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WHO/UNITED NATIONS POPULATION FUND (UNFPA) CONDOM QUALITY ASSURANCE

(July 2019)

DRAFT FOR COMMENTS

Please send any comments you may have to Dr Sabine Kopp, Group Lead, Medicines Quality Assurance, Technologies Standards and Norms (kopps@who.int), with a copy to Ms Claire Vogel (vogelc@who.int) by 20 September 2019.

Working documents are sent out electronically and they will also be placed on the WHO Medicines website (http://www.who.int/medicines/areas/quality_safety/quality_assurance/guidelines/en/) for comments under the "Current projects" link. If you wish to receive our draft guidelines, please send your email address to jonessi@who.int and your name will be added to our electronic mailing list.

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SCHEDULE FOR DRAFT WORKING DOCUMENT QAS/19.807: WHO/UNITED NATIONS POPULATION FUND (UNFPA) CONDOM QUALITY ASSURANCE

Description of activity	Date
UNFPA identified the need to update the existing	x 9
Procedure for Assessing the Acceptability, in Principle, of	
Male Latex Condoms for Purchase by United Nations	
Agencies, adopted by the Forty-second WHO Expert	
Committee on Specifications for Pharmaceutical Preparations	
(ECSPP) meeting and published as Annex 2 in the WHO	
Technical Reports Series, No. 948, 2008. The text had	/
been developed by the UNFPA and WHO specialists.	
Informal discussions amongst UNFPA and WHO specialists on the management of this updating process.	May – September 2018
Presentation of a possible updating process of the	18 October 2018
prequalification guidance for contraceptive devices and	
condoms at the Fifty-third ECSPP.	
Following the recommendation of the Fifty-third ECSPP	November 2018 – May
meeting, various phases of reworking and restructuring of the	2019
specific texts by UNFPA.	
Mailing of working document for public consultation,	Mid July 2019
including to the WHO Expert Advisory Panel on the	
International Pharmacopoeia and Pharmaceutical Preparations	
(EAP) and UNFPA specialists, inviting comments and posting	
of the working document on the WHO website.	
Compilation of comments received by WHO.	September 2019

Review of comments received by a group of specialists. Preparation of discussion document.	October 2019
Presentation to the Fifty-fourth ECSPP in Geneva, Switzerland.	14-18 October 2019
Further follow-up action as required.	Ġ

WHO/UNITED NATIONS POPULATION FUND (UNFPA) 44 CONDOM QUALITY ASSURANCE 45 46 BACKGROUND 47 Extract from the Fifty-third World Health Organization (WHO) Expert Committee on 48 Specifications for Pharmaceutical Preparations (ECSPP) meeting report: 49 50 "Ms Seloi Mogatle and Dr William Potter from the United Nations Population Fund 51 (UNFPA) gave an update on the prequalification guidance for contraceptive devices and condoms at the Fifty-third Expert Committee on Specifications for Pharmaceutical 52 53 Preparations (ECSPP) that took place at the World Health Organization (WHO) 54 headquarters in Geneva, Switzerland, October 2018. The UNFPA had contacted WHO to inquire how best to start a process to update the process of the following texts that 55 were adopted by the ECSPP and published in 2008. The Expert Committee agreed to 56 the importance of updating these materials in view of the changes in the contraceptive 57 field globally over the previous decade. The two organizations committed to work 58 together to bring the documents up-to-date. It was suggested by UNFPA to separate 59 out the current existing procedure for condoms to include the following aspects: 60 61 1. Prequalification Guidance for Contraceptive Devices. 2. Prequalification Programme for Male Latex Condom and Annexes. 62 63 3. Technical Specification for Male Latex Condom and Annexes. 64 4. Male Latex Condom Prequalification Inspection Aide Memoire. 65 5. Condom Quality Assurance and Annexes. 6. Guidance on Testing Male Latex Condoms. 66 Condom Storage and Transportation. 67 7. 68 8. Post Market Surveillance of Condoms.

69 9. Public Assessment Reports for Contraceptive Devices - Condoms and Intrauterine devices (IUDs). 70 71 UNFPA also raised the issue of specifications for lubricants (both water-based and silicon-bases) which needs to be considered when developing the new guidelines. 72 73 The Expert Committee supported the development of the relevant documents in consultation with the WHO Secretariat, the preparation of these for public consultation 74 and took note that they will be reported back to the Expert Committee." 75 76 The following documents are undergoing a public consultation as part of this series: 1. QAS/19.789 - WHO/UNFPA Prequalification Programme Guidance for Contraceptive 77 Devices: Male Latex Condoms, Female Condoms and Intra-Uterine Devices... 78 79 2. QAS/19.790 - WHO/UNFPA Technical Specification for Male Latex Condoms. 3. QAS/19.803 - WHO/UNFPA Guidance on Conducting Post Market Surveillance of 80 Condoms. 81 4. QAS(19.804 - WHO/UNFPA Recommendations for Condom Storage and Shipping 82 Temperatures. 83 84 5. QAS/19.805 - WHO/UNFPA Guidance on Testing of Male Latex Condoms. 6. QAS/19.806 - WHO/UNFPA Specifications for Plain Lubricants. 85 QAS/19.807 - WHO/UNFPA Condom Quality Assurance. 86 7. 87 88 89 90 91

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96		
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138	This d	locument describes and details the key elements of condom quality assurance.
139		
140	1.	STANDARDS
141		
142	Standa	ards are developed and published by national and international standards bodies to
143	establ	ish requirements for a wide range of products and services. Standards may be generic or
144	produ	ct-specific. Standards for medical devices, such as male latex condoms, tend to focus on
145	essent	ial requirements for performance, quality and safety.
146		CX
147	Many	different types of organizations and bodies participate in the development of standards.
148	In the	case of standards for medical devices, the organizations include manufacturers, national
149	regula	tory authorities, researchers, consumer groups, international agencies and testing
150	labora	tories. International standards, e.g. ISO 4074, are agreed by consensus based on balloting
151	by nat	ional standards organizations (member bodies) that participate in their development.
152		
153	Natio	nal regulatory authorities establish local procedures for the regulation and control of
154	medic	inal products and medical devices. In many cases, these authorities require that a product
155	compl	lies with the appropriate national or international standards before it can be marketed.
156	Comp	liance can be voluntary but, in many cases, governments or regulatory authorities have
157	made	compliance with an appropriate standard mandatory.

