10
Top of horizontal air flow oven	7490	<10	7592	<10	7459	<10	7502	<10
Isolator 42			Isolator 44		Isolator 46		Isolator 53	
LHS Hatch of Isolator	7456	<10	7590	<10	7513	<10	7479	<10
Glass above glove port	7561	<10	7523	<10	7593	<10	7526	12
RHS Hatch of isolator	7505	<10	7510	<10	7532	<10	7571	<10
Keyboard RHS Workstation	7466	<10	7551	<10	7569	<10	7474	<10
Isolator 48			Isolator 41		Isolator 40		Isolator 54	
LHS Hatch of Isolator	7456	<10	7535	<10	7554	<10	7475	<10
Glass above glove port	7561	<10	7553	<10	7496	<10	7478	<10
RHS Hatch of isolator	7505	<10	7509	<10	7555	<10	7507	<10
Keyboard RHS Workstation	7504	<10	7547	<10	7533	17	7527	<10
Isolator 45			Isolator 52		Isolator 43		Isolator 50	
LHS Hatch of Isolator	7476	<10	7568	<10	7514	<10	7575	<10
Glass above glove port	7501	<10	7589	<10	7511	<10	7585	<10
RHS Hatch of isolator	7545	<10	7572	<10	7516	<10	7591	<10
Keyboard RHS Workstation	7477	<10	7588	<10	7530	<10	7494	<10
Floor between 3 isolators	7521	<10	7576	<10	7574	<10	7500	<10
Air Exhaust Grill behind isolator	7439	<10	7586	<10	7534	<10	7549	<10





Sampling at manufacturing lines in DES Suite


Swab N°	Location	Photo
1	End of line	
2	PC Workstation table	
3	Automatic stamp afm	
4	Balloon Hold station	
5	Top of horizontal air flow oven	
6	LHS Hatch of Isolator	
7	Glass above glove port	
8	RHS Hatch of isolator	
9	Keyboard RHS Workstation	
10	LHS Hatch of Isolator	
11	Glass above glove port	
12	RHS Hatch of isolator	
13	Keyboard RHS Workstation	
14	Floor between 3 isolators	
15	LHS Hatch of Isolator	
16	Glass above glove port	
17	RHS Hatch of isolator	
18	Keyboard RHS Workstation	
19	Air Exhaust Grill behind isolator	

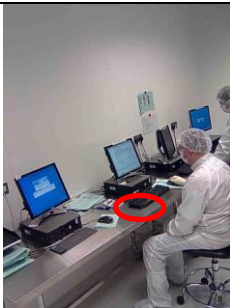
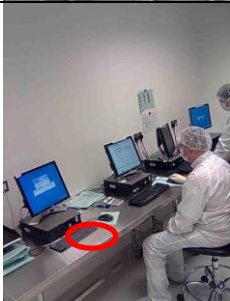
Positions were repeated for each isolator.

DES Drug Formulation Room

Sample Number	Location	Photo	Result mcg/100cm2
Formulation Room – (Everolimus weighed out and mixed in this room.)			
7446	Top of Flow Science Powder Weigh Hood		<10
7458	Base of Fumehood		<10
7488	Top of Flammable cabinet		<10
7506	Surface on granite weighstation		<10
7437	Surface between keyboards	N/A	<10

DES Drug Formulation Room, contd.			
Sample Number	Location	Photo	Result mcg/100cm2
7481	Door Exit Button		<10
7563	Surface of Hepa Extract Filter		<10
7467	RHS exit door handle		<10
7546	Room air extraction grill		<10

DES QA Write-up Area – Admin area only, no drug handling.			
7566	Table Surface		<10





DES QA Write-up Area, contd. – Admin area only, no drug handling.			
Sample Number	Location	Photo	Result mcg/100cm2
7482	Table Surface		<10
7543	Keyboard (Terminal 702465)		<10

28th January

Sample Ref	Location	Result
DES SUITE 2		
7471	Gloves (Jon Peers)	<10
7495	Gloves (Operator Line 4 Iso. 53)	<10
7472	Waste Bin LHS of Iso. 50 Line 4	<10
7565	Waste Catheter Bin Line 4 (Inside)	<10
7422	Drug Waste Bin 4.2 Lid	<10
7493	Gloves (Operator Line 4.2 Iso 47)	<10
7582	Drug Waste Bin Line 5 Lid	<10
7498	Drug Waste Bine Line 5 inside	<10
7492	Gloves (Operator Line 5 Iso 43)	<10
7556	Drug Waste Bin Line 6.2 Inside	<10
DES SUITE 2 Waste Room		
7552	Floor	<10
7544	Door Handle to exit to corridor	<10
Waste Handling Area		
7499	H2O Bottle (Waste bag 1)	<10
7548	H2O Bottle (Waste bag 2)	<10
7483	H2O Bottle (Waste bag 3)	<10
7491	Catheter Shield (Waste bag 1)	<10
7567	Catheter Shield (Waste bag 2)	<10
7570	Catheter Shield (Waste bag 3)	<10
7484	Gloves (Waste Bag 1)	<10
7470	Gloves (Waste Bag 2)	<10
7524	Gloves (Waste Bag 3)	<10

Air Samples - Stent Spraying DES Suite 1

Six area air samples were also taken over two days during the coating of stents with an Everolimus solution in Suite 1. The spray coating of stents is undertaken within isolators where coated and uncoated stents are passed through interlocked transfer ports on each side of each isolator.

