By Fax and Email 23 June 2004

Hon Michael Mak Panel Chairman LegCo Panel on Health Services

STATUTORY REGISTRATION FOR DIETITIANS

The Hong Kong Dietitians Association Limited (HKDA), Hong Kong Practising Dietitians Union (HKPDU), and Hong Kong Nutrition Association Limited (HKNA) request the Hong Kong Special Administrative Region Government (the Government) to provide for statutory registration, discipline and the better control of persons practicing in the profession of Dietetics in Hong Kong.

BACKGROUND

Unlike other countries with highly developed healthcare systems, the practice of dietetics is currently unregulated in Hong Kong.

Dietitians exercise specialized knowledge and skills in nutrition of diseased states, to treat, promote recovery or maintain optimal health of patients. As the practice of dietetics carries significant risk of harm to the patients, statutory registration of Dietitians is administered in most developed countries like USA, United Kingdom, Canada, Japan and Korea, in order to protect the public from unqualified, unethical or incompetent dietetic practices.

The establishment of the dietetic profession in Hong Kong can be traced back to the 60s. The local profession is a well-established allied health discipline in public healthcare system. Both Department of Health (DH) and Hospital Authority (HA) only employ holders of recognized degree in Dietetics, i.e. dietetic graduates from local Hong Kong University SPACE institute programme or qualified dietitians from USA, Canada, United Kingdom and Australia. While it is generally accepted that dietitians working with the Department of Health and Hospital Authority are adequately regulated, because of their stringent entrance requirements and the fully functioning health care teams, the same mechanism is not available to dietitians working outside the public sector.

The lack of statutory registration for the dietetic profession let pass malpractice of albeit qualified practitioners; and permits unqualified personnel to practise under the title of dietitian. Physical harm, including disability and death, may occur as a result of dietetic malpractice. Public health and safety is hardly guarded without corresponding statutory registration, discipline and control.

THE NEED FOR STATUTORY REGULATION FOR DIETITIANS

There exists a body of knowledge that forms the basis of the standards of practice of the dietetic profession, and credentials of dietitians must be accredited.

Currently, holders of <u>Postgraduate</u> Diploma in Human Nutrition and Dietetics fulfil the entry requirement for a dietitian post of DH and HA. This programme admits graduates of recognized post-secondary educational institution for studies in Human nutrition, food sciences, foodservice management, clinical dietetics, diet therapy, and must successfully complete clinical placement in local hospitals.

In USA, UK, Canada and Australia, preparation for entry to the profession of dietetics and nutrition requires completion of academic course work in natural sciences, humanities and social sciences, and dietetics to the **Bachelors degree** level as well as documentation of professional competencies, usually through the completion of a dietetic internship program.

In an unregulated environment like Hong Kong, it becomes so ridiculous that any personnel of any unrecognised credentials may call themselves dietitians, so much so in a "dietitian" recruitment advertisement, we find the academic qualification required is only F.4 level (App. 1: Advertisement).

Patient interface

Dietitians provide direct clinical treatment to patients. Dietitians assess the nutritional needs, design and implement nutrition care plans and therapeutic diets for the patients. Yet, currently in Hong Kong, many dietitians do not practise under a supervised or regulated environment.

Dietitians often work autonomously in sole charge positions in non-government institutions, independently in community health clinics or private practice settings, where they may have little communication with medical doctors.

In some cases, there could be no communication if the dietitians actually provide dietetic services directly to patients without prior referral from medical doctors.

Level of risk associated with malpractice

Dietitians apply medical nutrition therapy to patients, which includes implementation of therapeutic diets. Therapeutic diet is the modification of the nutritional components of a normal diet based on the findings of nutritional assessment, designed to treat identified symptoms, conditions such as obesity, diabetes, renal failure, etc., deficiencies, or altered nutrient needs.