In addition to specifying safety, performance and quality requirements, standards also specify 158 test methods that can be used to verify that products conform to these requirements. These test 159 160 methods may be included in the standard or specified by reference. 161 The principal international standards authority is the International Organization for 162 Standardization (ISO), the worldwide federation of national standards bodies. 163 ISO is responsible for drafting international standards based on the best available evidence and 164 practice. ISO Technical Committee 157 (ISO/TC 157)—Non-Systemic Contraceptives and 165 STI Barrier Prophylactics is responsible, inter alia, for developing the international standard 166 for male latex rubber condoms, ISO 4074 Natural Latex Rubber Condoms—Requirements and 167 Test Methods. The committee has a membership of 25 countries, with representatives drawn 168 from a wide range of interested parties including manufacturers, test laboratories, regulatory 169 170 authorities and consumer associations. 171 There are also many regional and national standards organisations producing standards that are 172 173 widely used both locally and globally. Examples include ASTM International based in the USA and CEN, CENELEC or ETSI in Europe. It is very common for national and regional standards 174 175 to be based on to equivalent to ISO standards. 176 The third edition of ISO 4074 was published in September 2015. This edition includes a 177 number of very important changes, all of which are designed to make male condoms made 178 179 from natural rubber latex safer and more effective. The changes include: 180 The procedures for determining the shelf lives of condoms have been improved and 181 simplified. 182 A wider range of different condom sizes is permitted. 183 Maximum lot size limited to 500 000. 184 Requirements specified for biocompatibility assessments based on ISO 10993-1. 185 Recommendations included for the monitoring and control of microbial contamination 186 (bioburden) on finished condoms including methods for determining bioburden on 187 condoms, advisory limits for total viable counts and a list of specific pathogens that 188 should be absent. 189

- Any claims for improved efficacy or safety have to be substantiated by clinical investigation.
- Extended range of minimum airburst volumes depending on condom size.
- Minor changes to the design of the clamping collar used in the burst test.
- Changes to the electrical test for freedom from holes to improve the detection of holes in the closed end of the condom.
- Inclusion of the "hang and squeeze" test from ASTM D3492 16 Standard specification for rubber contraceptives (male condoms) as an alternative method for assessing freedom from holes.
- A limit set for the number of individual containers with visibly open seals.
- Recommended requirements for minimum airburst properties and freedom from holes testing introduced for condoms narrower than 45 mm and/or shorter than 160 mm.
- Amendments made to the methods for determining the shelf life of condoms including a simplified procedure for determining the shelf life by accelerated stability studies based on fixed ageing periods at 50 °C.
- Stability studies to include testing for freedom from holes, airburst properties and package integrity.
- Detailed procedure included for determining the thickness of a condom by the micrometre.
- An alternative method included for removing the lubricant from the condom using an aqueous surfactant solution when determining the amount of lubricant on the condom.
- Revised labelling requirements.

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The World Health Organization Department of Reproductive Health and Research (WHO/RHR), UNFPA Procurement Services Branch (PSB) and other partner agencies work with *ISO/TC 157* to broaden the standard to provide for situations in which economic and social circumstances dictate the need for:

- Appropriate length, width and strength of the condom in relation to effectiveness, comfort and size.
- Establishment of requirements for stability data (both real-time and accelerated) to support shelf life claims and stated expiry dates.

222 Adequate protection against harsh environmental conditions due to inadequate systems 223 of storage and distribution. Appropriate packaging, labelling and information on how to use condoms. 224 225 Appropriate design options to meet users' needs. 226 227 The current 2015 edition of ISO 4074 can be purchased from national standards organizations or from: 228 229 International Organization for Standardization (ISO) 230 231 ISO Central Secretariat 1 chemin de la Voie-Creuse CP 56 232 233 1211 Geneva 20 234 Switzerland 235 Telephone: +41 22 749 0111 Fax: +41 22 733 3430 236 237 Email: central@iso.org 238 Copies of the standard can also be downloaded (for a fee) from the ISO website 239 (http://www.iso.org) and the websites of other national standards organizations. 240 241 242 2. **SPECIFICATIONS** 243 A specification is a statement of the procurer's requirements and covers all of the product 244 245 attributes necessary for procurer acceptance. These include the essential general and performance requirements, as well as discretionary design requirements. A specification 246 247 includes and/or references test methods used to verify the quality of a product and may demand a different level of quality than a published standard requires. WHO/UNFPA and partners have 248 prepared a specification that is internationally accepted for the bulk procurement of male latex 249 condoms. 250 251 The WHO/UNFPA Specification for Male Latex Condoms is based, where appropriate, upon 252

ISO 4074 and includes specific requirements for bulk packaging for public-sector distribution.

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The *WHO/UNFPA Specification*, if used in conjunction with the Prequalification Scheme and procurement procedures, will help ensure that a quality product is manufactured, purchased and distributed to the end user.

3. WHO/UNFPA PREQUALIFICATION SCHEME

Prequalification is a procedure designed to assess the capability and capacity of a manufacturer to supply a quality product before a contract is awarded. Prequalification reduces the risk of awarding a contract to a manufacturer that is unable to meet the quality requirements defined in the WHO/UNFPA Specification. The purpose of prequalification is to ensure that the male condoms procured are safe, of good quality and efficacious. The prequalification scheme is intended to protect both the procurer and the end user.

WHO/UNFPA have established a Prequalification Scheme for male latex condoms. This scheme was developed in collaboration with the manufacturing community, international agencies, the donor community and experts. The scheme was originally harmonized with the WHO Prequalification Scheme for Essential Medicines. The draft WHO/UNFPA Male Latex Condom Prequalification Scheme was approved for publication, subject to external review by the WHO Expert Committee on Specifications for Pharmaceutical Preparations in October 2007. The WHO/UNFPA Prequalification Scheme was then extensively reviewed electronically by a wide spectrum of public- and private-sector experts and during three workshops, held in Bangkok, Thailand; Beijing, China; and New Delhi, India, between December 2007 and March 2008. WHO published the Prequalification Scheme in May 2008; refer to WHO Technical Report Series, No. 948, Annex 2, page 71. The guidance for the WHO/UNFPA Prequalification Scheme for male latex condoms is given in Section 2 of this document.

The scheme has now been updated based on many years of experience of operation. The update reflects the changes that have taken place in the general procedures for regulating medical devices globally, feedback from manufacturers and users of the scheme.

UNFPA maintains a list of prequalified products manufactured at a manufacturing site. This list is available on the WHO and UNFPA prequalification websites. It is strongly recommended that only prequalified manufacturers be used for the procurement of condoms for public-sector distribution.

4. REGULATORY AUTHORITIES

Condoms are classified as medical devices and, as such, are regulated by various regulatory authorities around the world. These bodies license drugs and medical devices for use in a particular country or region. In addition, some carry out or commission factory audits and product testing. They generally have the power to refuse to license manufacturers, to recall products and to close factories in the event of continued noncompliance with their regulations.

It is important for purchasers to work closely with national regulatory authorities and inform them of the procurement procedures and testing protocols that will be used to verify the quality of the condoms before they are shipped to the country. Purchasers also need to be aware of and comply with any specific local regulations or requirements.

If the regulatory authority requires in-country testing, then the local laboratory should be accredited and capable of testing to internationally recognized standards. Local laboratories that are accredited can undertake, subject to a contractual agreement with the procurer, the preshipment compliance-testing regime recommended in to avoid the need for further testing when the products arrive in country".

The national regulatory authority may undertake confirmatory testing and in-market compliance testing of the product to ensure that it has not deteriorated during shipping, handling and storage. Procedures for confirmatory testing are outlined in Section 3 of this document. In such cases, national regulatory authorities should use accredited laboratories that participate in appropriate inter-laboratory proficiency trials.

