

Midwest Medical Device Sterilization Workshop

The Choice of Sterilization Modality

Technical & Normative Aspects

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IONIZING RADIATION FOR MEDICAL DEVICE STERILIZATION Three Technologies – Two Goals:



Eliminate Biological Pathogens Keep Medical Device Functional



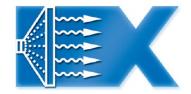
IONIZING RADIATION FOR MEDICAL DEVICE STERILIZATION



FAST & EFFICIENT $\approx 10\%$



RELIABLE & PROVEN $\approx 90\%$



SMART & INNOVATIVE





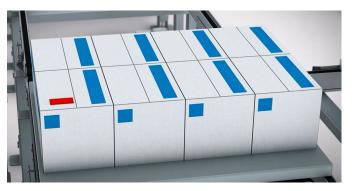


FAST & EFFICIENT



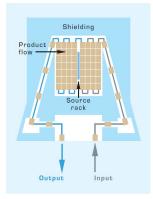
Scalable Power: 20 - 200 kW High Throughput: 1 Truckload =2h Limited Penetration



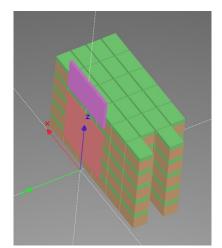




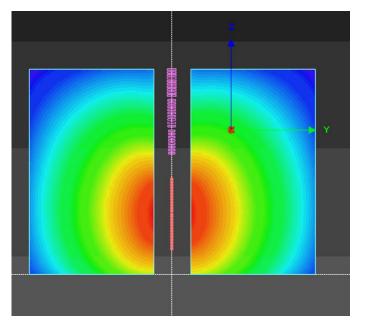




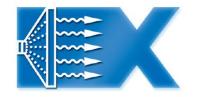
RELIABLE & PROVEN



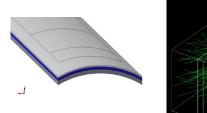
Pallet/Tote Treatment Co-Supply/Reload "No Turn Off"

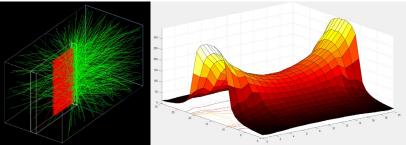






SMART & INNOVATIVE







"Turn Off" Pallet/Tote/Box Treatment "Costly" Photon Generation – Lost Heat Recovery



ISO 11137-Standard Family



Process Definition:

- Sterilization Modality
 - D_{ster} Sterilization Dose
- D_{max,acc} Maximum acceptible dose

Due 2020 ?



Requirements on Radiation Source – Sterilizing Agent

Electron beam /X-ray: Electron Energy shall be specified

E-Beam E > 10 MeV

X-ray E > 5 MeV

Assessment of Potential of Induced Radioactivity necessary

Literature: e.g. Gregoire et. al. Activation Experiments





PERGAMON Radiation Physics and Chemistry 67 (2003) 149–167

www.elsevier.com/locate/radphyschem

Radiological safety of medical devices sterilized with X-rays at 7.5 MeV

O. Grégoire^{a,*}, M.R. Cleland^a, J. Mittendorfer^b, M. Vander Donckt^a, J. Meissner^c

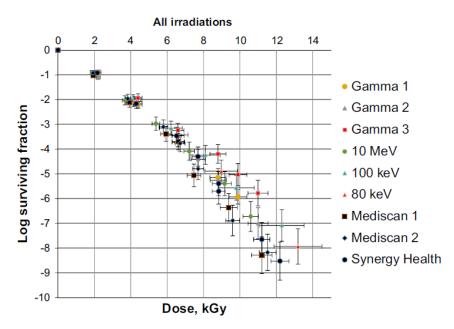
^a Ion Beam Applications (IBA s.a.), Chemin du Cyclotron 3, 1348 Lourain-la-Neure, Belgiam ^b High Tech Consulting, Anton Bruckerstrasse 6, 4600 Wels, Austria ^c Meissner Consulting GmbH, Angererstrasse 36, 80796 Munich, Germany

Received 28 December 2001; accepted 18 September 2002



Log Survival Fraction B. Pumilus

Radiation Physics and Chemistry 107 (2015) 128-130





Transfer of an Established Sterilization Dose...