The therapeutic diets, when properly designed, are often the only or the primary treatment for specific disorders, diseases or health conditions. These diets are necessary to prevent further deterioration in an individual who is diagnosed with what is usually a chronic condition. The mode of treatment by means of administration of a specially designed therapeutic diet is equally invasive as the drug therapy or any other physically invasive therapy. Harm occurs when the therapeutic diets are improperly planned as a result of incompetent, unethical or impaired practice.

The potential risk of physical harm to the health, safety or well being of the public include malnutrition, complications including choking, aspiration, infection and serious metabolic or digestive disturbances associated with enteral and parenteral feeding, diet-induced anaphylaxis and potential for death in patients with life-threatening food allergies, delayed recovery from illness or surgery, increased complications, progression or advancement of a chronic disease, increased pain and suffering and diminished quality of life, permanent disability or death. (App.2: Media reports on misuse of nutritional therapies resulted in harm)

Not only dietetic personnel should be qualified to practice, it is equally important that continuing competence of the dietitian be monitored.

In 2000, Hong Kong Dietitians Association received enquiry from Consumer Council regarding a complaint lodged against a "nutritionist/dietitian". However, this so-called "nutritionist/dietitian" was not a member of the Association, and therefore his credentials and conduct were not bound by the Association's Code of Ethics (App.3: Consumer Council and Hong Kong Dietitians Association Correspondence). As a matter of fact, credentials and conduct of "dietitians" working in private sector are regulated by nobody but themselves.

Public expectation for regulated practice

In contrary to the fact of an unregulated dietetic profession in Hong Kong, the public at large misconstrues that personnel with "dietitian" titles are qualified competent practitioners recognized by the Government.

A phone survey of 567 Hong Kong citizens conducted by HKDA in July 2003 revealed that public expectation of the role that dietitians play in diet therapies and nutrition counselling is high, most people reckon that dietitians are reliable professionals, next to doctors, to give health advice for improving one's health. However, survey results also found 58% of the respondents did not know the requirements for the education and training for qualified dietitians, and 74% of the respondents have the misconception that there was already statutory registration for dietitians in Hong Kong (App. 4: Survey report).

The title "Dietitian' has been exploited in the present unregulated environment

As consumers become more health conscious and the demand for nutrition services and products escalates, exploitation of the dietitian title intensifies. A survey conducted between 10 to 14 June 2004, on 4 newspaper and 8 magazines, for advertisement on nutrition service or products, has shown a frequent (85 quotations) use of "註冊營養師" or "營養師" as the personnel giving nutritional advice and product recommendation. (App. 5: Newspaper and magazine clippings)

In a telephone survey of the qualification of dietetic personnel working in weight loss clinics during the same period, 13 out of the 16 clinics being surveyed, reported their Dietitians possess "Registration" qualification, despite statutory registration is not available in Hong Kong.

Size of profession and employment distribution in public and private sectors

According to manpower statistics in 2000, there were only 20 dietitians working in the private sector, since then, the local postgraduate diploma program added about 24 dietitians every year to the profession. The latest figures provided by the three professional associations, quoted 95 (45%) dietitians working with HA and DH, and 115 (55%) working in private sector in 2004, not yet including graduates from overseas unknown to the associations, and those so-called "dietitians" with unrecognized credentials. With limited employment

vacancy offered by public sector and the rapid growth in the private market, especially in the "weight loss" business, number of dietitians working in private sector has exceeded that of the public.

The association-based registration fails to regulate the profession as a whole

The voluntary registration scheme administered by HKDA and HKNA, per se, reveals the inefficiency of a non-mandatory mechanism. As to date, there are only 105 full members of HKDA, and most of them are simultaneously dietitian members of HKNA. Therefore, among the total estimated 210 or more practising dietitians, more than 50% of them "voluntarily" opted not to be regulated by the Associations.

The only viable regulation of professional standards is by means of mandatory statutory registration. And, it is when "dietitian" or "registered dietitian" are reserved titles for dietitians that will assure the public and other health professionals that anyone using the titles is a registrant of the profession and is therefore qualified and is subject to disciplinary processes for incompetent, impaired, or unethical practice, so that public interest is best protected.