Two well-established regulatory procedures for condoms are the U.S. Food and Drug Administration (USFDA) 510(k) pre-market clearance procedure and the European Union CE marking scheme.

• USFDA 510(k) pre-market clearance: Prior to marketing a condom in the United States of America (USA), the manufacturer must submit documentation to the USFDA and obtain a pre-market clearance (510(k)). The documentation has to demonstrate that the product is equivalent to one that is already on the market. A 510(k) pre-market clearance means that the manufacturer has submitted acceptable safety data on the product and complies with USFDA requirements for the manufacture and distribution of the product. Factory audits are conducted periodically to monitor compliance.

• **CE marking in Europe:** Condoms intended for sale or distribution within the European Union must carry the CE mark which verifies that the product meets the essential requirements of the medical device directive 93/42/EEC, as amended. Manufacturers are required to follow specific conformity assessment procedures that include submitting a technical file to a European Notified Body. Compliance with *EN ISO 4074* (European designation for the standard) can be taken as evidence of compliance with some of the essential requirements of the medical device directive. Manufacturing facilities are required to have certification of *ISO 13485*.

Most countries have their own regulatory procedures, which should cite relevant published standards. It is always necessary to review national regulatory policy and guidelines before importing condoms into and, in some cases, exporting condoms out of a country.

5. QUALITY MANAGEMENT SYSTEM

A well-run condom manufacturing company will have an audited, documented and effective quality management system conforming to *ISO 13485*. *ISO 13485* is a quality management scheme specifically designed for medical device manufacture. This standard specifies requirements for documentation, procedures and structures to be followed in all types of establishments that manufacture medical devices.

247	The assential commonants a quality management system include fully decumented.		
347	The essential components a quality management system include fully documented:		
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349	 quality objectives; 		
350	 management responsibilities; 		
351	 provision of required infrastructure; 		
352	• training procedures;		
353	 process and quality assurance procedures; 		
354	• systematic record-keeping;		
355	• corrective and preventative action in case of product quality problems; and		
356 357	• risk management.		
358	Factories must maintain control over all incoming raw materials and have adequate in-process		
359	testing and controls, appropriate in-process remedial procedures, adequate testing of finished		
360	products and a functional record-keeping system.		
361			
362	Condoms are non-sterile products but nevertheless should be free from contamination and		
363	adulteration. The products therefore need to be manufactured in a controlled environment.		
364	Periodic monitoring of the environment and the product is required to ensure that bioburden		
365	levels are maintained within acceptable limits and specified pathogens are absent.		
366			
367	The site must be audited and certified to ISO 13485 by an accredited certification body. In		
368	most countries, these certification organizations are private companies, although in some cases		
369	they are government agencies. To determine consistency of manufacturing, the certification		
370	schemes generally focus on the effectiveness of and compliance with the factory's documented		
371	management system. The certifying organization should be registered with an appropriate		
372	body, such as the national standards body of the country where the manufacturer or the		
373	certifying organization is located.		
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375	6. LOTS		
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377	A lot (Batch) is a collection of condoms of the same design, colour, shape, size and formulation.		

A lot must be manufactured at essentially the same time, using the same process, same specification of raw materials, common equipment, same lubricant and any other additive or dressing and be packed in the same type of individual container, using the same packaging materials. All condoms comprising a lot will:

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- have an identical formulation;
- have the same design, dimensions, colour, shape and surface texture;
- be manufactured on the same production line;
- be vulcanized under identical conditions;
- be in the same packaging;
- have the same lubricant; and
- have the same date of expiry printed on the package.

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- Lot sizes over 500,000 are not permitted due to the risk that the lot may not be homogeneous.
- Managing such large lots, for example if there is a product recall, can also be difficult.

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Manufacturers should retain samples from every lot to assist in the resolution of any disputes relating to quality. It is recommended that the retained samples be kept under approved controlled temperature conditions consistent with the manufacturer's recommended storage conditions for the duration of the shelf life of the product.

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7. LOT-BY-LOT PRE-SHIPMENT COMPLIANCE TESTING

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The quality of condoms can be influenced by many different manufacturing and raw material factors. The consequences of purchasing and distributing poor-quality condoms in the public sector are severe. For these reasons, WHO/UNFPA also recommends that independent lot-by-lot pre-shipment compliance testing of the finished product be undertaken, using an appropriate sampling plan from ISO 2859–1:1999 Sampling procedures for inspection by attributes -- Part 1: Sampling schemes indexed by acceptance quality limit (AQL) for lot-by-lot inspection, before the condoms are accepted for shipment to the purchaser. Manufacturers with a good track record and a sustained level of delivering quality condoms with process averages significantly below the AQL may, subject to meeting specified performance criteria, qualify

for reduced inspection for burst properties and skip lot sampling for dimensions, lubricant 411 quantity, package integrity, packaging and labelling. Purchasers can consider the option of a 412 reduced level of lot-by-lot testing, for example using the procedures specified in ISO 2859-413 1:1999 for reduced inspection and ISO 2859-3:2005 Sampling procedures for inspection by 414 attributes - Part 3: Skip-lot sampling procedures. 415 416 The methods of sampling the condoms for pre-shipment compliance testing and the relative 417 merits of testing prior to delivery are discussed in Clause 8. Either an accredited sampling 418 agency or the testing laboratory should take the samples. The manufacturer must not select the 419 samples. The selection of suitable test laboratories is discussed in this document in Clause 12. 420 It is recommended that only one set of pre-shipment compliance testing be carried out and this 421 422 must be done by an accredited laboratory. 423 424 Manufacturers must satisfy themselves that individual lots meet the specification before lots are submitted for pre-shipment compliance testing. 425 426 Post-shipment testing may be performed as well depending on the country of destination of the 427 428 condoms. It is recommended that this testing be performed by an accredited laboratory. 429 **SAMPLING** 430 8. 431 The quality of a lot is estimated by testing a random sample of condoms from that lot. The 432 inspection levels and AQLs are specified in ISO 4074 using sampling plans specified in ISO 433 2859–1 Sampling Procedures for Inspection by Attributes. These are the most widely used 434 sampling plans for assessing attribute criteria (i.e. whether the product conforms or does not 435 conform to the requirements detailed in the specification). 436 437 Sampling for independent testing should be done by an organization accredited for sampling, 438 by the UN inspector during inspection or by the testing laboratory and not by the factory 439 producing the condoms. Such sampling is required for Pregualification and Pre-shipment 440 441 compliance testing.

