U.S. FOOD & DRUG ADMINISTRATION
OFFICE OF REGULATORY AFFAIRS
OFFICE OF PHARMACEUTICAL QUALITY OPERATIONS

U.S. Food and Drug Administration
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September 16, 2021

VIA ELECTRONIC MAIL/RETURN RECEIPT

Attention: Dennis Katz
President and Pharmacist in Charge
Hopkinton Drug, Inc.
52 Main Street
Hopkinton, MA 01748-1214

FEI**:** 3005543749

Dear Mr. Katz:

From August 25, 2020, to November 2, 2020, U.S. Food and Drug Administration (FDA) investigators inspected your facility, Hopkinton Drug, Inc., located at 52 Main Street, Hopkinton, MA 01748. During the inspection, the investigators noted deficiencies in your practices for producing drug products, which put patients at risk.

FDA issued a Form FDA 483, Inspectional Observations, and an amended Form FDA 483 to your firm on November 2, 2020, and November 10, 2020, respectively. FDA acknowledges receipt of your facility's response, dated November 19, 2020. Based on this inspection, it appears that you produced drug products that violate the Federal Food, Drug, and Cosmetic Act (FDCA).

A. Compounded Drug Products Under the FDCA

Section 503A of the FDCA describes the conditions under which human drug products compounded by a licensed pharmacist in a State licensed pharmacy or a Federal facility, or a licensed physician, qualify for exemptions from three sections of the FDCA: compliance with current good manufacturing practice (CGMP) (section 501(a)(2)(B)); labeling with adequate directions for use (section 502(f)(1)); and FDA approval prior to marketing (section 505) [21 U.S.C. §§ 351(a)(2)(B), 352(f)(1) and 355(a)].

B. Violations of the FDCA

Adulterated Drug Products

The FDA investigator noted that drug products were prepared, packed, or held under insanitary conditions, whereby they may have become contaminated with filth or rendered injurious to health, causing your drug products to be adulterated under section 501(a)(2)(A) of the FDCA. For example, the investigators observed that:

1. Non-microbial contamination was observed in your production area, such as but not limited to:
   A. Thick white (b) (4) residues were observed on the ceiling intake vent over the (b) (4) hood.
   B. Large amounts of blue colored staining were observed on the inside of the door to the (b) (4) glasswasher.
   C. Flaking paint, rust spots and yellow colored staining were observed on the interior of the firm's (b) (4) balance.
   D. Yellow colored stains were noted on the (b) (4) to the following (b) (4) hoods: (b) (4).

2. Your firm handled hazardous drug products without providing adequate containment, segregation, or cleaning of work surfaces and utensils to prevent cross-contamination, such as:
   A. You did not use cleaners suitable for removing pharmaceutical residues.
   B. Glassware used for the compounding of drug products was not adequately cleaned.
   C. Containers of non-hazardous drug products were observed being stored within the firm's hazardous drug production room.

Under section 301(a) of the FDCA [21 U.S.C. § 331(a)], the introduction or delivery for introduction into interstate commerce of any drug that is adulterated is a prohibited act. Further, it is a prohibited act under section 301(k) of the FDCA [21 U.S.C. § 331(k)] to do any act with respect to a drug, if such act is done while the drug is held for sale after shipment in interstate commerce and results in the drug being adulterated.

C. Corrective Actions

We have reviewed your firm's response to the Form FDA 483, dated November 19, 2020. Regarding your responses related to the insanitary conditions, some of your corrective actions appear adequate; however, we cannot fully evaluate the adequacy of the following corrective actions described in your response because you did not include sufficient information or supporting documentation:

1. For Observation 1:
   A. You state that an SOP was updated to clean the entire room to include the intake vent and not just the (b) (4) hood. However, you did not provide an in-depth investigation to assess origin, nor the composition of the residue found, the updated SOP, formula worksheets, employee training records and cleaning effectiveness checks.
   B. You stated that it was attempted to remove the staining of the glassware dishwasher with "vigorous scrubbing" and suggested the blue stain was considered discoloration. However, you did not provide a comparison between what qualifies as discoloration when compared to staining from (b) (4), nor updated procedures and employee trainings records were provided.
   C. You stated that the staining was removed using abrasive cleaning methods during the inspection and the entire back support replaced for the (b) (4). However, you did not provide supporting documents such as work order, document of the stain removal, updated SOP, and employee training.
   D. You stated that HEPA filter was changed prior to the inspection, however there is only documentation of a filter change from January 2019. Also, in your response you failed to provide supporting documentation regarding, updated SOP to specify criteria and frequency of changing the filters, updated maintenance log and employee training documents for revised documents.

2. Observation 2:
   A. You stated that you stopped using (b) (4) and (b) (4) and purchased lab-grade cleaners (b) (4) and (b) (4)). The relevant SOPs have been updated to require use of (b) (4) and (b) (4) where appropriate and that staff has been trained on the SOPs. However, you did not provide supporting documentation such as, but not limited, to invoices or purchase order for the (b) (4) and (b) (4), updated SOP, and employee training documents.
   B. You stated that it is a policy that all glassware must be checked after removal from the dishwasher to ensure no residue remains or be rewashed. Also, that the employees are instructed to check the glassware before use and added that all pharmacy technicians were reminded to be more vigilant when storing cleaned glassware. However, you failed to provide training records and effectiveness checks.
   C. You stated that all compounding activities involving non- hazardous drugs in the hazardous room has stopped and that procedures and training would take place to assure this corrective action. However, you failed to provide documents such as updated SOP, employee trainings and effectiveness checks for this implementation.

Please be advised that section 501(a)(2)(A) of the FDCA concerning insanitary conditions applies regardless of whether drug products you compound meet the conditions of section 503A, including the

condition on receipt of a prescription for an identified individual patient prior to compounding and distributing drug products.

D. Conclusion

The violations cited in this letter are not intended to be an all-inclusive statement of violations at your facility. You are responsible for investigating and determining the causes of any violations and for preventing their recurrence or the occurrence of other violations. It is your responsibility to ensure that your firm complies with all requirements of federal law, including FDA regulations.

Within thirty (30) working days of receipt of this letter, please notify this office in writing of the specific steps that you have taken to address any violations. Please include an explanation of each step being taken to prevent the recurrence of any violations, as well as copies of related documentation. If you believe that your products are not in violation of the FDCA, include your reasoning and any supporting information for our consideration. If you cannot completely address this matter within thirty (30) working days, state the reason for the delay and the time within which you will do so.

Please send your response to ORAPharm1_Responses@fda.hhs.gov and include as a reference FEI# 30005543749.

If you have questions regarding the contents of this letter, please contact Compliance Officers: Jose O. Hernandez-Guzman at jose.hernandez-guzman@fda.hhs.gov and Juan R. Jimenez at juan.jimenez@fda.hhs.gov.

Sincerely,

Diana Amador-toro -S

Digitally signed by Diana Amador-toro -S
DN: c=US, o=U.S. Government, ou=HHS, ou=FDA, ou=People, 0.9.2342.19200300.100.1.1=13000011579, cn=Diana Amador-toro -S
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Diana Amador-Toro
Program Division Director/District Director
Office of Pharmaceutical Quality Operations,
Division I/New Jersey District