CONCLUSION

HKDA, HKPDU and HKNA consider that it is in the public interest that dietetic profession should be regulated in Hong Kong. The profession has expressed her strong commitment in regulated practice ever since the establishment of dietetic service within Hong Kong's healthcare system. The profession considers the Government has the obligation to safeguard the public from unqualified, unethical and incompetent practices by providing dietitians practicing in Hong Kong with statutory registration.

Hong Kong Dietitians Association Limited Hong Kong Practising Dietitians Union & Hong Kong Nutrition Association Limited

23 June 2004

第1頁,共1頁

APP. 1

Job Detail

其他配位

寄给朗友



The SPA by L & Y Beauty Centra

刊登日期: 17/05/2004

多考曼等: JM132229

本公司為一間有規模的水廠及其存中心,是拓展電腦及配合本公司位於網絡開發資訊途平衡及斯德超 達二角聚之國蒙尼西勝韓臺·親遂的下列縣位登録:-

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即時申請 實施體位 器結構友

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Contact information and privacy policy

Appl.Z

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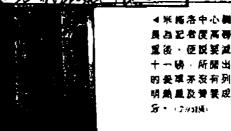
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THE NEXT MAGAZINE ISSUE NO : 142

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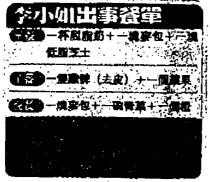
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TO:









進食・姿依照林指示繼續進食 **砖不足,要她照分量更少的餐题** 詩敏,但林沒有理會 - 鐵説她說

名叫 Orum。

為了解李小姐的最

姐

開的波尼曼車

約見著海灣養師協會兩會長掛整 軍是否有問題,記者上頭四阶號

植香通餐單後·認為十分危

跳加速,於是胸間負責營養節林 日後已開始覺得頭暈、手裏和心 客, 並交了要用共六千七百元, 內,鹹去五十磅,李小姐駆後大 李小姐依照餐單進食,但三

名,替賽師説可替她在五個半月 **经五月底到苍清南盟中心分店報**

三十一前報名有六五折優惠,於 **沓養師設計施肥線程 - 遠**鏡七月



是是方面的 班 這一

米施洛普李 Ä

寒酒是

人! 略肯退越,出事又**得理、**分明呃 **趁住着餐師膳會呃人,點知宜家** 我真保好懷疑佢哋嘅芭集資格 望雄食,孕小姐最後逃繹故趣 向林反映,但林只叫她繼續跟發 出现休克情况,於是再次將情况 但身履史感不適· 我都已经休克,仲叫我繼續跟 喝水即噴。

洛中心在轉誌賈廣告,指有專業

肥胖,缺乏自信,目前看到米施

商五呎一吋、鰒重一 五十弱的李小姐、自觉

超足關金,分分體指出人令 齊,在港有五間分店的米龍海營養中心, 大量所・ 更具實市民間減肥豐 但這是中心的親層方法就良養工 本所也是性質 不但聘用不等是 - 建现据

2000年7月27日 22

妲好明耀 医血糖不忌:所以先至 頭暈不適,如果強調食、血液供 卡路里 一时全道 一类照有問題 路里 - 否則就會時夠血糖,李小 日先食得一颚板,都唔另一千備 個人等日最少要達取千二個卡 好似第四日沿着里站。

23-JUN-2004 15:5

三分百年 唐五年 五年 日明日本

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98%

P.09

量

絕對晤應該再將分量減

血糖不足,某更以前毛而投長量 **東更會心臓停頓!其質明知病人**





▶李小姐出示米施洛所聞的三**编卷**章·曼 **地吃了便车後三日**,立即想到夏季手囊 低中心難異仍叫賊難難撤食。 (EMBE)

米施洛起底

米施洛普泰德康中心有限公司

Mai Kem Fung (包括)

