

REVIEW ARTICLE

PRODUCT RECALL: A COMMENTARY ON RISING INCIDENCES

Viney Chawla*¹, Manish Pal Singh¹, Manish Kumar²

¹Rajiv Academy for Pharmacy, Chattikara, Mathura, Uttar Pradesh, India. ²MM College of Pharmacy, Maharishi Markandeshwar University, Mullana, Ambala, Haryana India.

Article Info:

Abstract



Article History: Received: 28 September 2016

Reviewed: 3 November 2016 Accepted: 11 December 2016 Published: 15 January 2017

Cite this article:

Chawla V, Singh MP, Kumar M. Product recall: a commentary on rising incidences. Universal Journal of Pharmaceutical Research. 2016; 1(2): 32-35. http://doi.org/10.22270/ujpr.v1i2.RW2

*Address for Correspondence:

Dr. Viney Chawla, Rajiv Academy for Pharmacy, Chattikara, Mathura, Uttar Pradesh, India, Tel: +91-7830831234. E-mail: drvineychawla@gmail.com

INTRODUCTION

The pharmaceutical industry is at an important crossroads in medical innovations, which develop cures for health conditions. Without this industry, many therapies would not be introduced to the market, and many health problems would remain unsolved. The pharmaceutical industry has traditionally been very profitable, and the global market had annual growth prediction of 5 to $8\%^{1,2}$. Yet amidst the massive increase in the field, factors like product returns and recalls are giving the companies new challenges, such as litigation problems, negative publicity, loss of patent protection for many major drugs and widespread efforts to contain drug spending³. On the other hand, increased competitiveness, fast-changing structure of competitors, complex strategic positioning, shrinking pipelines, counterfeit drugs and a fight for global market share are adding more burdens to the growth of the industry 4,5 .

For a detailed introduction on this topic readers are advised to see the first part of this review⁶. In this previous part published in this journal we have discussed issues like Lack of sterility assurance, Presence of particulate matter and container/closure

There has been an increasing trend in the number of prescribed and over-thecounter drug recall over the last few years. The recall is usually due to company's discovery, customer's complaint or Food and Drug Administration (FDA) observation. The process of recall involves a planned specific course of action, which addresses the depth of recall, need for public warning, and the extent of effectiveness checks for the recall. The FDA review and/or recommend changes to the firm's recall strategy, as appropriate. The critical recall information list includes the identity of the product; summary of the failure; amount of product produced in the distribution chain and direct account. Product recalls clashes thousands of companies every year affecting: sales, testing customer relationships and disrupting supply chains. Drug recall is incubus for pharmaceutical companies. It effects the reputation of the company. The reason for the recall can be divided into two categories: manufacturing related and safety/efficacy related. It is essential to follow all the guidelines related to drug development and manufacturing procedure to minimize drug recall.

Keywords: Drug product recall, guidelines, process, recall information.

problems. In this second part, the focus will be on unapproved new drugs, Presence of undeclared therapeutically active moiety, microbial contamination and some other miscellaneous reasons.

ISSUES RELATED TO PRODUCT RECALL

1. Unapproved New Drug

The FDA's evidence-based system of drug approval and the OTC monograph system play essential roles in ensuring that drugs are both safe and effective. For instance, during the drug approval process the applicant must demonstrate that its manufacturing processes can reliably produce drug products of expected identity, strength, quality, and purity. The manufacturers of unapproved drug products have not received FDA approval and do not conform to a monograph for making over-the-counter (OTC) drugs. The lack of evidence demonstrating that these unapproved drugs are safe and effective is a significant public health concern (Table 1)⁷. Unapproved drugs are not generic medications, and neither their safety nor their efficacy can be assured⁸. In 2013, retail pharmacies in US filled over three billion prescriptions.

Table 1: Unapproved new drug.				
S. N.	Date	Product Description	Reasons/ Problems	Company
1.	11/04/2016	Super Herbs	Unapproved new drug- FDA	Super Herbs
		Capsules, Weight	laboratory testing found SUPER	
		Loss Dietary	HERBS to contain sibutramine,	
		Supplement	desmethylsi butramine, and/or	
			phenolphthalein.	
2.	09/01/2016	Dietary Supplement	Unapproved new drug	R Thomas Marketing
				LLC
3.	18/12/2015	Dietary Supplement	Unapproved new drug	SmartLipo365
4.	11/12/2015	Dietary Supplement	Unapproved new drug (undeclared	Reesna Inc.,
			hydroxythiohomosildenafil, an	
			analogue of sildenafil)	
5.	09//12/201	Dietary Supplement	Unapproved new drug (Undeclared	Lucy's Weight Loss
	5		diclofenac)	System
6.	03/12/2015	Dietary Supplement	Unapproved new drug	Lipo Escultura
7.	11/09/2015	Miracle 30 and	Unapproved new drug	The One Minute
		Miracle Rock 48		Miracle Inc.
8.	24/08/2015	Dietary Supplements	These products contain the undeclared	Novacare, LLC
			drug ingredient salicylic acid making	
			these unapproved new drugs	
9.	23/12/2013	Dietary Supplement	Unapproved new drug	Deseo Rebajar Inc.
10.	29/11/2013	Dietary Supplement	Unapproved new drug	IQ Formulations