Date	Time	Location	Result	Photo
27 th Jan 09	90 mins	LHS Port of Isolator 69 Line 1.2	<2.4	
		Back of Isolator unit 73 Line 1.3 facing Line 1.2	<2.3	
		LHS Port of Isolator 71 Line 1.1	<2.3	
28 th Jan 09	90 mins	LHS Port of Isolator 69 Line 1.2	<2.3	
		LHS Port of Isolator 68 Line 1.1	<2.3	
		LHS Port of Isolator 67 Line 1.2	<2.3	

All results were below the analytical limit of detection for Everolimus, ie, 2.3mcg/m3.

3.0 RESULTS SUMMARY & CONCLUSION

3.1 6 airborne samples detected no drug, ie, levels were below the analytical limit of detection (<2.3mcg/m3). These readings are consistent with previous samples taken within DES manufacturing.

- Consequently the risk of airborne contamination of items within the DES Manufacturing Suite can be considered minimal.

3.2 110 Surface swab samples were taken and 108 showed zero drug contamination. 2 samples showed presence of drug, but only at trace levels. The two samples in question were located on fixed equipment. The samples were located at:

- DES 2 at the keyboard of the PC at Isolator 40 on Line 5 (17 mcg/m3)
- DES 2 "glass" of isolator 53 on Line 4.1 (12 mcg/m3).

The levels of drug (Everolimus) detected were at trace levels only, ie, at 1/5th of the Occupational Dermal Limit of 100mcg/100cm².

- Based on the surface swab results obtained the risk of surface contamination of wastes may be considered as minimal. In the exception where contamination is picked up it is likely to be only at insignificant (trace) levels.

(Note: 1mcg = 0.000001g)

4.0 RECOMMENDATIONS

1. Employees to continue to wear current PPE/RPE and use current controls.
2. The results must be communicated to all employees and similar exposure groups.
3. AV Clonmel to compare the above levels with threshold limits used for defining wastes as hazardous.
4. Where agreement is received from the EPA to re-classify general wastes as non hazardous, periodic re-swabbing should be completed to verify that the levels of contamination within DES remain insignificant.

Jon Peers

Occupational Hygiene & Safety Specialist

GEHS Regional Support

APPENDIX A

Air Sampling Lab Method 6115

Method Information	
AOHSIS Agent_Name: EVEROLIMUS Method Type: Air Multicomponent Capabilities: No Number of Blanks: 10% of samples, minimum of 1 per day	Description: Collection Media: Filter Date Method Set: 06/17/08 Method Number: 6115
Min. Flow rate: 2000 mL/min Max. Flow rate: 2000 mL/min Min. Volume: 150 L Max. Volume: 240 L Max. Storage Time: 5 Days(Prior to shipment to Lab) Sample Storage after Sampling: Freezer Storage Stability: 28 Days Sample Shipment Method: Next day air: ice packs Location of Analysis: GEHS lab Additional Backup Device: Cassette Tape Color: Blue Cassette Type: Polypropylene Cassette Size: 25 mm Cyclone Needed: Filter Type: TEF (Teflon) Filter Preweight: Filter Pore Size: 1 um Backup Pad Type: Polypropylene Pretreatment:	
Media Spplier: GEHS Lab Catalog Number: 25MM BLUE/BLACK Media Storage Presampling: Ambient temp	Method Units: MCG/M3 Analytical LLQ: 0.36 MCG Extraction Efficiency: 64%
Additional Comments: NOTE max sampling time of 120 minutes or 240 LTR. For longer sampling times, collect multiple cassettes. An air volume of 150 LTR (75 minutes) is necessary to detect at the AL of 2.5 mcg/m3. Samples must be stored frozen;can ship refrigerated.	

Wipe Sampling Method 6126

Method Information	
AOHSIS Agent_Name: EVEROLIMUS Method Type: Wipe Multicomponent Capabilities: No Number of Blanks: 10% of samples, minimum of 1 per day	Description: Abridged Collection Media: Container Date Method Set: 10/31/08 Method Number: 6126
Min. Flow rate: Max. Flow rate: Min. Sampling Time: Max. Sampling Time: Max. Storage Time: 7 Days(Prior to shipment to Lab) Sample Storage after Sampling: Freezer Storage Stability: 35 Days Sample Shipment Method: Next day air Location of Analysis: GEHS lab Additional Backup Device: Container Type: Amber vial w/ large snapswab	
Media Spplier: GEHS Lab Catalog Number: SWAB WIPE KIT Media Storage Presampling: Ambient temp	Method Units: MCG/100CM2 Analytical LLQ: 5 MCG Extraction Efficiency: 50%
Additional Comments: IMPORTANT NOTE: Store samples in a freezer before and after shipping or handling. They may be shipped ambient. Acetonitrile wipe solution (70%Acetonitrile:30%diWater) should be obtained at sampling site.	