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Smart Manufacturing in Pharma: AI, Quality & Supply Chain

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Executive Summary

Smart manufacturing is revolutionizing pharmaceutical production by embedding data, AI/ML, robotics, and digital technologies into every step of manufacturing, quality management, and supply chains (www.gsk.com) (www.sciencedirect.com). Leading companies like GSK are aggressively embracing this shift: for example, in 2025 GSK announced a **\$30 billion** commitment to U.S. R&D and manufacturing over five years – including **\$1.2 billion** to build next-generation “flex” factories powered by AI and advanced digital technologies (us.gsk.com). These smart factories yield concrete benefits. A McKinsey report found that biopharma plants using digital technologies and advanced analytics achieved **25–40% increases in capacity** and **15–20% reductions in lead time** (www.gsk.com). At GSK’s own Upper Merion facility, real-time digital scheduling (“a navigation system” for the plant) eliminated bottlenecks and **unlocked ~10% more capacity** (www.gsk.com). In parallel, condition-monitoring (“digital twin”) analytics detect faults early in the process (www.gsk.com), and robotic automation handles repetitive or delicate tasks (e.g. sample pipetting) to reduce human error (www.gsk.com) (www.pharmamanufacturing.com). GSK reports that electronic batch records can reduce pages requiring review from hundreds per batch to about 20–30 (www.gsk.com).

The result of these innovations is faster, more reliable production of high-quality medicines. For example, GSK reports that its digital systems reduce deviations and improve product yields, enabling more doses to reach patients sooner (www.gsk.com). Across the industry, AI-driven predictive models are now used to schedule maintenance, optimize inventory, predict quality, and even plan supply-chain sourcing. A recent survey of AI in pharma supply chains shows that machine learning dramatically improves demand forecasting, inventory control, and crisis resilience (www.sciencedirect.com). Together, these technologies make the supply network more adaptive and responsive (for instance, allowing real-time tracking and risk management of materials). In summary, smart manufacturing in pharma – powered by AI and data analytics – is proving transformational: boosting output and flexibility while upholding stringent safety and quality standards (www.gsk.com) (www.sciencedirect.com).

This report provides a comprehensive analysis of smart manufacturing in the pharmaceutical industry, with a focus on GSK’s experience as a case study. It covers the historical evolution of pharma manufacturing, the enabling technologies (IoT, AI/ML, robotics, digital twin, cloud, etc.), impacts on operations (throughput, quality, cost, sustainability), and the implications for supply chains and regulatory compliance. We present data and examples from industry reports, academic studies, and GSK’s own publications, illustrating concrete outcomes (e.g. capacity gains, efficiency metrics) and challenges. Finally, we discuss future directions – such as continuous manufacturing, personalized medicine, and the digitalization of regulatory processes – and the workforce and organizational changes required to realize the full potential of AI-augmented pharma manufacturing. All findings are supported by citations from credible sources.

Introduction and Background

Pharmaceutical manufacturing has always been a complex, multi-step, high-stakes process. Producing medicines and vaccines involves a long series of chemical and biological processes that **must be executed flawlessly**, since any error can compromise product safety or efficacy. As GSK notes, making a life-saving

vaccine or drug “involves hundreds of steps – and each one must be done 100% perfectly, every time” (www.gsk.com). In traditional plants, each step is often manually documented, and deviations trigger lengthy investigations. Such manual approaches are time-consuming and costly: McKinsey reports that about **30% of pharma operators’ time is spent on documentation** (with biotech batch records often comprising 5,000–45,000 manual entries each) (www.mckinsey.com). These inefficiencies prolong cycle times and limit operational agility.

In recent decades, advances in computing, sensors, and communications have enabled a shift toward *digitalization* and the “**Industry 4.0**” paradigm. Industry 4.0 – the so-called fourth industrial revolution – envisions factories that are highly automated, interconnected, and data-driven (www.sciencedirect.com). In pharmaceuticals, applying Industry 4.0 means equipping plants with Internet-of-Things (IoT) sensors, robotics, real-time analytics, and AI/ML models to create “smart” factories. These technologies promise “dramatically” better outcomes: higher throughput, more consistent quality, greater flexibility, and reduced waste (www.sciencedirect.com). For example, integrating IoT and AI can boost *overall equipment effectiveness* (OEE) – currently only ~35% on average in pharma – by up to 50–100% through predictive tuning of machines (www.mckinsey.com). At scale, McKinsey estimates only 30% of existing sites would be needed if OEE rose to 60% – highlighting the productivity gains possible (www.mckinsey.com).

Pharma companies have been cautious due to regulatory demands and legacy infrastructure. But the COVID-19 pandemic and global market pressures have accelerated interest in digital solutions to improve resilience and keep supply chains agile. Regulators have similarly encouraged modern approaches. For example, the FDA’s Process Analytical Technology (PAT) initiative and Quality by Design (QbD) guidelines laid the groundwork for smarter process control (now evolving toward AI-driven control) (www.sciencedirect.com) (www.pharmamanufacturing.com). The FDA is even exploring AI-based control systems: in 2023 it presented a case where a neural-network predictive controller greatly outperformed a classic PID controller in a continuous pharmaceutical process (www.fda.gov). In sum, pharma manufacturing is entering a **smart-age**: one where advanced tech supplements human operators to ensure each step is executed optimally, securely, and at speed.

This report examines **what smart manufacturing looks like in pharma**, with GSK as a key example. We survey the enabling technologies (AI/ML, digital twins, robotics, digital records, etc.), describe new factory models and practices, and present evidence of their impact. We also cover supply-chain innovations – AI-driven demand planning, blockchain tracking, and connected logistics – which complement smart factories to ensure the right medicines reach patients efficiently. Finally, we discuss organizational and regulatory implications, and look ahead to future directions. By grounding our analysis in published studies, industry data, and GSK’s own announcements, we provide a detailed, evidence-based view of the current state and future of pharmaceutical smart manufacturing.

Smart Manufacturing Technologies in Pharma

Smart manufacturing in pharma is enabled by a suite of advanced digital technologies. These include the Internet of Things (IoT) for sensing and connectivity, artificial intelligence (AI) and machine learning (ML) for data-driven decision-making, robotics and automation for physical tasks, and cloud/big-data platforms for integration and analysis. Below we outline key technology components and how they apply in the pharma context.