	Table 2: Presence of undeclared therapeutically active moiety.						
S. N.	Date	Product Description	Reasons/Problems	Company			
1.	10/05/2016	Marketed as a dietary	Products contain sildenafil, and	SOS Telecom, Inc.			
		supplement	analogs of sildenafil				
2.	05/04/2016	Marketed as a dietary	Contains ligandrol	Invisiblu			
		supplement		International LLC			
3.	28/01/2016	Pink Bikini and Shorts	Undeclared sibutramine,	Lucy's Weight Loss			
		on The Beach	phenolphthalein	System			
4.	20/01/2016	licorice Coughing Liquid	Contains undeclared morphine	Master Herbs, Inc.			
5.	23/12/2015	Dietary Supplement	Undeclared sibutramine and	Bee Xtreme LLC			
			phenolphthalein				
6.	25/11/2015	Compounded	Contains high amounts of Vitamin	Glades Drugs			
		Multivitamins	D3				
7.	28/10/2015	Dietary Supplement	Undeclared Active Pharmaceutical	Premiere Sales			
			Ingredients	Group			
8.	25/09/2015	Capsules intended for	Undeclared desmethyl carbondenafil	TF Supplements			
		male sexual	and dapoxetine				
		enhancement					
9.	23/09/2015	Pink Bikini and Shorts	Undeclared Sibutramine and	Lucy's Weight Loss			
		on The Beach	Phenolphthalein	System			
10.	24/08/2015	Dietary Supplements	These products contain the	Novacare, LLC			
			undeclared drug ingredient salicylic				
			acid making these unapproved new				
			drugs				
12.	12/06/2015	Advanced Joint Formula	Undeclared diclofenac and	GandC Natural			
		capsules	chlorpheniramine				
13.	03/06/2015	Smart Lipo (800, 900,	Undeclared sibutramine,	SmartLipo365			
		950 mg) capsules	desmethylsibutramine, and				
<u> </u>			phenolphthalein.				
14.	19/12/2014	Dietary supplement	Undeclared Drug Ingredient	Bethel Nutritional			
		capsules used for weight		Consulting, Inc.			
	10/10/0011	loss					
15.	19/12/2014	Dietary supplement	Undeclared Drug Ingredient	Bethel Nutritional			
16	10/10/2011	capsules for weight loss		Consulting, Inc.			
16.	12/12/2014	Dietary supplement	Undeclared Synthetic	Wyked Labs			
		capsules used for body	hormone/prohormone Ingredient				
		building and weight loss					

These prescriptions, as well as those prescriptions administered directly by healthcare professionals, were intended to treat or prevent myriad conditions and diseases, because physicians can lawfully prescribe FDA-approved products for any purpose, including uses unapproved by FDA, if the physician believes such use would benefit the patient. Because almost all prescription medicines have side effects and contraindications, including some serious and fatal side effects, it is essential that healthcare professionals have access to timely, accurate and comprehensive information about the medicines they prescribe^{9,10}.

2. Presence of Undeclared Therapeutically Active Moietv

Falsified and substandard drugs may contain toxic ingredients; some of the most compelling stories of pharmaceutical crime are of frank poisoning. By far the more common problem however, is medicine that simply does not work. Medications for chronic and infectious diseases alike have been found falsified and substandard. Data from the FDA office of criminal investigation indicate that pills and tablets are the most commonly compromised products they investigate, mostly produced by individual criminals, not negligent businesses¹¹. The WHO is developing a system for the global surveillance and monitoring of falsified and substandard drugs. Different regulatory authorities have different, often widely divergent, requirements. To complicate the problem, many small regulatory authorities lack the technical depth to evaluate the bioequivalence data generics manufacturers submit $(Table 2)^{12}$.

3. Microbial Contamination

One of the most important areas in pharmaceutical process control is the development of systems to control the number, survival, and proliferation of microorganisms during manufacturing of non-sterile and sterile pharmaceutical products (Table 3). In relation to this general profile, commonly considered four main sources of microbial contaminations are clean room air, personnel, surfaces and water.