442	The sampler must verify that each lot that is sampled complies with the definition of a lot, as
443	specified in Clause 7.
444	
445	Samples must be:
446	
447	 taken in accordance with pre-agreed sampling procedures;
448	• representative of the lot of condoms;
449	 randomly selected (preferably based on random numbers); and
450	• taken by or under the personal full-time supervision of the sampler.
451 452	
452	The sample, once taken, must be sealed and dispatched under the sampler's supervision.
453	December ded detailed consilies was advantaged in August 1
454 455	Recommended detailed sampling procedures are described in Annex 1.
455	
456 457	At the request of the manufacturer or the procurer, a duplicate sample may be taken for use in
457	case of disputes. The sampling agency must issue a report giving full details of the sampling
458	process. The report shall include the sampling procedures, identification of the cases from
459	which samples are taken and the total number of cases offered for sampling. The sampler
460 461	should mark the cases from which samples are taken for procurer reference at receipt.
462	9. ACCEPTANCE QUALITY LIMIT (AQL)
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464	In ISO 4074 and the WHO/UNFPA Specification, the limits for the maximum percentage of
465	defective condoms are specified in terms of Acceptance Quality Limits (AQLs). The AQL is
466	the maximum acceptable average percentage of nonconforming products in a continuing series
467	of manufacturing lots offered for testing. The technical definition of an AQL is given in the
468	glossary in Annex 3.
469	
470	For important performance properties, the AQLs are set as low as practically possible. For
471	example, the limit for freedom from holes is set at 0.25% to ensure that the end user is
472	adequately protected. For properties that are less important and do not affect the performance
473	of the condom, such as non-critical visible defects, slightly higher AQLs are acceptable.

Conformance with the specified AQLs is assessed by testing a sample from each lot. Testing a sample can only give an estimate of the percentage of defective products in a lot. The reliability of this estimate will increase with the size of the sample. The average percentage of defective products—the process average— can be estimated by pooling the results of testing from many lots. For further details on process average, refer to Annex 2.

As discussed in the previous section, testing is conducted according to sampling plans specified in *ISO* 2859–1. This standard contains sets of tables giving the maximum number of nonconforming products that are allowed in a sample taken from a lot. The sampling plans are designed to give a high probability (usually greater than 95%) of a lot being accepted if the process average of defective products is equal to or less than the AQL. In the long run, therefore, the percentage of lots being rejected should not exceed 5%. If it does, then there is a risk that the manufacturer is not conforming to the relevant AQL. More information on AQLs and sampling is given in Annex 2. If you need assistance, contact the UNFPA quality assurance team at qa-team-group@unfpa.org.

10. MONITORING QUALITY

As well as reviewing the results of pre-shipment compliance testing on a lot-by-lot basis, it is recommended that purchasers monitor quality on an ongoing basis. This can be done by calculating the process averages and using control charts (e.g. Shewhart® charts). Monitoring quality using these methods provides excellent information about trends in product quality and/or early warning of potential problems. Refer to Annex 2 for details.

11. TESTING LABORATORIES

Laboratories may be:

- manufacturers' laboratories;
- independent accredited test laboratories; and
- national regulatory laboratories.

Laboratories that test condoms for regulatory or compliance purposes need to have systems in place to ensure the reliability of their results. ISO has developed a quality management system specifically for laboratories: *ISO 17025*. Laboratories that comply with *ISO 17025* will also operate in accordance with *ISO 9001*. *ISO 17025* covers the essential elements of *ISO 9001* as well as laboratory-specific requirements, such as technical requirements for equipment, calibration, uncertainty management and technical competence of the staff. The laboratory must conduct regular, traceable calibration of its measuring equipment, have an adequate maintenance system, and have systems in place to ensure the technical competence of their staff. Condom testing laboratories used for prequalification and pre-shipment compliance testing should be accredited to *ISO 17025*. The laboratories should also participate in international inter-laboratory proficiency trials and, if applicable, local inter-laboratory proficiency trials for male condom testing.

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- There are a number of international mutual recognition agreements among accreditation
- bodies, which audit each other for quality. The international umbrella body is:

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- 521 International Laboratory Accreditation Cooperation (ILAC)
- 522 The ILAC Secretariat
- 523 P.O. Box 7507
- 524 Silverwater
- 525 NSW 2128
- 526 Australia

- 528 (ILAC) Delivery Address:
- 529 The ILAC Secretariat
- 530 7 Leeds Street
- 531 Rhodes
- 532 NSW 2138
- 533 Australia
- 534 Tel: +61 2 9736 8374
- 535 Fax: +61 2 9736 8373
- 536 Email: <u>ilac@nata.com.au</u>

http://www.ilac.org. 537 538 539 Regional accreditation bodies that collaborate with ILAC include EA in Europe, APAC in Asia Pacific, IAAC in the Americas, AFRAC in Africa, SADCA in Southern Africa and ARAC in 540 541 the Arab region. 542 543 It is recommended that all laboratories - national, independent and manufacturers - confirm their competence by participation in inter-laboratory proficiency trials for testing male 544 condoms. In such trials, laboratories test samples of condoms supplied by the trial organizers. 545 The results of the tests are returned to the organizers who analyse them and provide feedback 546 547 to each participating laboratory. The test results are reported anonymously to all the test 548 laboratories allowing participants the opportunity to investigate any tests in which their results 549 disagree with those of other participants. 550 When assessing a testing laboratory, the following factors should be considered: 551 552 whether the laboratory is accredited by an internationally recognized body; 553 whether the laboratory participates in inter- laboratory proficiency trials; and 554 the reputation of the laboratory among large-volume purchasers. 555 556 **12. TESTING COSTS** 557 558 Some procurers question the cost of independent lot-by-lot pre-shipment compliance testing 559 when they deal with a supplier with whom they have experience and in whom they have 560 developed confidence. 561 562 Some have experimented with "consignment testing", i.e. regarding the whole shipment as a 563 single lot. The trouble with this method is that it is unlikely that the whole shipment has been 564 manufactured under the same conditions. The shipment is therefore unlikely to meet the 565 definition of a lot, as described in Clause 7. Since the homogeneity of the shipment cannot be 566 guaranteed, the statistical principles behind lot sampling and testing are likely to be 567

compromised. Furthermore, it is difficult to detect problems that may be present in individual
lots.

The use of this method increases the risk of a poor lot being accepted. Procurers who have experimented with it have found that the savings were a false economy.

13. POST-SHIPMENT TESTING AND CONFIRMATORY TESTING

In many countries, national regulatory authorities review the data and conclusions reached by the accredited independent laboratory that has been contracted by UNFPA or another procurement agent to undertake the pre-shipment compliance testing. In some countries, in contrast, the national regulatory authority may require in-country testing prior to distribution, i.e. post-shipment testing.

In this case, post-shipment testing would be considered as confirmatory testing. Where feasible, the confirmatory testing should be undertaken by the same laboratory that undertook the pre-shipment compliance testing to reduce the risk of contradictory results. Where possible, confirmatory (post-shipment) testing, if required, should replace rather than repeat pre-shipment compliance testing. These requirements should be written into the contractual agreement between the purchaser and the receiving country and/or procuring agency. The testing should be undertaken by a laboratory accredited to *ISO 17025*.

If pre-shipment compliance testing and post-shipment testing are undertaken, there is a risk of contradictory results, primarily due to the sampling uncertainties associated with attribute sampling.

On occasion, the national regulatory authority may have a valid concern regarding possible deterioration of the product during transportation. If this is the case, then confirmatory testing may be undertaken. Therefore, confirmatory testing serves better when applied as part of risk-based quality assurance system.