Poon Fung Yi

Chan Mei Ngan

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營新:2607 2298

日新界表灣青山區 264-298 植南麓中心 742 至

電話: 2405 2339

持級已經申請註 養師就會。 中心均有粧船 冊・総合成為註 師・但並非每個 有五個註冊書書 冊實養師。 係依な塔馬啦 7.中医育? 131:一菱螅共 記:蘇實即

记者要在個半月內減十一號,並 有專人指導,但其實根本體末。 立即收费二千六百元,沦者付款 者度高磅重,十分重後,黃便思 者稱名 - 重付了二十元驱腭费 -「中心顧問」黃康原便為空 題从宣傳軍班班全班會

设建三:曾美丽公园是木油份 季賈上,譽李小组閱餐單的

質說:「未知係場價・下次復診 食,便更紹者照單複食。 記者再 三姐問負責之營養節時 - 林小姐 **新建位:京公区**

米施洛摩斯「西牌」董景崎

呃人,身為負責人的兒洛,竟這 位:我地區實養節以算行註

册

都完成吃膏差單文憑。而林

Nancy Lam 正公司百合中華最美俚名為米 MSL Nutritional Disk Centre Co. Ltd.

上班三(七月十二日)到旺角信

紀秀為了解整備減能過程

和中心米斯洛分店,報名參加資

有多少卡路里及營養足分,林亦

英提及食後若身腹不適應否停 黑解釋監解更選擇題起長單、

> **臨床質智・取了接着先叫做註** 第一定要完成認可認程同學實院

(一) 盤員早上十二時・

设施二-- 规程求其

▲米**區港管裝師林灣破**、明明未**注鄉**,健卡片 **加上砼两卷卷路。分明呃人。但负责人依** 洛都認為東沒有問題·強調賢養師已負擔危勢 美国报客概要

到第一份餐車,餐單上無列明会 寸。今記者更實驗的,是在沒有 有一位「新糖菌商」林小姐在 米施洛,仍未能見到豐養師,只 養師接見的情況下,記者己收 1、她為記者產血體和低三國尺 (二) 不平正典・写き再版

> 孫莊冊曹養師。 記:你有冇註冊? 杯·我將會赶冊·看等仲夫

未正式住册。 **同地的專案資格時,她都承認的** 上遭四去到圣两米超洛捉地,

更順利 2000年7月27日

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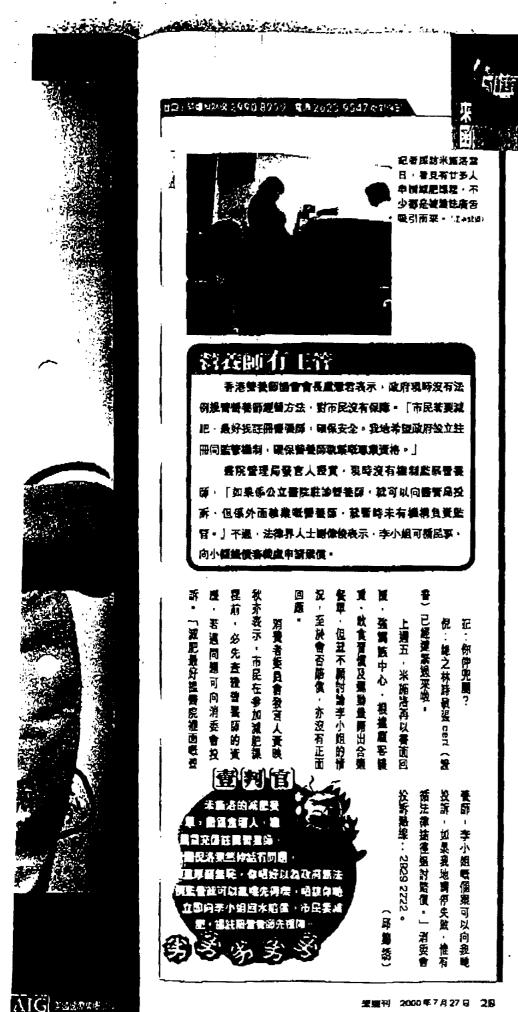
事業根本有問題・