An earlier study, pointed out that maintaining the integrity of a pharmaceutical production environment of clean room is a constant battle^{13,14}. Most common microor-ganisms in clean rooms are gram-positive bacteria. These microorganisms often have a close phylogenetic affiliation as indicated by comparative analysis of partial 16S rDNA studies, such as between the Micrococci and Staphylococci¹⁵. In addition, there are, in fewer numbers, certain fungi associated with clean rooms. Clean room microflora is predominantly of gram-positive bacteria. With the genera Staphylococcus and Micrococcus, many of the species are indigenous to humans. Although Gram-positive microorganisms are ubiquitous in clean rooms and make up the overwhelming majority of isolates¹⁶.

4. Miscellaneous Reasons

The information about counterfeit medicines is everywhere press reports¹⁷, WHO fact sheets ¹⁸, FDA press releases¹⁹, U.S. government task forces²⁰, law review articles²¹, medical journals²² and international trade associations²³. One widely-cited "fact" attributed to the WHO is the claim that counterfeit medicines make up more than 10% of today's global medicines available in the market (Table 4)²⁴. Yet another statistic is that in developing countries, up to 25% of the medicines used are counterfeit or substandard²⁵. Publicly discussing counterfeiting is an important tool to enforce the industry's price discrimination structures across borders, enhancing overall industry profits²⁶.

		Table 3: Microbial contamination.					
	S. N	N. Date	Product Description	Reasons/ Problems	Company		
-	1.	31/12/2014	Ribavirin powder for	Microbial	Valeant		
			solution	Contamination	Pharmaceuticals		
					North America LLC		
	2.	18/12/2013	3 Sterile injectable	Potential for microbial	Abrams Royal		
_			medications	contamination	Pharmacy		
			Table 4: Miscel	llaneous/Other			
S.	N.	Date	Product Description	Reasons/ Problems	Company		
1.		01/03/2016	fluconazole Injection, USP,	Discovery of an out of	Sagent		
			(in 0.9% sodium chloride)	specification impurity	Pharmaceuticals, Inc.		
			200 mg per 100mL	result detected			
2.		16/02/2016	morphine sulfate 0.5	Super-potent	Pharmakon		
			mg/mL preservative free in		Pharmaceuticals		
			0.9% sodium chloride				
3.		31/12/2015	norepinephrine bitartrate	Discoloration	Phar MED Diuem		
			added to sodium chloride				
4.		30/10/2015	epinephrine Injection, USP	Potential Inaccurate	Sanofi US		
			(0.15 mg and 0.3 mg)	Dosage Delivery			
5.		09/10/2015	Over the counter	The acetaminophen	Medline Industries,		
			acetaminophen Tablets.	Tablets, 500 mg is	Inc.		
				incorrectly labelled as			
				325 mg Tablets.			
6.		13/07/2015	calcium chloride	Incompatibility	Mylan Institutional		
			Intravenous Infusion 10%	between syringe and	LLC		
			in 10 mL prefilled glass	needleless adapters			
			syringes				
7.		12/12/2014	Combination of omeprazole	Not approved for use	Tristar Equine		
			and misoprostol in a paste	as an animal drug	Marketing, LLC.		
8.		27/11/2013	Blood glucose test strips	May produce	Abbott		
				erroneously low blood			
				glucose results			

CONCLUSIONS

The authors have tried to exhaustively review the reasons behind drug product recall in two parts of this article. Drug Product Recall as a whole brings bad name to the company but is essential in the larger interest of society. However, through careful handling, manufacturing, packaging and transportation, such incidences may be kept to a minimum. An aptitude for no mistakes at every level of organization may help achieve this goal easily.

AUTHOR'S CONTRIBUTION

Chawla V: writing original draft, methodology, investigation, formal analysis, conceptualization. **Singh MP:** writing, review and editing, methodology, formal analysis, conceptualization. **Kumar M:** writing, review, and editing, methodology. All authors read and approved the manuscript.

ACKNOWLEDGEMENTS

The authors extend their thanks and appreciation to the Rajiv Academy for Pharmacy, Chattikara, Mathura, Uttar Pradesh, India to provide necessary facilities for this work.

CONFLICT OF INTEREST

None to declare.