IoT, Sensor Networks, and Data Integration

Modern pharma plants are increasingly instrumented with IoT devices and sensors that continuously measure process parameters (temperatures, pressures, flows, etc.) and equipment status. This **digital thread** of data replaces manual logbooks: as GSK explains, electronic batch records automatically *collect data in real time throughout the manufacturing process* (www.gsk.com). Rather than inspecting batches after the fact, digital sensors can feed into analytics to detect anomalies or drift in-process. For example, McKinsey highlights that a “paper-free factory” with end-to-end electronic documentation spanning materials through production into warehousing can dramatically streamline information flows (www.mckinsey.com). Likewise, a digital twin of the plant – a real-time virtual model of equipment and processes – can ingest IoT data and simulate behavior. GSK explicitly cites the use of “digital twin models (‘digital factories’) across several products to simulate processes, anticipate issues and accelerate manufacturing” (www.gsk.com). In practice, this means a plant can run “what-if” scenarios or optimize schedules by replaying the digital surrogate of production, ensuring resources are balanced and bottlenecks eliminated.

Integrating data from machines (operations technology, OT) with traditional business systems (IT/ERP/MES) is also critical. Smart manufacturing requires IT/OT convergence so that planning, execution, and quality data all feed central analytics. As Siemens notes for pharma, this convergence enables “data-driven operations” and continuous improvement (xcelerator.siemens.com). GSK’s smart site in Upper Merion uses a high-tech digital control room where data streams from across the plant are displayed on wall screens, giving personnel an “end-to-end view of operations” and insight into process efficiency (www.gsk.com). Such real-time dashboards exemplify how IoT and integrated data platforms provide actionable visibility that would be impossible in analog factories.

AI and Machine Learning in Production

Artificial intelligence and machine learning are the analytical engines of smart pharma. In manufacturing, AI enables predictive and prescriptive analytics: detecting patterns, forecasting outcomes, and recommending actions. Typical AI use-cases in pharma production include:

- **Predictive Maintenance:** Using ML models on sensor data to forecast equipment failures (e.g. when a pump’s vibration signals impending breakdown) allows preemptive maintenance. GSK highlights that its digital models “can anticipate when equipment will need replacing,” helping avoid unplanned downtime

(www.gsk.com).

- **Process Optimization:** AI algorithms can identify subtle correlations between process parameters and yield. For example, advanced analytics (“a type of digital twin”) at GSK detects early signs of process faults, so operators can intervene before a product ever deviates (www.gsk.com). Over time, accumulated batch data can train AI to suggest optimal set-points and recipe adjustments. McKinsey reports that by feeding months of batch history into models, plants can “understand and prioritize process-critical parameters” and simulate their influence on outcomes, thereby minimizing quality deviations (www.mckinsey.com).
- **Advanced Control Systems:** FDA Science Forum researchers compared a neural-network predictive controller with a PID controller in simulations of a continuous pharmaceutical manufacturing process. The simulations tested set-point tracking ($\pm 20\%$ and $\pm 50\%$ label claim) and disturbance rejection; results favored the neural-network controller in those scenarios ([FDA research abstract](#)).
- **Quality Prediction (“Soft Sensors”):** AI can act as a “soft sensor” to infer unmeasured quality attributes from indirect data. In biomanufacturing, for example, sensors on bioreactors and chromatographs combined with ML have been used to predict final purity or potency without waiting for lab assays. The Journal of Pharmaceutical Sciences notes multiple case studies (e.g. hybrid NIR spectroscopy models) where AI supports real-time potency estimation and in-process control (www.sciencedirect.com). By enabling instantaneous feedback on product attributes, soft-sensors move quality assurance into the real-time domain.
- **Anomaly and Fault Detection:** Machine learning is effective at spotting outliers and deviations. AI-based anomaly detectors can flag subtle equipment drifts or contamination events well before they manifest in end-product tests. For instance, ML algorithms have been applied to bioprocess chromatography signals to identify rogue protein peaks, reducing batch failures (www.sciencedirect.com). For visible-particle inspection of injections, detection probability varies with the product, particle characteristics and container design ([USP <1790>](#)).
- **Supply Chain and Scheduling:** AI is used to optimize production planning and inventory (discussed below in Supply Chain section) (www.mckinsey.com) (www.sciencedirect.com), ensuring materials and capacity are coordinated in real time.

In sum, AI in pharma manufacturing spans the lifecycle: inferential analytics (soft sensors), anomaly detection, advanced control/optimization, and vision-based inspection (www.sciencedirect.com). Together with PAT and QbD foundations, these AI tools are shifting quality assurance away from passive end-product testing toward predictive, real-time monitoring (www.sciencedirect.com). As companies accumulate more process data, AI’s role in supporting decision-making and control will only grow.

Robotics and Automation

Physical automation – from robotic arms to autonomous vehicles – is another pillar of smart pharma manufacturing. Robotics handle repetitive or ergonomic tasks, improving precision and reducing human error. At GSK’s Upper Merion site, robots are already used in the analytical lab to prepare test samples (www.gsk.com). This reduces manual pipetting, which can cause fatigue errors, and frees scientists for higher-level analysis. Similarly, assembly and packaging lines can deploy vision-guided robots to sort and package

vials, syringes, or blister packs. Even warehouse logistics are being automated with AGVs (automated guided vehicles) that move pallets of raw materials or finished goods, sparing workers from heavy lifting (www.gsk.com).

Advantages of robotics in pharma include improved traceability and consistent quality. Automated systems precisely record each operation (who/what/when), supporting data integrity. For example, an automated liquid handler not only pipettes doses uniformly but also logs each action, eliminating hand-written logs that might be illegible or incomplete (www.pharmamanufacturing.com). Inspection of injectable products is probabilistic and cannot be relied upon to detect and remove every defect ([FDA-hosted technical presentation](#)).

Digital Twin and Simulation

The **digital twin** concept underlies many smart manufacturing advances. A digital twin is a virtual copy of a manufacturing unit (or entire plant) that runs in parallel with the real process. It continuously receives data from sensors and can simulate future states. Pharma companies deploy digital twins for batch scheduling, process design, and what-if analysis. GSK explicitly mentions “digital twin models (‘digital factories’) ... to simulate processes, anticipate issues and accelerate manufacturing” (www.gsk.com). For scheduling, a digital-twin-based navigator can compute optimal production sequences in real time. As site director Naugle explains, such a scheduling system “is like a navigation system in your car – it gets you from A to B in the most efficient way,” removing bottlenecks and boosting throughput (www.gsk.com).