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23-JUN-2004 16:22

DEPT OF IRS, TKOH

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23-JUN-2004 15:55 23-JUN-2004 16:22

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P.06 P.11 是到**育药**凸起。 皮包骨 - 而皮瘤

一个一个皮牌师便做、岩是草贯面彻,就好像是一位五十多晚的糖人,尤其是更手,更度到一者通道的智能人员逻辑,初時尚不怕信死者是一位十五周的女孩子,因爲她的智形是 度到昨午死有值站医智铁框值收理有不冶化,其虚理亦立即被送到智院融房之,综官时一些是非年无有值站医智铁框值收理有不冶化,其虚理亦立即被送到智院融房之,综官时一些是

到皮包骨恍

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子、從似中取來女兒生的所參閱的一群用問題托亦馬上經到耶廳整實施。

AGE STATE

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住在北角健康花園人 · 當時間色紅洞的| | 百多|

者門其稱,十五號。

国死者因悉上一種飲食症。

· 令型力不支 整官系統 - 要

「ANE MEAL AT A TIME(中間是年一番時文兒並一直在魚腿一本款人・當時文兒並一直在魚腿一本款人の部日遊覧:女兒的身體一向接触

DENT 不時都產 DENT 不時都產

而在意外是 · 女童因身題日差。 女童因身題日差。

DEPT OF IRS,TKOH

案個食厭致肥減女

知識的較

府建加钱

記者會上 Kulk Jenes Kulk Jenes Kulk Jenes

> 避益的嫉妒可以致处任不良。 如约兹石、心则变极。 解神困極、

- 在處理運湖病人將 - 上述三者的閑勘幾價重新穩立正常的趴皮營績 (量的食物,及多吃高纖維的食物,如烷菜?,注重均衡的飲食,條少進食高脂肪或高,條少進食高脂肪或高酶健肥的正度方法,爲改善伙太智度及行 英國人建立親密的關係

身但更低能力

野·若市 上升的 四 斯·若市

医定约医

的食物可吸收脂肪。 全要包及红米字。不過。

即是層觀的

有人化

局高風性

23-JUN-2004

16:44

FROM

DEPT.

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IRS,

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25099055

是美師,在公立及私人容院設務。 跟别專業的營獎節及有非异床資信的一 低市民可有足夠的知識利別及時坊間流傳的 自前 以政府應加強溫方面的於育。 100特性或曹承功效。4.些健康或減肥食物。1 全港的育七十多名在顧的一份有非與東南語的一份發 本是的支持機關法例有 原适方面的处す。 盾此,市民缺乏足肉的看要 品 台市民可 始 可 及 助 出 亦要求

、宣目命考坊間凝尼百日

新晚報 11月26日

告警出提日今體團業專兩

中国最高的大法、都思知以留意。如有慢躁,如此人有不得常的,但是这会,通历定助、便端便重加大人有不得常的,如此人有不得常的,如此人有不得常的,如此人有不得常的,如此人有不得不可以会变更是一种人,以及一些都在的人,以及一些都是一种人,以及一些都是一种人,以及一些都是一种人,可以是一种,可以是一种,也可以是一种,可以是一种,也可以是

營民市強加應港本 神國後 - 或引-嚴重便私、精

· 要不可問」執業,因此所有。 現時本港約有七十多 原律市民出到專業服務

DEPT OF IRS, TKOH

45周年報慶月

包对形识实事价 是国研究員22萬

美國一名首實行「食肉減肥法」(Abbras Diet)2年的書商;周四入黨控告數據記法 故聲明者阿特金斯博士的基金會,及推行該減肥法的阿特金斯曾普公司 (Abbras (In)1909年) 法指「食肉減虧法以差點令他要命,享或者信2月萬萬元 (約22萬最元) A