599	Local regulatory authorities are encouraged to take into account the results of pre-shipment
600	compliance testing before reaching any conclusions about the quality of the product.
601	
602	Confirmatory testing can be restricted to selected a few lots, i.e. skip lot testing, chosen at
603	random from a shipment or consignment. If one or more of the selected lots fail to comply
604	with the specifications, the remaining lots should be tested.
605	
606	It is recommended that, when such testing is undertaken, priority be given to the critical
607	performance parameters of airburst properties and pack integrity. The risk of statistical lot
608	failures due to sampling error should be considered when interpreting such tests. Occasional
609	differences in results between the pre-shipment compliance tests and the confirmatory tests
610	must be expected. Guidance on action to take in such circumstances can be found in Section
611	2: Resolution of Disputes.
612	
613	SECTION 2: RESOLUTION OF DISPUTES
614	
615	1. INTRODUCTION
616	
617	There are a number of possible causes of disputes relating to quality during a contract to supply
618	condoms. These may involve:
619	CX
620	• interpretation of the contract;
621	• payment schedules;
622	• delays in delivery schedules;
623	• completion schedules;
624	• independent laboratory test results;
624 625	
	• independent laboratory test results;
625	independent laboratory test results;design issues; and
625 626	independent laboratory test results;design issues; and
625626627	 independent laboratory test results; design issues; and condition of the condoms upon arrival in-country or at some time after delivery.

2. DISPUTES OVER LABORATORY RESULTS

Disputes over product acceptance most often arise when independent testing determines that the product does not conform to the required specification or standard. It is also possible for a manufacturer to dispute a decision made by the sampling agency regarding product packaging or appearance.

In most cases, manufacturers accept the results of independent laboratories and replace lots that have been rejected. When they question the results they usually present their own test results or other evidence to suggest that the independent tests are incorrect and do not accurately represent the quality of the product tested.

3. SOURCES OF DISPUTES ARISING FROM LABORATORY TESTING

Laboratory testing is always done on a sample from the production lot. There are generally two main sources of uncertainty in test results:

• The uncertainty arising due to sampling. There is always an intrinsic level of uncertainty in estimating the properties of any population based on testing of a sample. This uncertainty decreases as the sample size is increased. The sampling plans specified in *ISO 4074* generally provide a 95% to 99% probability that a lot that is just within specification will be accepted. (For sampling plans with acceptance numbers of zero, the probability of acceptance can be as low as 90%.) There is therefore a small risk that lots of acceptable quality will be occasionally rejected.

• Testing or reporting mistakes due to operator error, equipment malfunction, drifts in calibration, transcription errors and other causes. These types of mistakes are, in principle, preventable and should be minimized by application of the quality management system and procedures outlined in *ISO 17025*. In addition, there is also the normal uncertainty associated with measurement.

There are a number of important consequences that have to be considered because of the inherent limitations in the sampling plans. These are:

• In any shipment of condoms there is always a risk that some lots will be rejected even though the process averages may be at or even below relevant AQL. This risk is most severe with sampling schemes with an accept on zero, reject on one decision rule and with process averages that approach the AQL. Manufacturers can minimize such risks by ensuring that the process averages are maintained well below the AQL. For example, by operating with process averages that are half of the relevant AQLs, manufacturers can cut the risk of rejecting lots that actually conform to freedom from holes, package seal and inflation requirements to less than 1%.

• Manufacturers and purchasing agencies should plan on the assumption that some lots, possibly up to 5% in extreme cases, will be rejected. Estimates of volume requirements and pricing should take into account the impact of possible lot failures. Again, manufacturers can keep down the percentage of lots rejected by maintaining process averages well below the relevant AQLs.

• Lots with defect levels slightly above the AQL have a high and significant chance of being accepted. Lots that significantly exceed the AQL still have a reasonable chance of being accepted. It is only when the defect levels are several times the AQL that the probability of rejection becomes very high.

As a general rule, when the level of lot failures exceeds 5% over a large number of lots, i.e. 50 or more, then doubts can be raised about the quality of the manufacturer's production. Similarly, if the percentage of lots rejected exceeds 10% in the short term (e.g. between 5 and 50 lots), then again doubts can be raised about the quality of the products. Finally, if any two lots in a sequence of five lots are rejected, there is a significant risk that the process average may exceed the AQL; further investigations of quality should be undertaken according to the techniques described in Annex 2.

694	4.	REVIEW OF INFORMATION		
695				
696	If a re	If a result is disputed, the laboratory and the manufacturer should be asked to verify basic		
697	issues,	issues, as follows:		
698				
699	4.1	Independent testing laboratory		
700				
701		• Verify that testing was performed as prescribed in the test method applicable to		
702		the order concerned;		
703		• Verify that test equipment was in proper working order and in calibration at the		
704		time of testing;		
705		• Check on staff performance by looking at the relevant tester's results on other		
706		products tested at about the same time;		
707		• Verify by checking records and any retained samples the identity of the test		
708		samples and that the normal precautions were taken not to damage the samples		
709		prior to testing; and		
710		• Verify that the appropriate uncertainty estimates have been applied for the		
711		individual non complying condoms when deciding on the pass fail decision for		
712		marginal lots. This is to see if disputed differences can be explained by		
713		uncertainty of measurement.		
714		CX		
715	If the 1	aboratory has any doubts about any of these issues, it should re-test the products free of		
716	charge			
717				
718	4.2.	Manufacturer		
719				
720		 Review manufacturing and test documents for completeness and for anomalies 		
721		that may indicate problems; and		
722		• Review all the items above that the independent testing laboratory is required to		

verify.

When the lot concerned is part of an ongoing order and there is historical or concurrent data on at least 10 lots, the process average can be estimated by one or more of the techniques given in Annex 2. If this process average is within the AQL, it strengthens the case for a re-test. Data sets from both the test laboratory and the manufacturer should be available.

5. DECISIONS ON RE-TESTING

If an agreement cannot be reached between the parties and retesting is undertaken, this should be done by independent third party laboratory accredited to *ISO 17025* for male latex condom testing.

Before a re-test is considered, all available data should be reviewed and discussed with the independent laboratory. If a manufacturer disputes a test result, the following issues should be considered in deciding whether to allow a re-test:

- What is the margin by which the product has failed to comply?
- Is the manufacturer's history of production for the client a good one?
- What is the nature of the difference between the manufacturer's and the laboratory's test results?

In particular, if an estimate of the process average for the test concerned over the last 10 lots is available, it should be taken into account.

The amount of information available for review depends on the type of test. With inflation testing, for example, data on the number of non-compliers will be available as well as the individual volumes and pressures. In this case, a detailed comparison of the data from the manufacturer and the test laboratory can be conducted and it may be possible to identify the cause of disagreement. If, however, the dispute relates to freedom from holes, then the manufacturer must provide detailed and credible pre-release and in-process test results to support the claim for a re-test. In general, a manufacturer requesting a re-test should be prepared to make in-process test data for the lot concerned available for review.