Digital twins can be used to explore process scenarios, but model validation must establish fitness for the intended use against predetermined acceptance criteria ([FDA-hosted ICH Q13](#)).

IT/OT Integration and Advanced Control Systems

Achieving a smart pharmaceutical factory requires deep integration between IT systems (e.g. ERP, LIMS, MES) and OT (machinery, PLCs, sensors). This convergence enables unified control and quality governance. The pharma-smart manufacturing blueprint calls for distributed control systems (DCS) and Manufacturing Execution Systems (MES) that enforce data integrity (ALCOA+) and automate workflows (www.pharmamanufacturing.com). For example, an MES can automate batch records, ensure step completion, and enforce electronic signatures – drastically reducing manual errors and omissions (www.gsk.com) (www.pharmamanufacturing.com). Indeed, regulators now “recognize that automation empowers manufacturers to more easily minimize errors, optimize resources, and reduce patient risk,” improving both compliance and availability of therapies (www.pharmamanufacturing.com).

Advanced control architectures (e.g. model predictive control, digital feedback loops) can further optimize ongoing production. In continuous manufacturing lines, the ability to adjust parameters in real time based on output creates a “closed-loop” system with minimal human intervention (www.mckinsey.com). McKinsey envisions a future where deviations are predicted and corrected automatically before they occur (www.mckinsey.com). To enable this, data historians (comprehensive time-series databases) and edge-computing are critical so the control system has fast access to recent process history. As one expert notes,

enabling a “zero deviations” future requires storing more data and deploying additional sensors that are often missing today (www.mckinsey.com). In practice, this means next-generation equipment must not only collect data but also adjust itself – a synergy of AI and digital twins.

Summary of Technologies

The table below summarizes key smart manufacturing technologies and their applications in pharma:

Technology	Pharma Application	Examples / Benefits
IoT Sensors & Data	Real-time monitoring of equipment and processes; digital twins	Continuously log every process variable; detect drifts; support digital-twin models (www.gsk.com)
AI/ML Analytics	Predictive maintenance; yield optimization; quality prediction; supply planning	Forecast equipment failure; optimize reactor conditions; predict batch quality before release (www.gsk.com) (www.sciencedirect.com)
Robotics & AGVs	Automated sample handling; vial filling and inspection; material transport	Robotic lab pipetting reduces errors, AGVs automate pallet handling, vision robots inspect products (www.gsk.com)
Digital Twin	Virtual simulation of production lines and schedules	“Digital factory” models that run scenarios, optimize schedules (“like a car GPS”) (www.gsk.com)
Electronic Batch Records	Paperless workflow enforcement; audit trail	Automatically capture process data, reducing batch review from hundreds of pages to ~20–30 (www.gsk.com)
Advanced Control (MPC)	Closed-loop process control; AI-driven controllers	FDA simulations support potential use of neural-network predictive controllers in continuous manufacturing (FDA research abstract)
IT/OT Integration (MES)	Production management; data-integrity controls	System validation and controls should address software, hardware, personnel, and documentation (FDA data-integrity guidance)
Computer Vision	Automatic inspection of tablets, vials, parenterals	Product and packaging characteristics can limit particle inspection (USP <1790>)
Blockchain (emerging)	Secure serialization and traceability through supply chain	Tamper-proof drug pedigrees to fight counterfeit/tampering

Impact on Manufacturing Operations

The adoption of smart manufacturing technologies is already yielding measurable business benefits in pharma plants. Below we analyze key operational impacts, drawing on real-world data and case studies.

Increased Throughput and Capacity

A primary motivation for digitalization is to increase production throughput without expensive new assets. McKinsey’s analysis of “plants of the future” found that biopharma facilities using digital and analytics tools saw **25–40% higher capacity** and **15–20% shorter lead times** (www.gsk.com). GSK’s own Upper Merion site illustrates this: implementing a real-time production scheduler “has been an absolute game-changer,” removing

bottlenecks and **unlocking 10% more capacity** (www.gsk.com). This means the factory can produce ~10% more batches per year on the same equipment footprint. These gains come from smarter sequencing (via AI-driven scheduling), reduced idle time, faster batch changeovers, and fewer stoppages.

Another example is Novartis: the company reports that digital process controls and analytics have enabled production of more doses using existing lines with minimal equipment changes (McKinsey Lighthouse references list Novartis as a high-tech case). Although specific numbers vary, the trend is clear: leveraging software to optimize scheduling and eliminate human delays adds significant capacity at low cost. For instance, Siemens notes a pharma company converting a facility to mRNA vaccine production in **half the usual time**, thanks to rapid software commissioning (xcelerator.siemens.com).

Moreover, advanced planning (the “no-touch planning” from McKinsey) automates forecasting and scheduling across multiple plants. With AI managing supply-and-demand balance using digital twin models, companies can run at nearer to optimal volumes. McKinsey predicts that automating scheduling could lift average plant utilization well above the current ~40% by fully capturing real demonstrated performance data (www.mckinsey.com). In effect, smart planning unlocks latent capacity.

These productivity improvements directly translate to patient benefit: more drug quantities delivered sooner. GSK’s global supply chain delivered **1.7 billion packs** of medicines and **400 million vaccine doses** in the past year (us.gsk.com); digital enhancements aim to further boost these figures. As Greg Naugle (site director) noted, unlocked capacity “means more batches of medicines can be made per year ... and delivered to patients around the world” (www.gsk.com).

Equipment Efficiency and Predictive Maintenance

Pharma equipment often runs below its capability due to conservative settings and unexpected downtime. For example, typical Overall Equipment Effectiveness (OEE) in pharma is only ~35% (www.mckinsey.com). AI and IoT address this through predictive maintenance and adaptive control. By continuously monitoring equipment health, smart sensors can alert engineers of wear or misalignment before failure. One McKinsey study analogizes this to Formula 1 racing: analyzing gigabytes of car data to tweak performance. Similarly, AI can adjust machine speeds and parameters so that reactors or tablet presses run at the technical limits safely (www.mckinsey.com). In its February 2021 article, McKinsey described a potential **50–100% relative increase in OEE** from AI, rather than reporting identified preliminary trials ([McKinsey](#)).

Lower-frequency maintenance also reduces production pauses. Rather than fixed periodic checks, maintenance can be scheduled just-in-time when an AI model predicts parts will reach the end of their usable life. All these measures increase uptime and throughput.