... to a radiation modality different from the that on which the dose was originally established shall not be permitted unless data are available to demonstrate the differences in operation conditions have no impact on the microbial effectiveness

Guidance:

A successful dose verification experiment is considered necessary



Transfer of an Established D_{max,acc}...

... to a radiation modality different from the that on which the dose was originally established requires a recorded assessment that the differences in irradiation conditions do not affect the validity of the established dose

Guidance:

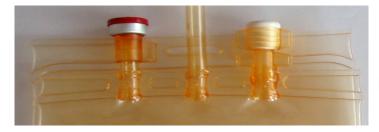
...higher dose rate may lower the unwanted effects upon product...

Need for more studies.

Today re-establishing on the new modality is required.



Material Qualification Experiment: 125 kGy



E-Beam

Guide on the establishment of the maximum acceptable dose (D_{max,acc}) for a product





Technical Information AAMI TIR17:1997 Report Radiation sterilization-Material qualification AAMI Association for the Advancement of Medical Instrumentation

List of Title

Gamma



Change of Modality: Gamma \rightarrow X-ray (7 MeV)

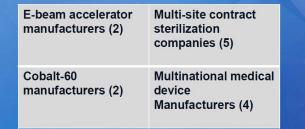
- ❑ Same or better penetration No need to change process load
- Experience/Acquaintance with technology
- Availability of X-ray source
- **Easier for new products**
- Low dose products
- Flexibility in dose setting/product Presentation
- Higher dose rate can mitigate adverse material effects
- **Cost considerations/effective photon utilization**



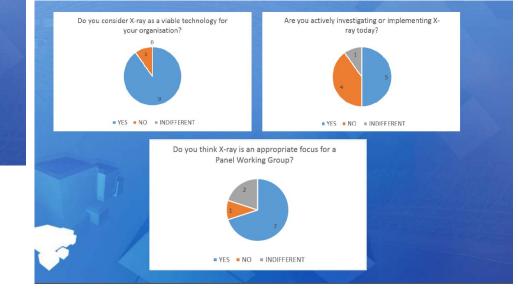
2019 X-ray WG survey results



QUESTIONNAIRE SENT TO PANEL MEMBERSHIP REPRESENTING ALL THOSE IN THE FOLLOWING CATEGORIES :



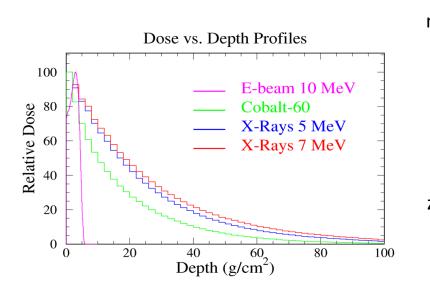
RESPONSES OBTAINED FROM 10 of 13 ORGANISATIONS

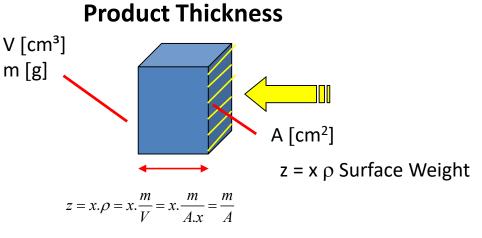




Change of Modality: Gamma \rightarrow E-Beam (10 MeV)