這是多年來首家關於食肉膜肥法的 所訟。以膜的佛州實際文朝:由曾生 組織「食責任藥物費生委員會」代表 入棄。随組織以主要最格果食爲宗旨 - 抱食肉減肥怯有害養康

素食組織代入東

文朝在入幕狀指,他在2001年時中 由於體重由140磅增至148磅,開始抵 線1999年版《阿特金斯博士的新飲食 革命》一實進行食肉類形。阿特金斯

雕陶雕兩月急升途半

支射解,在開始減肥後,他的艙因 蘇環數在兩月內由146条升至230的危 輸水平,他先後有過3次騎痛發作 去年10月來醫時,醫生發現他的一條 主要心臟動脈有99%閉塞,需要進行 血管條份手版。 他說:「我差點前因爲這個程以無了不起的複紀法死掉。這兩年半來 我向人們太陽這號配法的功效。我屬 成功製理醫製高與一然而削別始時 我沒有意識到我爲了保持32吋原國 是在與魔鬼交易。」

戈斯正申請祭制命 · 禁止對方售賣未有加上售告字眼的產品、會籍與繼續便營制站,指他們明知使用食肉數配法的人士,有三分一人會有阿特金斯所謂的「不大有利的膽閒醇」。

阿特金斯普曼公司和阿特金斯基金 的代表重用:「食肉提別法經科學會 明安全和有益健康」。

發明者死時變配

阿特金斯提倡的食肉族歷法,令義 肥人土態之若鹜,他的《阿特金斯博 土的新飲食革命》一套全球銷量蓬 1500萬本。但一份寶學報告相,他去 年去世時體重高達258磅,屬於廣肥 ,疑與食肉減距法有限。寶立龍/帶輕

· 6

. 14

25099055

DEPT.

RE# 港間 A10

英國食物標準局警告 食肉減肥法或致療肥

【明報事館】在本港會獲明星推介的「食肉室 配法」(Dr. Aubres Lind)、日本電學學多書管告 會影響管理、更自然有效的機構提出等去。英國 的「食物概率局」(新述 Sanddaired Agency)登出 雙明,相只吃兩面黃度關於化合物。會增加心顯 第《經濟及實際機會

或實施實際內分通程高量歷生問題中認為一番 港也需要數似英國的變態,他指針會流行機便。 開業活動帮助大量宣傳、很多人被牽着員子走。 他形容虛「配會更異」、雖然香港沒有類似食物 概學局的政府機構,但其他政府部門應該研究機 最一定的財務應影響。提供網川結市民。

英國食物學學局是注定的食物安全監督機構。 英國學(新報)經過,數據過數部門發出的聲明,聲沒 新點明批評Alking Dan 但指出「被吃級奶質食 物對應單有害。因與失如其他智素,而且這類優 單次因、不設實施」。 一類以維持長時間」 一聲明又相出。高麗族要學與臺配有零切臨係 而應配人上有機會出現舊原料。每后

等明榜临底恐惧的餐車、要相主要是高脂肪食物・這些食物會增加壓心酸消的機會。有高級智 援師表示・濫船質應該佔領草三分之一。

但Attins Diet的管實人反駁。指大量建食環份 質的食物。例如白癜包、專仔。反會增加心臟病 機會。他又朝姜單一向新聞迷食蔬菜、水果。

英國有300萬人嘗試食肉誠肥法·香港藝人吳 君如亦曾在自傳中表示。雖然對此減肥論調存妥 ,仍堅持方法要效。然而,有少女按此方法減肥 而時上生命。去年11月,美國一名少女技餐學設 肥耐周後,體內電房實不平衡,等致心臟受損斃 命。

周據中醫生指突然新食暖水化合物:身體更將 脂肪及蛋白質轉化成能量,會干髮血液酸轉度 電線實派失,影響心臟及腎功能

App 2.7



APP 2. 8



June 14, 2000

Hong Kong Dietitians Association P.O. Box 70928 Kowloon Central Hong Kong

The Chief Executive Consumer Council 22/F, K. Wah Centar 191 Java Road North Point, Hong Kong

Dear Sir.