Dynamic Scheduling and Execution

Traditional batch production often relies on static plans and manual tracking, which cannot adapt quickly to changes. Smart factories use digital scheduling systems that constantly reschedule tasks based on real-time conditions. GSK’s “digital navigator” system provides operators with dynamic instructions on what to produce next, akin to an optimized GPS route (www.gsk.com). This digital scheduling eliminated workflow conflicts and wait times at Upper Merion.

More broadly, AI-driven scheduling considers constraints like limited equipment, workforce shifts, and shelf-lives. For instance, a digital-twin-based planner can simulate various production sequences and choose the one that meets all constraints with minimal idle time. McKinsey cites early pharma examples where companies have started using such digital twins for planning, forecasting that eventually (in future) only a small team will oversee a fully automated planning engine (www.mckinsey.com).

The near-term effect is shorter manufacturing cycles. Siemens reports that with a modern MES and digital planning, a legacy plant was converted to new production **twice as fast** (50% reduction in conversion time) (xcelerator.siemens.com). This means changes like reformulations or capacity scaling can happen in months instead of years, greatly accelerating response to new product demands (as seen with COVID-19 vaccine ramp-up).

Sustainability and Resource Efficiency

Smart manufacturing also brings sustainability benefits. By optimizing processes and utilities, plants consume less energy and generate less waste. For example, Siemens reports that Pfizer's high-containment tablet-manufacturing facility in Freiburg, Germany, uses **40% less energy for environmental control** than a traditional facility (Siemens). Process optimization reduces off-spec batches, saving materials and disposal costs. Predictive maintenance means equipment operates at peak efficiency (less idling and stress).

Moreover, going paperless saves vast amounts of paper and supports greener operations. The shift to electronic batch records alone reduces paper waste significantly; one site reported eliminating hundreds of pages per batch (www.gsk.com). Reduced manual rework and scrap from improved process control further cut resource use. In the long run, a fully integrated smart plant can track material flows precisely and even incorporate renewable energy scheduling (e.g. shifting loads to off-peak times), contributing to pharma's environmental goals.

Workforce and Organizational Impact

Smart manufacturing changes how people work on the shop floor. Rather than eliminating jobs, automation shifts human roles toward higher-skilled tasks. GSK observes that repetitive tasks (heavy lifting, pipetting, data entry) are increasingly handed over to machines (www.gsk.com). For example, instead of manually scanning and writing nightly batch logs, operators now review exceptions flagged by an electronic system (www.gsk.com). This frees skilled staff to focus on problem-solving, continuous improvement, and exception management.

However, new technology requires new skills. Operators and engineers must become comfortable with data analytics tools, digital interfaces, and AI outputs. GSK is investing in "a whole new generation of STEM" talent to work in this digital environment (www.gsk.com). Cross-functional teams now commonly include data scientists and IT specialists alongside traditional production engineers.

Culturally, companies often foster a "tech-enabled" mindset: encouraging personnel to solve problems with data and automation. For instance, GSK's tech overview explicitly emphasizes "cultivating a tech-enabled culture" where people are empowered to use digital tools (www.gsk.com). Over time, workers transition from

routine operators to technology supervisors and analysts. This evolution is critical: as one expert puts it, advanced systems can sift through data faster than humans, but people are still needed “to understand data-based decisions” (www.gsk.com).

Quality Control and Compliance

Quality assurance in pharma manufacturing is now being reimaged under the smart paradigm. Traditionally, quality has relied on end-of-batch testing and human inspection. Smart technologies are shifting QA toward real-time and preventive measures.

Quality by Design and Continuous Monitoring

Regulatory frameworks like ICH Q8–Q12 have long endorsed Quality by Design (QbD) and Process Analytical Technology (PAT). These concepts are now turbocharged by AI and sensors. Continuous monitoring of critical quality attributes (CQAs) is becoming feasible. J. Pharm. Sci. reports that “digital transformation in pharmaceutical manufacturing is shifting quality assurance from primarily end-product testing toward real-time monitoring, control, and lifecycle learning” (www.sciencedirect.com). In other words, quality is being built into the process mathematically and digitally, rather than checked only at the end.

As a result, deviations can be predicted and prevented. McKinsey envisions a “zero deviations” world: by analyzing historical batch data, plants can identify key parameters and simulate their effects on product specifications (www.mckinsey.com). Indeed, today’s advanced analytics can reduce quality testing so dramatically that standard lab tests become the exception. McKinsey notes “25–30% of manufacturing costs relate to quality (especially QC lab costs),” but with smart control these tests may be largely replaced by sensor-based controls (www.mckinsey.com). Eventually, a closed-loop control system could adjust parameters on the fly to maintain quality in real time (www.mckinsey.com). Already, GSK’s digital plant records fewer deviations and catches anomalies earlier, improving compliance and reducing batch failures (www.gsk.com).

Electronic Records and Data Integrity

A core enabler of smart QA is digitized documentation. Electronic batch records (EBRs) ensure every step is digitally signed and timestamped. GSK reports that electronic batch records can reduce pages requiring review from hundreds per batch to about 20–30 (www.gsk.com). This enforces “review by exception”: operators only examine the rare anomalies flagged by the system, rather than every entry. As a result, data integrity is strengthened (no lost or illegible records) and review time is vastly reduced. McKinsey’s vision includes factories that are completely “paper-free,” with seamless electronic flow from raw materials through production to quality (www.mckinsey.com).

Audit trails, revision histories, and electronic signatures can support data integrity when systems are appropriately implemented, validated, and governed. Compliance also depends on controls addressing personnel and documentation, together with applicable predicate-rule requirements ([FDA data-integrity guidance](#); [FDA Part 11 guidance](#)).

Automated Quality Inspections

Automation extends to laboratory and visual inspection. GSK has deployed lab robots to handle sample prep, which “reduces the number of laboratory investigations due to human errors” (www.gsk.com). In production lines, AI-driven sensors (e.g. near-infrared, Raman) can perform in-line checks of blend uniformity or moisture content instead of offline assays. USP <1790>, Visual Inspection of Injections, provides guidance on inspecting injections for visible particles. Detection probability varies with dosage form, particle characteristics and container design ([USP <1790>](#)).

Automated inspection data should be governed by appropriate controls to manage risks associated with the system ([FDA data-integrity guidance](#)).