757	Re-testing should be undertaken only when:
758	
759	1. There is considerable evidence that the laboratory has made a mistake.
760	
761	Examples of considerable evidence could be failure to produce evidence that the equipment
762	had been calibrated properly, lack of training records and proficiency test results for the
763	technicians conducting the tests, failure of a critical piece of equipment, evidence of data
764	tampering, loss or mistakes, results completely out of line with other lots manufactured and/or
765	tested at the same time, etc.
766	
767	Or:
768	
769	2. There is considerable evidence that the test result is not representative of the population
770	from which the lot sample is taken.
771	
772	The evidence for a retest in most cases will be the results for similar lots made at the same time
773	on the same equipment.
774	
775	Therefore, re-testing should be undertaken only when there is strong evidence that an error has
776	been made. More information on the statistical issues associated with sampling is given in
777	Annex 2.
778	
779	Before a re-test is considered, all available data should be reviewed and discussed with the
780	independent laboratory. If a manufacturer disputes a test result, the following issues should be
781	considered in deciding whether to allow a re-test:
782	
783	 What is the margin by which the product has failed to comply?
784	 Is the manufacturer's history of production for the client a good one?
785	• What is the nature of the difference between the manufacturer's and the laboratory's
786	test results?

The amount of information available for review depends on the type of test. With inflation testing, for example, data on the number of non-compliers will be available as well as the individual volumes and pressures. In this case, a detailed comparison of the data from the manufacturer and the test laboratory can be conducted and it may be possible to identify the cause of disagreement. If, however, the dispute relates to freedom from holes, then the manufacturer must provide detailed and credible pre-release and in-process test results to support the claim for a re-test.

When a lot is rejected, in case there is a dispute over a lot or shipment of condoms, then the laboratory should keep the non-conforming condoms in respect to freedom from holes, visible defects and dimensions until the results have been accepted or until the dispute is resolved.

When the lot concerned is part of an ongoing order and there is historical or concurrent data on at least 10 lots, the process average can be estimated by one or more of the techniques given in Annex 2. If this process average is within the AQL, a re-test may be allowed.

6. RE-TESTING

Where re-testing is done, the second test should give additional confidence about the result, compared with the first test. Re-testing may be done using the next higher inspection level defined in *ISO* 2859-1 than the one used for the first sample (e.g. G-II instead of G-I).

Because of the operating characteristics of the sampling plans specified in *ISO 4074*, which are primarily intended for the routine testing of a continuing series of lots, there can be a significant probability that a rejected lot will be accepted on re-test even if the lot does not conform to the relevant AQLs. This means that, in many cases, re-testing will lead to conflicting results. Therefore, re-testing should be undertaken only when there is strong evidence that an error has been made. More information on the statistical issues associated with sampling is given in Annex 2.

Where possible, the re-tested sample should be taken from the laboratory's retained sample taken at the time of sampling. If this is insufficient, or if the sample is suspect, a new sample will need to be taken. If disputes cannot be resolved, it is recommended that retesting be undertaken by independent third laboratory accredited for male latex condom testing.

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826	Annex 1
827	
828	Sampling Procedures for Condoms
829	r. r. P. S
830	1. ACRONYMS
831	
832	EOI: Expression of Interest
833	ISO: International Organization for Standardization
834	PSB: Procurement Services Branch
835	QA: Quality Assurance
836	SO: Super Office
837	SOP: Standard Operating Procedure
838	UNFPA: United Nations Population Fund
839	
840	2. DEFINITION
841	
842	This Standard Operating Procedure (SOP) describes the process to be followed when sampling
843	consignments of male condoms and female condoms.
844	
845	3. PURPOSE
846	
847	The purpose of this SOP is to provide guidance for the process to be followed when preparing
848	for sampling; and sampling of male and female condoms.
849	
850	4. SCOPE AND APPLICABILITY
851	
852	This SOP is intended to be used by inspecting and sampling agencies, as designated by the
853	United Nations Population Fund (UNFPA) and UNFPA/World Health Organization (WHO)
854	prequalification inspections, and for the QA of MC/FC procurement.
855	
856	
857	

5. **PROCESS** 858 859 The required number of individual condoms for the sample is taken in whole bulk (inner) 860 boxes, each of which typically contains 144 or 100 condoms. The number of boxes 861 required should be calculated based on the sample size required and the number of 862 condoms in the bulk boxes. The individual boxes should not be opened. If any are 863 opened, for example to confirm the number of condoms in a box, they should be re-sealed 864 under the supervision of the inspector or sampling agent. 865 866 Determine the number of pallets in each batch of the consignment. 867 a. 868 Calculate how many exterior cartons are to be checked visually, as specified in the 869 b. 870 summary of the requirements of Lot-by-Lot pre-shipment testing. The pallets that the 871 exterior cartons are in should also be checked visually. 872 Check the condition and integrity of the outer packing material and the pallets. 873 c. Amongst the verification of the conditions, the sampler (inspector) should document 874 875 via a written statement, as well as photographic evidence, the conditions and integrity of the outer packaging. 876 877 Check the general cleanliness of the outside of the goods on the pallets. 878 d. 879 Check that the overall labelling of the pallets matches the packing list. 880 e. 881 f. Record any defects. The record should include a written statement as well as 882 photographic evidence of the defects. 883 884 Count the total number of transport packs (cartons) on the pallets and verify the total 885 g. against the packing list. Record the total on the inspection report. 886 887 Calculate the number of cartons to be sampled using the formula $n = \sqrt{N} + 1$, where h. 888 889 n is the number of cartons to be sampled and N is the total number of cartons.

methods below:

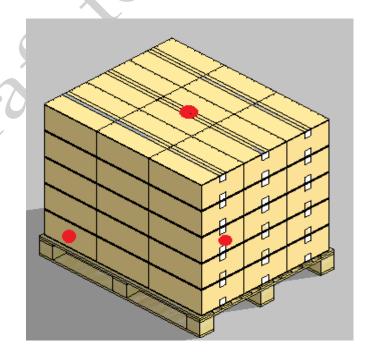
890
891
892

- i. Round up n to a whole number if necessary.
- ii. If N is less than, say, 15, then sample all of the cartons.
 - iii. Sample the N cartons, using a random sampling plan, as described below, and place the samples in a separate container.

896 i. Randomly select the cartons to be sampled from each pallet, using one of the two

i. Option 1. Obtain the total number of cartons in the consignment from the manufacturer in advance and select the cartons to be sampled using a random number generator (e.g. by computer software or on a smartphone) or random number tables. To maintain independence, DO NOT inform the manufacturer about the actual cartons to be sampled.

ii. Option 2. Draw the samples equally (as far as possible) from each pallet. For example, if there are ten cartons to be sampled from three pallets, sample three cartons from two of the pallets and four cartons from the remaining pallet. Cartons should be randomly selected from the top, middle and bottom of the pallets, for example as shown in figure 1.