Re: Complaint from Mr. Fung

I refer to your letter dated 6 April 2000 informing us about the complaint from Mr. Fung against an alleged member of the Hong Kong Distitions Association.

Please be informed that the named person in Mr. Fung's letter, Mr. Kanadam, has never registered as a member of the Hong Kong Dietitians Association. Therefore, I am afraid the Code of Eshics of our Association may not be applicable in this case.

Also, the Hang Kong Dietitians Association and her members have never endorsed any food product or oral supplement for use in treating cancers.

I wish to point out that our Association has long been urging the HKSAR government to set up a statuary registration system for local distituous in the interest of public protection. With the lack of registration and legal restriction to the title "distituous" and "mutritionist", any individuals even with little or no nutrition training can call themselves as such and give "mutrition" advice that might be potentially dangerous to the public.

The Consumer Council works towards the protection of consumer interest. We should be grateful if we can have the Council's support in lobbying for setting up of the statutory registration for local dietitions.

We look forward to your reply.

Regards.

Sandra LO
Chairman

Hong Kong Dietitians Association

App 3

香港人對 營養節專業的認識

調者: 劉立德 香港營養師協會 都可養養師 2003年9月18日



調查目的

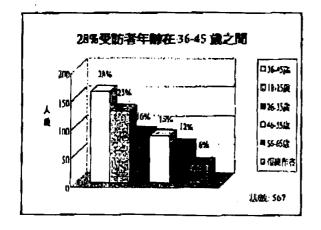
了解公眾:

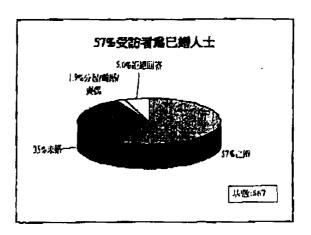
- · 獲得登賽知識的途徑
- 對營養節服務的認識
- 對營養即專業資格的認識
- 對成立營養師註冊制度的認問



調查模況	
满意目的	了解容拖人對替養師工作及動業資格的認識
到遊對象	18至65是人上
动张日均	2003年6月12日至7月15日
为批准师	香港香獎師協會有限公司
委託機構	怡生罗美星間
湖金方法	電影隨機抽種影問
成功訪問人數	567
成功回應率	11.4%







98%

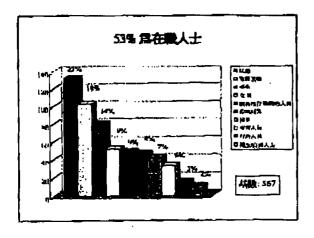
App 4.1

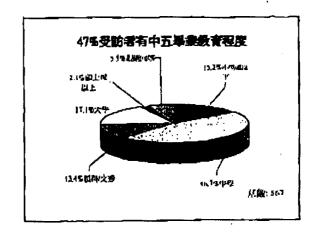
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P.13

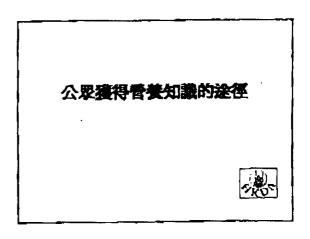
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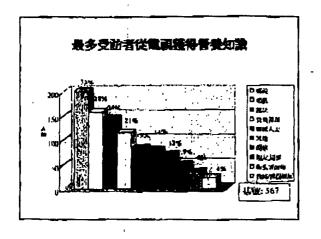
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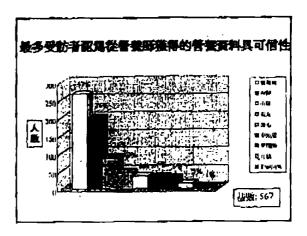