Regulatory Framework and Validation

Implementing advanced technologies must account for applicable GMP requirements. FDA's 2023 AI-in-drug-manufacturing paper was issued for discussion and is neither draft nor final guidance ([FDA discussion paper](#)). In essence, companies must show that AI models and digital systems are as reliable as traditional methods. Good practices include extensive model validation, transparent “explainable AI” when possible, and rigorous change control over algorithms. The Journal of Pharmaceutical Sciences emphasizes that successful AI deployment requires a “thorough understanding of GMP requirements” and building models into the Pharmaceutical Quality System (www.sciencedirect.com).

FDA's Science Forum work reports simulation results supporting potential use of neural-network predictive controllers in continuous pharmaceutical manufacturing ([FDA research abstract](#)).

In summary, smart manufacturing in pharma **enhances quality** while complying with regulations. Data-driven controls allow companies to shift quality assurance leftward (to in-process monitoring) (www.sciencedirect.com), reducing waste and CAPA costs. Automation underpins data integrity and auditability (www.pharmamanufacturing.com). The key challenge is ensuring these systems are validated and managed within GMP – a task requiring both technical rigor and regulatory dialogue.

Supply Chain and Logistics Innovations

A smart manufacturing strategy must extend beyond the factory walls into the entire supply chain. AI and digitalization are transforming pharmaceutical supply chains in areas of planning, execution, and resilience.

Demand Forecasting and Inventory Optimization

Pharma supply chains historically suffered from volatile demand (e.g. seasonal flu vaccines, pandemic surges) and rigid, eight-month safety stocks. AI is changing this by delivering more accurate forecasts and dynamic planning. Machine learning models can process far more data than traditional statistical models – including real-time sales, epidemiological trends, weather, and even social media signals – to predict demand. A recent

open-access review found that **AI consistently outperforms traditional methods** in inventory control and demand forecasting (www.sciencedirect.com). Case studies in industry (e.g. Roche in Switzerland) report that ML-driven forecasting reduces stockouts and excess inventory simultaneously.

At GSK and peers, AI-based planning tools now continuously reconcile demand against raw-material supplies and production capacity. McKinsey suggests that soon only a small team will oversee an automated “no-touch” supply planning system (www.mckinsey.com). Already, integrated digital twins are being developed for supply networks: these mirror not only a single plant but the flow of products from everyone’s suppliers to the customer. By running simulations of disruptions – say, a delayed API shipment or a surge in orders – managers can preemptively reroute materials or adjust production. In essence, supply planning becomes a proactive, rather than reactive, task.

Risk Management and Resilience

The fragility of global pharma supply chains (highlighted by COVID-19 and industry consolidations) has driven investment in resilience. AI aids this in several ways. Anomaly-detection models can alert to supplier delays or quality issues down the line, long before the effect is felt in production. Predictive analytics continuously monitor factors like geopolitical news or transportation data; for example, some companies now flag risks if a natural disaster or port strike is likely to impact shipments. These tools support “proactive risk management”: one McKinsey report envisions predictive analytics monitoring environmental, maintenance, quality, and supply-chain risks in real time (www.mckinsey.com).

Decentralization is another emerging trend. 3D printing of personalized medications (for instance, on-demand compounding of sterile injectables) could eventually localize production, mitigating global supply bottlenecks (www.sciencedirect.com). Studies show 3D-printed dosage forms can be validated on-site in hospitals or pharmacies, shortening lead times. GSK’s supply-chain strategy also includes digital traceability: blockchain or RFID tags on high-value products (not yet industry-wide, but in pilots) enable secure tracking. This not only combats counterfeits but also provides an immutable audit trail of a product’s journey from factory to patient.

Cold Chain and Quality in Logistics

Many pharmaceuticals (especially biologics and vaccines) are temperature-sensitive. Smart logistics now use IoT and AI to strictly control cold chains. Smart sensors in packaging continuously track temperature and location, with AI models predicting any spoilage risk. Machine learning can optimize shipping routes and carriers to minimize transit times for perishable cargos. For example, if a refrigeration unit on a vaccine truck shows rising temperature, an AI system could automatically alert shippers to divert or cool. Though confidentiality limits public data, industry reporting suggests these capabilities are rapidly being adopted in vaccine distribution.

Supplier Collaboration and Digital Platforms

Finally, multiple stakeholders are now connected through platforms and data-sharing ecosystems. Cloud-based supply platforms allow real-time sharing of forecasts, demand signals, and inventory status among manufacturers, contract manufacturers, and distributors. Collaborative AI tools (some provided by major tech

partners) can align production schedules with suppliers, shippers, and national stockpiles. This digital coordination helps ensure “steady supply of medicines and vaccines to patients worldwide,” as GSK emphasizes (www.gsk.com). In sum, the smart supply chain uses AI to turn volatility into agility: rapidly responding to crises and minimizing waste, while matching supply closely to patient needs.

Case Studies and Real-World Examples

GSK Upper Merion Smart Plant (Specialty Medicines)

GSK's Upper Merion, Pennsylvania facility is a flagship of pharma smart manufacturing. In 2019, GSK invested **\$120 million** to transform this plant into a state-of-the-art “smart” factory for complex specialty medicines (www.gsk.com). Key features and outcomes include:

- **Digital Scheduling:** A real-time production scheduler replaced manual planning. According to site director Greg Naugle, this system “has been an absolute game-changer,” removing bottlenecks and unlocking **10% more capacity** (www.gsk.com). More batches can now be made per year, directly increasing patient supply.
- **Control Room Analytics:** Upper Merion staff use a central “digital control room” with large touch-screen displays. Live data from fermenters, chromatography units, fill-finish lines, and QC labs feed into dashboards. Operators monitor yields and deviations in real time, leading to fewer quality investigations and improved product robustness (www.gsk.com).
- **Robotic Laboratories:** In the analytical lab, robots now prep and sample-test intermediates. This automation reduces repetitive pipetting (improving ergonomics), slashes human error in sample handling, and creates an audit trail for every test (www.gsk.com). GSK reports that lab investigations have already decreased and data traceability has improved.
- **Digital Batch Records:** Upper Merion moved to electronic batch records (EBRs). All process measurements are automatically logged in the MES. Review by exception can reduce pages requiring review from hundreds per batch to about 20–30 (www.gsk.com). This alone saved enormous review time and prevented manual calculation errors.
- **Illustrative AI Control Application:** AI could adapt manufacturing process parameters using real-time data, an application discussed by FDA ([FDA discussion paper](#)).
- **Human Empowerment:** Importantly, GSK stresses that technology augments rather than replaces people. Workers now focus on analyzing alerts and optimizing processes, while robots and software handle routine tasks (www.gsk.com). GSK has retrained operators to work in this digital environment, noting that young STEM talent is eager to join such “digitally enabled” sites (www.gsk.com).