Penetration

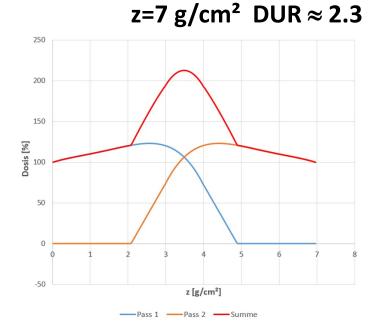




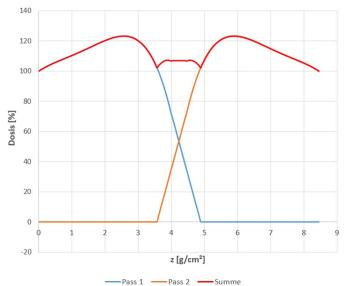
 $z < 9 g/cm^2$ 2-sided E-beam Irradiation possible



Product Dimensions/Beam Energy Matters:



 $z=8.5 g/cm^2$ DUR ≈ 1.2





Product/Packaging Considerations

Dose Uniformity:

DUR < 1.5 X-ray (E-Beam needs very special treatment scheme)

- \Box Low Density (z<9 g/cm²) \rightarrow E-Beam High Density \rightarrow X-ray
- □ Regular Load \rightarrow E-Beam Bulk Load (Metal, Fluids) \rightarrow X-ray
- □ Temperature Rise: $\Delta T [K] = D [kGy]/c [J/g.K] \rightarrow X$ -ray ok!

E-Beam can do several passes

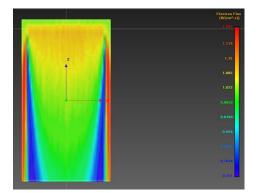
Charge trapping in bulky polymer slabs \rightarrow X-ray





Product Considerations

Intrinsic Dose Characteristics (Dose Gradients) in E-Beam to be assessed



(e.g. by Mathematical Modelling)

Shielding of Biologics and Electronic Components \rightarrow E-Beam



Product Considerations

Electron Beam requires fine grain PQ Dose Mapping

- □ Thoughtful dosimeter placement
- □ More dosimeter locations than Gamma/X-ray
- □ Probabably higher variability than Gamma/X-ray
- Backup by Mathematical Model beneficial

Thoughtful Definition of Processing Categories



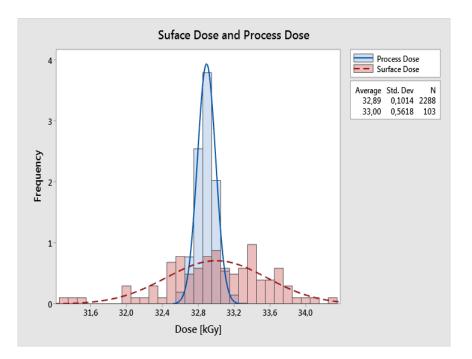
Beam Based Process Considerations

 \overline{Vs}

Flexible Dose Setting:
$$D = k$$

Very accurate & precise dosing:

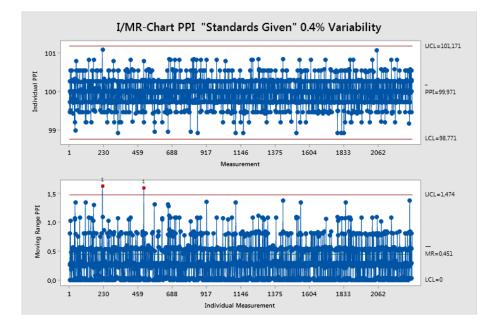
Variability: Dosimeter $\approx 1.5\%$ Process Parameter $\approx 0.4\%$





Beam Based Process Considerations

Process Control via Process Parameter for each process load possible !





Facility Considerations:

- □ Accelerator Energy & Power
- □ Irradiation Topology (top-down, side)
- □ Irradiation Container/ Process Load
- **Conveyor System**

Delivery: System + Shielding/Building Specification Maintenance/Training



Conclusion

- **Widening of Modality Spectrum is Essential**
- **Beam Based Technologies are Capable and Mature**
- **Consider Sterilization Modality already in Product Development**
- **U** Validate Alternative Modalities
- **Beam Based: Consider E-Beam first, X-ray as Alternative**