911		iii.	Take pictures of the pallets/lots before retrieving sample boxes so UNFPA can
912			see the total quantities available for sample dispatch.
913		iv.	Take individual pictures of each pallet so UNFPA can monitor how the selection
914			of boxes within the different pallets has been performed.
915		v.	Record the number of cartons sampled and the carton number from which the
916			samples were drawn.
917			
918	j.	Chec	k the condition of the cartons for the integrity of the packing material.
919			
920	k.	Chec	k the cartons for cleanliness.
921			
922	1.	Conf	irm the labels on the cartons are undamaged.
923			
924	m.	Conf	irm that the cartons are undamaged.
925			
926	n.	Chec	k the labels for spelling mistakes.
927	0.	Conf	irm that the expiry date is present and legible (and the date of manufacture, if
928		requi	red). Products should be recently manufactured and, unless specifically
929		autho	orized in writing, have at least 75% of the shelf life remaining at the time of the
930		delive	ery to country of destination.
931			
932	p.	Chec	k and verify the requirements in the inspection templates (Annex II and/or Annex
933		III).	
934			
935	q.	Reco	rd any defects and discrepancies. (Include the Lot number and Carton number
936		of wh	nere the defect was found.)
937			
938	r.	Num	bers of condoms to be selected from the sampled cartons. The condoms shall be
939		select	ted in their bulk pack – usually as boxes of 1 gross (144 units) but occasionally
940		as bo	xes of 100 units. Note: Samples should be taken, taking into account the actual
941		Lot s	ize, irrespective of pieces ordered.
942			

943		i.	Standard pre-shipment testing for male condoms (no oven conditioning
944			required). See table 1.
945		ii.	Exceptional pre-shipment testing for male condoms - oven conditioning
946			required. See table 2.
947		iii.	Female condoms (note that female condoms are not usually packed in boxes
948			of 1 gross). See table 3.
949		iv.	Sample the condoms based on the Lot size, not the order quantities.
950		v.	Take the condom boxes from the cartons selected for sampling. Randomly
951			select the boxes from the top, middle and bottom of the cartons and spread the
952 953			sampling across the cartons as evenly as possible.
954	s.	Check	the condom boxes for integrity of the packing material.
955			
956	t.	Check	the condom boxes for cleanliness.
957			
958	u.	Check	the condom boxes for distortion or discolouration.
959			
960	v.	Confi	rm that the labelling of the condom boxes is undamaged.
961			
962	w.	Check	if there is any special artwork that may have been proposed from the country
963		of des	tination is appropriately added.
964			
965	х.	Check	the condom boxes for overall damage.
966			
967	y.	Check	the labelling on the condom boxes for spelling mistakes.
968			
969	z.	Confi	rm that the labels on the condom boxes carry the name of the manufacturer,
970		expiry	date and date of manufacture (if required).
971			
972	aa.	Check	the instructions for use.
973			
974	bb.	Recor	d the defects. (Include the Lot number and Carton number of where the defect

975	was found.)		
976			
977	6. RE	PORTING RESULTS	
978			
979	a. As	ummary of the inspection should be included in the report.	
980			
981	b. In	addition to the standard content of the report, the report should include the	
982	foll	owing:	
983			
984	i.	Full details of goods and packaging;	
985	ii.	Total number of cartons opened for collection of the samples;	
986	iii.	Serial number of the cartons opened;	
987	iv.	Number of grosses sampled per carton;	
988	v.	Record all Lot/Batch numbers sampled;	
989	vi.	Number of grosses per batch sampled;	
990	vii.	Description of sealing procedure : describe how the samples were sealed in a	
991		tamper proof manner (for example, box was taped and dated).	
992	viii.	Seal numbers, if applicable.	
993			
994	Reference	ees	
995		CX	
996	ISO 4074:2015 Natural rubber latex male condoms – Requirements and test methods.		
997			
998	ISO 25841:2014 Female condoms – Requirements and test methods.		
999			
1000	Male Latex Condom: Specification, Procurement and Guidelines for Procurement 2013.		
1001			
1002	Female Con	dom: Generic Specification, Procurement and Guidelines for Procurement 2012.	
1003			
1004			

Annex 2 1005 1006 **Methods for Assessing Quality of Suppliers** 1007 1008 1009 There are a number of methods for assessing the quality of manufacturers. Because of the 1010 uncertainty in estimating the quality of a LOT by testing a sample, as discussed in Section 1, 1011 Chapters 1 and 4, it is only by monitoring quality across many LOTS that a reliable picture can 1012 be established about the quality of a specific manufacturer. Decisions based on information 1013 from a small number of LOTS—for example, in the case of short-term or small-volume 1014 contracts—can be misleading when considered in isolation. In general, it is most important to 1015 monitor the performance related to the Performance Requirements. 1016 1017 Based on an analysis of data from a number of manufacturers, individual lot average values 1018 should not vary by more than \pm 20% from the overall average across all lots tested. Any lot 1019 exhibiting a shift from the overall mean that is larger than 20% should be rejected, and any 1020 long-term shift in the lot averages should be investigated. Monitoring is best achieved by using 1021 a control chart (e.g. a Shewhart chart). 1022 Unless there is specific concern about an individual supplier's ability to comply with the 1023 design-related requirements, it is probably not worth monitoring these properties. 1024 1025 1026 The methods that can be used to monitor quality are as follows. 1027 1028 1. PROCESS AVERAGE 1029 1030 The process average is the percentage of condoms that are non-conforming over a defined time 1031 period or quantity of production. It is calculated for each requirement detailed in the 1032 WHO/UNFPA Specification by dividing the number of non-conforming condoms by the total 1033 number of condoms tested. Ideally, the process average for a specific attribute should be not 1034 greater than half the specified AQL. 1035

2. CONTROL CHARTS (SHEWHART CHART)

Control charts provide a very convenient and simple way of monitoring quality over time and observing trends in process averages. They can provide early warning of any change in quality, alerting both manufacturers and purchasers to potential problems. They can be used retrospectively to assess how stable a process is. They provide a means of correlating changes in process average with process operating conditions or change in raw material batch. Their use is strongly recommended to confirm that a manufacturer has production under control and is capable of achieving the quality levels specified.

To construct a control chart, the percentage defects for each LOT is plotted against LOT number or any other appropriate parameter such as date of manufacture.

Control charts can also be constructed for variable data, such as average burst volumes and burst pressures, and for standard deviations. Warning and control limits are usually added to the control chart to allow changes in quality to be assessed quickly. Typically, warning limits are set at the overall mean ± 2 standard errors of the means. If the warning limits are approached, it implies that changes are occurring that could lead to problems with product quality and action should be taken to restore the process to normal operation.

Action limits are set at the overall mean ± 3 standard errors of the means. If the action limits are approached, then it is most probable that a statistically significant change to product quality has occurred and immediate action must be taken to address the problem. The standard error of the means is determined by calculating the standard deviation of a sequence of LOT means when the process is considered to be operating in statistical control. It is recommended that data from between 20 and 30 individual LOTS be used when computing the standard error of the means.

Typically, for latex condom production the standard error of the means, expressed as a percentage of the overall means, for burst volume and burst pressure data is in the region of 6%.

Any shift in the average burst pressure or volume of a LOT or LOTS by more than 18% to 20% almost certainly signals that there has been a highly statistically significant change in the manufacturing process and/or the materials used. If this occurs, further investigation is urgently required.