These innovations at Upper Merion have led to measurable improvements. The plant reports higher yields, fewer quality deviations, and a quicker release cycle for specialty medicines. The success has encouraged GSK to roll out similar upgrades at other sites. Notably, under the 2025 US investment plan, GSK will build a next-generation biologics “flex factory” at Upper Merion (2026 start) explicitly **powered by AI and advanced digital technologies** (us.gsk.com). This underscores GSK's view that smart manufacturing is core to future capacity.

GSK Marietta Capacity Expansion

In Marietta, Pennsylvania (a major vaccines and oncology site), GSK recently undertook a massive capacity expansion. In Oct 2024, construction began on an **\$800 million** addition to double the site's size (us.gsk.com). Although still under construction, GSK has stated that this new facility will incorporate smart features – including AI-driven devices and automated processes. The combination of physical expansion plus embedded smart systems is expected to make Marietta one of the most advanced vaccine plants globally. Once complete, the facility aims to seamlessly scale new vaccine production while maintaining efficiency, using digital twins and paperless operations to manage the complexity.

Biologics Flex Factory (Future)

Announced in 2025, GSK will build an additional **biologics “flex” factory** at Upper Merion for respiratory and cancer drugs (us.gsk.com). “Flex” implies the ability to manufacture multiple product types and quickly switch lines. Crucially, this factory is stated to be *“powered by AI, advanced technologies and expert talent”* (us.gsk.com). Although details are sparse, one can infer it will draw on GSK's lessons: likely featuring modular single-use bioreactors, AI-managed scheduling, and robotics for sterile filling. The emphasis on AI suggests heavy use of predictive analytics and perhaps real-time release strategies. This project exemplifies how GSK is investing in hardware and software together to create the next wave of smart pharma plants.

Other Industry Examples

While GSK provides a primary case study, the smart manufacturing trend is industry-wide. Notable examples include:

- **BioNTech (Germany)** – In partnership with Siemens, BioNTech rapidly converted an existing facility to mRNA vaccine production in early 2020. A Siemens report notes the conversion time was cut by **50%** (from ~10 to ~5 months) by using a modern MES and digital project execution (xcelerator.siemens.com). The plant also uses advanced analytics to manage ongoing production of mRNA doses.
- **Novartis (Switzerland)** – Novartis has multiple digital initiatives. For example, it partnered with Microsoft on AI-driven cell culture optimization in biologics manufacturing (thepharmauniversity.org).
- **Pfizer (Freiburg, Germany)** – Siemens reports that the high-containment tablet-manufacturing facility uses **40% less energy in its environmental-control system** than a traditional facility ([Siemens](https://www.siemens.com)).
- **Roche (BioPharma)** – Roche has experimented with automated chromatography lines using ML to maximize yields and robustness. In drug product, it uses computer vision to inspect injectable packages. It has also tested blockchain for track-and-trace of biologics within its network.
- **Contract Manufacturers** – Companies like Catalent and Lonza are incorporating smart tech to serve clients. For instance, Catalent's new biologics facility in Maryland uses advanced automation and real-time quality sensors for each batch.

Academic case studies underscore these trends. A 2026 Journal of PharmSci review identifies eight published cases of AI in continuous manufacturing, including multivariate SPC on a twin-screw line, model predictive control of a tablet press, and ML-powered chromatography fault detection (www.sciencedirect.com). In

summary, across pharma there is a movement toward “digital lighthouses”: factories that harness data and automation for superior performance.

Data-Driven Evidence and Analysis

Multiple sources quantify the benefits of pharma smart manufacturing:

- **Productivity Gains:** As noted, McKinsey’s survey of advanced plants showed *25–40% higher capacity* and *15–20% shorter lead times* (www.gsk.com). These figures come from a broad study across the biopharma sector and reflect aggregate improvements in throughput and responsiveness from digital tools.
- **Capacity Utilization:** Typical pharma sites run at ~35–40% capacity with traditional methods. Digital twins and AI-based scheduling promise utilization closer to 60–70% (www.mckinsey.com). GSK reports that unlocked capacity enables more batches of medicines to be made each year ([GSK](#)).
- **Quality Costs:** McKinsey estimates quality assurance (QA and QC) currently makes up ~25–30% of manufacturing cost (www.mckinsey.com). Smart controls can shrink this dramatically. Even a modest 10% reduction in QA burden (via predictive QA) would save millions in a large production site.
- **Efficiency Metrics:** Siemens’ case studies highlight quick wins: one pharma plant integrated 4,000 sensor tags and removed 530 manual entries (xcelerator.siemens.com), immediately reducing human workload. Another built an mRNA line in half the normal time (xcelerator.siemens.com). Siemens reports **40% lower environmental-control energy use** at Pfizer’s Freiburg tablet-manufacturing facility compared with a traditional facility ([Siemens](#)).
- **Supply Planning:** McKinsey describes early pharmaceutical examples of digital twin planning and scheduling ([McKinsey](#)).

Expert opinions also support these figures. GSK’s leadership highlights the competitive necessity: CDIO Shobie Ramakrishnan notes that technology is “at the core of strategy to drive innovation” and early results from integrating science and tech are “exciting” (www.gsk.com). McKinsey’s facilities-of-the-future report similarly calls the moment a “really exciting turning point” for biopharma (www.gsk.com).

Of course, measurable outcomes will vary by site and maturity. Early adopters like GSK’s Upper Merion provide hard data on capacity gains (10%+). Many companies report intangible benefits as well (better visibility, faster decision-making), which are harder to quantify but essential. For example, GSK reports fewer deviations and improved product yields at Upper Merion ([GSK](#)). Overall, however, the convergence of published data and consultancy analyses make clear that smart manufacturing is delivering material efficiency, quality, and time-to-market improvements.

Regulatory and Quality Considerations

Implementing AI and digital tech in pharma manufacturing carries regulatory implications that must be addressed.

Validation and GMP Compliance

Any AI system affecting manufacturing must be validated and operate under GMP. This means establishing trust in the model just as one would in any analytical instrument. The Journal of PharmSci review emphasizes that FDA guidance frames AI/model deployment in terms of transparency, robustness, and change management (www.sciencedirect.com). For example, an AI-based control algorithm needs documented development with retraining procedures, and a plan for monitoring model drift. In practice, companies integrate AI validation into the overall Pharmaceutical Quality System (PQS) (www.sciencedirect.com). This may involve cross-functional teams of process engineers, IT, and quality assurance, akin to how computerized system validation (CSV) is handled.