REFERENCES

- Shewale S, Parekh S. Reinventing patient recruitment in clinical studies. The Monitor 2011: 10:523-535. https://doi.org/10.1038/nbt.2083
- Folland S, Goodman AC, Stano M. Intercontinental Medical Statistics Health 2010, 5.
- 3. NY Saddle River. Pearson Education; 2007.
- CBR Pharma Insights. The New Pharmaceutical Sales Force, Key Trends Shaping Future Sales Strategies; Reuters online. 2009, 6.
- Edwards A. Manufacturing the future Integrated collaboration between CMOs and Sponsors, Contract Pharma 2010: 5:124-130.
- Chawla V, Singh MP, Kumar M. Rising Incidences of product recall. Universal J Pharmaceutical Res 2016: 1(1):6-12.https://doi.org/10.22270/ujpr.v1i1.RW2
- 7. Guidance for FDA Staff and Industry Marketed Unapproved Drugs. Compliance policy guide, u.s. department of health and human services food and drug administration center for drug evaluation and research (CDER) 2011; 19.
- Brian S, Gowan M, *et al.*; Understanding the factors that influence the adoption and meaningful use of social media by physicians to share medical information, of Med. Internet Res 2012; 656-667.

https://doi.org/10.2196%2Fjmir.2138

 James M, Spears Jeffrey K, Francer, and Natalie A Turner; Embracing 21st century information sharing: defining a new paradigm for the food and drug administration's regulation of biopharmaceutical company communications with healthcare professionals. Food Drug Law J 2015; 70 1: 143-159. PMID: 26292475

- 10. Lawrence O, Gostin and Gillian J Buckley; Committee on understanding the global public health implications of substandard, falsified, and counterfeit Medical Products; Board on global health; institute of medicine, countering the problem of falsified and substandard drugs. 2010-16.
- 11. Berendes SP, Heywood S, Oliver P Garner; Quality of private and public ambulatory health care in low and middle income countries: Systematic review of comparative studies, PLoS Med 2011; 8(4): 1000433. https://doi.org/10.1371/journal.pmed.1000433
- WHO Expert Committee on Specifications for Pharmaceutical Preparations, Thirtieth report. Geneva, World Health Organization. 1987 (WHO Technical Report Series, No. 748).
- Friedman et al. Burkholderia cepacia: this decision is overdue, PDA J Pharm Sci Technol 2011; 65(5): 535–543.
- Clarridge JE; Impact of 16S rRNA gene sequence analysis for identification of bacteria on clinical microbiology and infectious diseases. Clin Microbiol Rev 2004; 17: 840– 862.https://doi.org/10.1128%2FCMR.17.4.840-862.2004
- 15. Álvarez Lerma F et al.; Moisturizing body milk as a reservoir of *Burkholderia cepacia*: outbreak of nosocomial infection in a multidisciplinary intensive care unit. Crit Care 2008:78-86.https://doi.org/10.1186%2Fcc6778
- 16. Hua X. Product recall and liability. J Law Econ Organ 2009; 27:113–36. https://doi.org/10.2307/41261714
- 17. Lietzan E. Recalls of human drugs and medical devices. [Last accessed on 2014 Feb 22]. https://doi.org/10.4103%2F2230-973X.147222
- Fda.gov [Safety/Recalls/Enforcement Reports/2013]. U.S. Department of Health & Human Services. [Last updated 2014 Feb 10; Last accessed on 2014 Feb 23]. Available from:http://www.fda.gov/Safety/Recalls/EnforcementRep orts/2013/default.htm.
- 19. Anthony F. Andrisano, Jr.; To the U.S. Government: Whether or not reimportation is the answer, something must be done to help americans afford their necessary prescription drugs. Penn state Rev; 2005: 23.
- 20. See Liza Gibson; Drug regulators study global treaty to tackle counterfeit drugs. Brit Med J 2004. https://doi.org/10.1136%2Fbmj.328.7438.486-c
- Chen Y, Shankar G, Liu Y. Does a firm's product-recall strategy affect its financial value. An examination of strategic alternatives during product-harm crises? J Mark. 2009; 73:214–26.https://doi.org/10.1509/jmkg.73.6.214
- 22. Expert RECALL™. An expert solution of stericycle; quarterly recall index. [Last accessed on 2014 Feb 22]. Available from:
- Kevin Outterson; Pharmaceutical Arbitrage: Balancing Access and Innovation in International Prescription Drug Markets, Health Pol'y l. and ethics. 2005; 193: 277–79.
- 24. Capturing recall costs, measuring and recovering the losses; Ernst & Young. [Last updated on 2011 Oct 5; Last accessed on 2014 Feb 23]. https://doi.org/10.4103%2F2230-973X.147222
- 25. Ratini M. Webmd.com [a-to-z-guide/what-is-a-drug-recall] [Last updated on 2013 Mar 19; Last accessed on 2014 Feb 22].
- https://doi.org/10.4103%2F2230-973X.147222 26. Lietzan E. Recalls of human drugs and medical devices. [Last accessed on 2014 Feb 22]. Available from: http://www.fda.gov/safety/recalls/industryguidance/ucm 129259.htm .

https://doi.org/10.4103%2F2230-973X.147222