Monitoring changes in average burst volumes and pressures using control charts is an excellent method of detecting significant changes in the quality of production. This procedure can be implemented as an alternative to testing oven-conditioned condoms for bursting volume and pressure on a LOT-by-LOT basis.

Cumulative sum (cusum) control charts can also be used. In these charts, the cumulative difference between the actual result and the target or expected result is plotted in place of the process average. Cusum charts have advantage of being able to detect changes in underlying quality more rapidly than standard charts based on the process average, but they are more complex to construct and not quite so intuitive to understand.

Refer to a standard textbook on quality control procedures or statistics for more information on control charts. Procedures for producing these charts are also given in a series of ISO standards: *ISO* 7870 is a general guide and introduction to control charts; *ISO* 8245 describes Shewhart charts and includes techniques for charting attribute data; and *ISO* 7966 describes acceptance charts. Cusum charts are described in parts 1–4 of *BS* 5703.

3. AGGREGATE ANALYSIS

On occasion, it might be useful to determine whether a shipment consisting of a number of LOTS is in compliance based on an aggregate assessment of the results taken across all the LOTS tested. In order to do this, the acceptance number for the total sample size may be calculated using the table below. The acceptance numbers (D) can be calculated from the following equations for any specific AQL and aggregated sample size (N). For additional advice on calculating and using these acceptance numbers, please contact the Help-Line.

When using the aggregate analysis method, it is also necessary to take into account the results for individual LOTS and the process average before reaching a decision about the capability of

4. NUMBER OF LOTS REJECTED

the manufacturer.

Another approach is to review the number of LOTS rejected over the long term. If this number significantly exceeds 5%, there is a high probability that the manufacturer's process average is greater than the stipulated AQL. A problem with this approach is that the number of LOTS that may fail in the short run will vary considerably and may exceed 5% because of the same type of sampling errors that apply to individual LOTS.

Therefore, this rule can only be applied to large numbers of LOTS. The sampling plans given in *ISO* 2859–1 do, however, contain a useful guide that can be used to identify potential problems with quality in the short term.

These plans are primarily intended to be used with the switching rules which alter the probability of acceptance of LOTS on the basis of history. The switching rules are not generally used in the condom sector, but the rule for switching to tightened inspection is a very useful indicator of potential problems. This switch is triggered whenever there are two LOT rejections in any continuous sequence of five or fewer LOTS. If this occurs, the quality of all further LOTS from the manufacturer should be closely monitored and the procedures described in this annex should be used to determine the process average. Discontinuation of supply may be appropriate if this investigation confirms a serious quality problem. Contact the Help-Line for further information:

1126 qa-team-group@unfpa.org

- 1128 AQL 0.25 D = 0.01(0.25N + 8N 0.55)
- 1129 AOL 1.0 D = 0.01(1.0N + 17N 0.55)
- 1130 AQL 1.5 D = 0.01(1.5N + 22N 0.55)
- 1131 AQL 2.5 D = 0.01(2.5N + 30N 0.55)

1132 AQL 4.0
$$D = 0.01(4.0N + 36N 0.55)$$

1133



Annex 3 1135 1136 **Glossary of Terms and Abbreviations** 1137 1138 **Acceptance number** The highest number of non-compliers (failures) allowed in a specific test from a selected sample. **AQL** Acceptable Quality Limit. The quality level that is the worst tolerable process average when a continuing series of LOTS is submitted for acceptance sampling (ISO 2859-1). N.B. Manufacturers should be consistently achieving a process average that is better than the AQL. **Batch** Sometimes used in place of "LOT" (see definition of LOT). (WHO recommends that "LOT" be used when referring to condoms.) Can also refer to a homogenous quantity of latex that has been compounded and is ready for dipping from which several LOTS will be made. Or, to describe a quantity of individual raw materials. Bioburden The population of micro-organisms on a raw material, component, product, packaging or equipment. CE mark On condom packaging, a mark certifying that the product conforms to the essential requirements of the European medical device directive 93/42/EEC. A regime of testing to verify that a LOT complies with the **Compliance testing** specification. **Condom** Medical device that is intended to be worn on the penis during sexual activity for purposes of contraception and to prevent the spread of sexually transmitted infections. Condoms are usually made from natural rubber latex but may also be made from synthetic materials, such as polyurethane. **Confirmatory testing** Testing carried out on receipt of a product in country.

Design Requirements Characteristics of the condom that are specified according to

the procurer's requirements.

Expiry date The date at which the product is no longer considered

acceptable for use.

Inspection level The degree of examination of the LOT, as specified in *ISO*

2859–1.

The higher the inspection level, the more samples will be tested and, hence, the lower the risk of faulty products

reaching the end user.

ISO International Organization for Standardization.

ISO/TC 157 International Organization for Standardization, Technical

Committee 157 for Non-Systemic Contraceptives and STI

Barrier Prophylactics.

Length The length of the condom measured from the open end to the

tip, excluding any reservoir.

LOT A quantity of condoms of a single grade, class, size and

composition, manufactured under essentially the same

conditions. With certain exceptions, all the condoms

comprising a LOT will have identical formulation; the same

dimension, colour, shape, and surface texture; be

manufactured on the same production line; and be vulcanized

under the same conditions.

National Regulatory Authority A regulatory body with authority in a specific country to

control the importation and distribution of medical

products. See also Regulatory authority.

The foil sachet in which the condom is sealed after Package

manufacture.

Performance Requirements The critical tests of quality that all LOTS must pass in order

to provide adequate consumer protection.

Prequalification

The steps taken by the procurer to verify a manufacturer's suitability to provide condoms of the required quality. The WHO/UNFPA Prequalification Scheme includes periodic assessment of manufacturing dossiers, testing of samples and factory inspection.

Pre-shipment compliance testing

A regimen of compliance tests carried out before a shipment leaves the supplier's factory.

Process average

The percentage of condoms that is non-conforming over a defined time period or quantity of production. It is calculated for each requirement detailed in the *WHO/UNFPA Specification* by dividing the number of non-conforming condoms by the total number of condoms tested. Ideally, the process average for a specific attribute should be not greater than half the specified AQL.

Random sample

A sample of condoms drawn randomly from a LOT for testing purposes.

Regulatory authority

A national or international body set up to oversee the safety, efficacy and quality of medical devices, including condoms, imported and distributed within a country or region.

Sampling plan

A specific plan that indicates the number of units (condoms) from each LOT that are to be inspected (sample size) and the associated criteria for determining the acceptability of the LOT (acceptance and rejection numbers).

Shelf-life

The period of time after manufacture that the product is considered acceptable for use.

Specification

A detailed statement of a product's requirements as established by the procurer. Usually, a specification is based on an established standard.

Standard

A detailed statement of the minimum acceptance requirements, as established by a national or international regulatory authority.

Total Viable Count (TVC)

The number of living micro-organisms in a given sample.

1140

UNFPA	United Nations Population Fund.
USFDA	United States Food and Drug Administration.
Width	The dimension measured 30 mm from the open end, at a right
	angle to the length of the condom when it is unrolled and laid
	flat without any creases.
WHO	World Health Organization.
WHO/RHR	World Health Organization, Department of Reproductive
	Health and Research.