ICH Q13 treats real-time release testing (RTRT) as optional for continuous manufacturing; when proposed, the associated reference test method should be described ([FDA-hosted ICH Q13](#)). For sterility, FDA says parametric release is appropriate only for terminally sterilized drug products ([FDA production and process controls Q&A](#)).

Data Integrity and Cybersecurity

Digitization elevates concerns about data integrity and security. Countermeasures include:

- **Security by Design:** Smart factories use secure networks and enforce role-based access. All data flows are encrypted. Because automated systems are more vulnerable to hacking, pharma companies apply stringent cybersecurity frameworks (e.g. NIST, FDA draft guidelines on cyber).
- **Redundancy and Fail-safes:** Critical controls often have fallback manual modes or duplicated measurement channels. For example, an AI monitoring system might trigger an alarm that a human must acknowledge if an unusual pattern is detected, ensuring fail-safe.
- **Regulatory Audit Trails:** Robust DCS/MES platforms provide immutable audit trails and support ALCOA+ (Attributable, Legible, Contemporaneous, Original, Accurate). Automated logs mean data integrity is easier to maintain when systems are properly configured.

FDA recommends risk-based strategies to prevent and detect data-integrity issues in manufacturing ([FDA data-integrity guidance](#)).

Human Factors and Change Management

Beyond technical validation, organizations must manage the cultural and training aspects of the smart transition. Change management is crucial: operators need to trust AI recommendations and understand new workflows. Successful smart factories invest heavily in workforce development: for instance, GSK emphasizes training a new generation of STEM-proficient staff and fostering a tech-oriented culture (www.gsk.com).

Moreover, human oversight remains essential to catch any AI anomalies. McKinsey cautions that while AI can automate planning and control, humans will still be needed to supervise the systems. Giving operators the ability to review and override decisions ensures a safety net.

Challenges and Considerations

While smart manufacturing offers substantial gains, it also poses challenges:

- **Integration of Legacy Equipment:** Many pharma plants have decades-old machinery. Retrofitting these with sensors and controls can be complex. Seamless integration requires custom engineering and can be cost-intensive.
- **High Initial Investment:** Building digital infrastructure (sensors, analytics platforms, network) demands significant upfront capital. ROI can take several years, especially for brownfield sites. Some industry estimates suggest 3–5 year payback horizons (www.opex.com). This can deter smaller firms or low-margin generics producers.
- **Data Quality and Standards:** AI is only as good as the data it learns from. Many plants have siloed data with inconsistent formats. Cleaning and standardizing legacy data is laborious but necessary to train reliable models. GSK and peers underscore that trustworthy data pipelines (time-synced, well-tagged, complete) are an “enabler for digital uplift” (www.sciencedirect.com).
- **Regulatory Uncertainty:** Although progress is being made, there remains some uncertainty in how regulators will treat fully automated processes. Companies worry that an AI-detected deviation might complicate an audit if not clearly documented. Early adopters often work closely with regulators to navigate this.
- **Workforce Displacement Anxiety:** Even though the net effect may be more skilled jobs, there can be concern among workers about being replaced by robots or AI. Transparent communication is needed to emphasize that smart technologies are tools that augment rather than eliminate human roles (www.gsk.com).
- **Cybersecurity Risks:** Connected factories face heightened cyber threats. A network breach could, in theory, corrupt production data or disrupt operations. Pharma companies must therefore implement robust security measures (segmentation, firewalls, intrusion detection) on par with other critical infrastructure.
- **Ethical and Privacy Issues:** While less obvious than in patient-facing AI, ethical issues can arise. For instance, using personal data of employees (e.g. bio-metric monitoring for fatigue) would require privacy safeguards. AI bias is less relevant in manufacturing contexts, but algorithmic transparency is still important for trust.

Despite these challenges, the general consensus is that the benefits outweigh the risks. As regulators and industry bodies issue guidance on AI and digitalization (e.g. FDA's AI guidelines, ISPE's Pharma 4.0 framework), many of these concerns are being addressed. Moreover, early experiments (like GSK's digital labs and Siemens-backed mRNA factories) demonstrate that even partially implemented smart systems can yield quick wins in throughput and compliance.

Future Directions and Implications

The trajectory of smart manufacturing in pharma points toward even deeper digital integration and novel capabilities:

- **Fully Continuous Biomanufacturing:** As regulatory acceptance grows, we expect more dosage forms (solid, sterile, vaccines) to shift to continuous processing. Fully continuous lines (from raw material polymer to packaged tablet) will maximize the benefits of online monitoring and adjust controls in real time. GSK's investment in "flex" factories and NIH calls for continuous platforms reflect this trend.
- **Personalized and Decentralized Production:** 3D printing and modular plants could enable late-stage mixing or printing of personalized doses (e.g. tailored oncologic drugs in hospital satellites). AI will be crucial in such setups to maintain quality across many small-batch "sites." Already, pilot programs for on-demand compounding with AI oversight are underway in some academic centers.
- **Supply Chain 4.0:** Blockchain and AI-enabled networks may evolve into self-directed supply webs. For example, an AI planning system might automatically order raw materials from alternate vendors in real time if a supplier falters. Demand forecasting may eventually integrate epidemiological AI (predicting flu outbreaks or new virus spread) to align supply preemptively. Multimodal, sensor-rich logistics (cold-chain IoT) will become standardized.
- **Workforce Evolution:** The pharma workforce will increasingly include data engineers, AI specialists, and digital quality experts alongside traditional chemists and process engineers. Training programs will need to combine pharmacology with data science. GSK's own hiring (e.g. "Smart Manufacturing Workstream Lead" positions) indicates a trend toward blended roles.
- **Collaboration and Ecosystem:** Pharma companies may share more anonymized production data to improve AI models industry-wide (e.g. "federated learning" consortia for predictive maintenance). Governments and regulators are likely to encourage such collaboration to ensure public good (e.g. vaccine readiness). Standardized digital protocols and platforms will emerge, analogous to what 5G did for telecoms.
- **Sustainability Impact:** A side effect of smarter processes could be greener manufacturing. Pharma is under pressure to reduce carbon footprint; smart resource scheduling (e.g. to use renewable energy off-peak) and waste prediction (minimizing batch loss) will be integral to environmental goals.

From an academic and consulting perspective, we are at the cusp of a revolution. All evidence suggests these technologies improve performance across operations, quality, and logistics (www.gsk.com) (www.mckinsey.com). Early movers like GSK have published data showing clear ROI on digital investments. As more sites retrofit or build digital factories, patterns will emerge for best practices. Future research (and practice) will likely focus on scaling these innovations safely, training the next-generation workforce, and integrating AI insights into strategic decision-making.

Conclusion

Smart manufacturing, powered by AI and data, is extending far beyond R&D flops or marketing chatbots into the core of pharmaceutical production and supply chains. GSK's extensive investments and public accounts showcase how this transformation delivers tangible results: higher throughput, faster delivery, and consistently high quality (www.gsk.com) (us.gsk.com). Industry reports corroborate these successes, reporting capacity uplifts of 25–40% and major efficiency gains (www.gsk.com) (xcelerator.siemens.com). FDA's 2023 AI-in-drug-manufacturing discussion paper is neither draft nor final guidance ([FDA discussion paper](#)).

In sum, smart manufacturing represents a new frontier in pharma: an intelligent, interconnected production network that learns and self-improves. It requires aligning people, processes and technology – but the payoff is enormous. Faster, more reliable access to medicines; more flexible factories able to ramp up new treatments; and supply chains that adapt to crises without panics. Pharmaceutical companies that master these approaches may achieve a decisive competitive advantage and better fulfill their mission to deliver therapies worldwide. GSK’s experiences – from Upper Merion’s smart plant to the \$30B U.S. commitment – provide concrete lessons on both the promise and the practicalities of this journey.

As digital maturity increases, we expect to see these smart concepts – digital scheduling, e-records, predictive analytics, robotics – become standard in pharma. The future factory will be a place where machines talk to each other, AI suggests improvements, and humans orchestrate strategy rather than fill forms. Although complete realization of Pharma 4.0 will take time, the current acceleration in investments and pilot programs indicates that **the smart pharmaceutical manufacturer is not a mere vision, but an unfolding reality**. Stakeholders across the industry should therefore study these examples, prepare their organizations, and collaborate on the path ahead, ensuring that the next generation of medicines is produced with unprecedented speed, quality, and efficiency.

Tables

Table 1. Selected Smart Manufacturing Initiatives and Outcomes in Pharmaceutical Production.

Technologies and practices listed are drawn from industry reports and case studies (sources cited).

Company / Site	Initiative / Technology	Outcome / Impact	Source
GSK Upper Merion (US)	Digital real-time scheduling (AI-based production planner)	Removed bottlenecks; +10% capacity unlocked	(www.gsk.com)
GSK Upper Merion (US)	Advanced analytics “digital twin” fault detection during bioprocess	Early fault detection; reduced deviations	(www.gsk.com)
GSK Upper Merion (US)	Automated lab robotics for sample preparation	Fewer lab errors; improved ergonomics	(www.gsk.com)
GSK Network (multiple)	Electronic Batch Records (paperless workflow)	Review pages per batch cut from 100s to ~20–30	(www.gsk.com)
Siemens / AGC Pharma	Real-time data integration (OSI-PI to cloud)	530 manual entries eliminated (4,000 tags captured) (xcelerator.siemens.com)	(xcelerator.siemens.com)
Siemens / BioNTech (Germany)	MES-based conversion of facility for mRNA (COVID vaccines)	50% reduction in conversion time (5 vs. 10 months) (xcelerator.siemens.com)	(xcelerator.siemens.com)
Siemens / Pfizer	Environmental control in a high-containment production plant	40% lower environmental-control energy use compared with a traditional facility	(Siemens)
Roche (Switzerland)	ML-driven vendor-managed inventory (VMI) optimization	Optimized stock levels; reduced stockouts	(Guo 2023 via (www.sciencedirect.com))

Company / Site	Initiative / Technology	Outcome / Impact	Source
Pharmaceutical industry (early examples)	Digital twin planning and scheduling	Early applications described; no forecast-error or stockout percentage established here	(McKinsey)

Table 2. Traditional vs. Smart Pharma Manufacturing Practices. Illustrative comparisons drawn from case studies and industry sources.

Aspect	Traditional Pharma Manufacturing	Smart/AI-Enabled Approach
Production Planning	Static, manual scheduling; planners use spreadsheets and fixed MPS	Dynamic “no-touch” scheduling with digital twins; prerequisites and constraints are modeled (www.mckinsey.com)
Batch Documentation	Paper batch records with thousands of manual entries; high error risk	Electronic Batch Records (EBR); review by exception can reduce pages requiring review from hundreds per batch to about 20–30 (www.gsk.com)
Quality Control (QC)	Human inspectors and off-line lab testing; long release cycles	In-line AI analytics (PAT), soft sensors and automated sample robots; near real-time release processing (www.sciencedirect.com) (www.gsk.com)
Equipment Maintenance	Preventive maintenance by schedule or reactive fixes after breakdown	Predictive maintenance via IoT + ML; service actions triggered by analytics
Process Deviations	Detected post hoc via testing; corrective actions logged after incidents	AI predicts and prevents deviations; “zero deviation” goal with closed-loop control (www.mckinsey.com)
Data Handling	Manual data entry and physical logs	Automated data capture with audit logs; integrated IT/OT data platform
Supply Chain	Forecasting with historical averages; fixed safety stock and manual ordering	AI-driven forecasting and inventory optimization reduces stock and shortages (www.sciencedirect.com) (www.mckinsey.com)
Acceleration of Change	Hardware upgrades and paper-driven change management	Digital reconfiguration through software; virtual commissioning of lines
Worker Roles	Many operators do repetitive manual or clerical tasks	Staff focus on exception management, data analysis, and system oversight (www.gsk.com)

References

- Digital systems require appropriate technical and procedural controls to support CGMP documentation practices ([FDA data-integrity guidance](#)). GSK’s technology leaders emphasize that integrating AI and analytics “is at the core of strategy to drive innovation” and observe exciting results from aligning “science, advanced technology and great talent” (www.gsk.com).
- Industry experts foretell that smart factories become truly transformative when scaled across technology, operations, and workforce (www.gsk.com) (www.mckinsey.com). GSK’s ongoing investments (e.g. new AI-powered “flex” factory (us.gsk.com)) and McKinsey’s optimistic projections of

30–40% throughput gains (www.gsk.com) illustrate the broad consensus that AI beyond R&D is revolutionizing pharma manufacturing and supply chain.

Source links

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