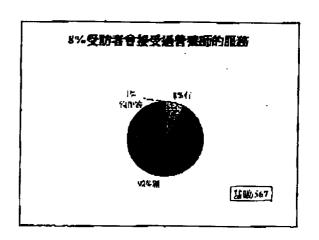


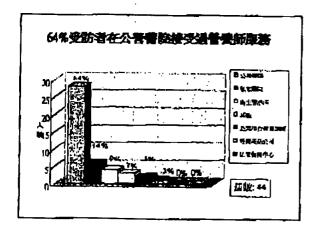
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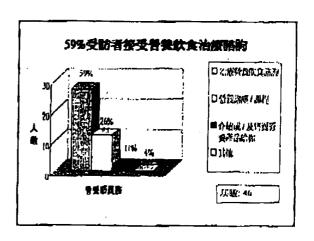
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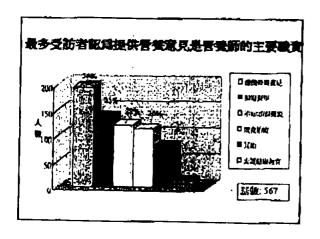
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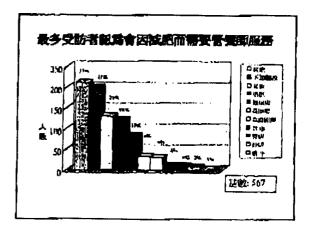






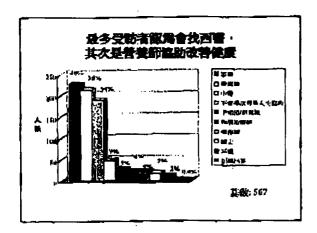


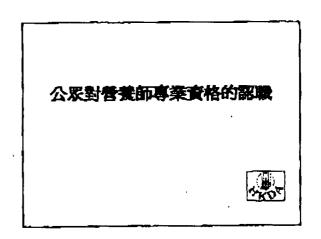


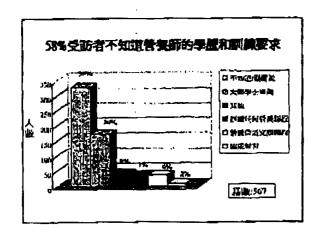


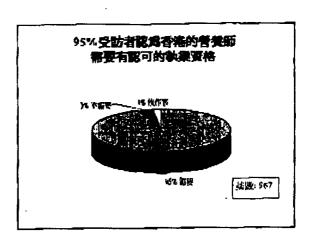
App 4.3

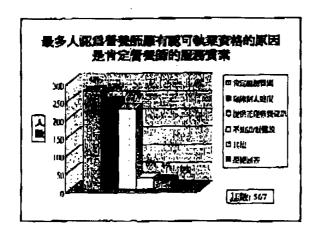
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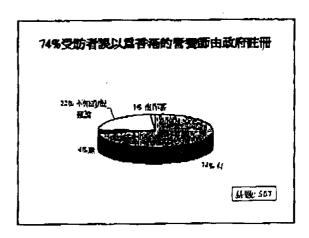








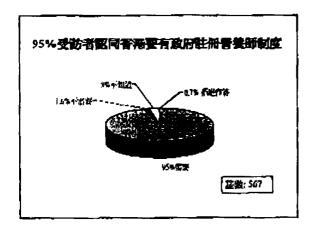




App 4.4

98%

26622490 DEPT OF IRS,TKOH



總結

- 最多受動者整理管整局所提供的質養資料具可信性
- · 最多受妨者都知肯找否警,其次是青金阶级助议者
- 95%受助等配票を使品維有認可執準資格・以肯定 配務資業及保算市民程度
- 74%受防智能以貨膏機的營養新由政府胜何
- · 95% 交胎者程同音格要有政府任册景健師制度

謝謝各位! 香港管養師整合ABOU

App 4,5

23-JUN-2004 16:24

५63

48: **产用妆在前型设立 (廣告)**

市面上舞茸及鼍逐產品林林穩穩,有平有 貴,而且穩效參혼。當中以最近推出,將 日本珍寶「舞茸」既中醫體實「添置芝」 之精華審合而成的《紅太陽舞茸赤崖芝》 最為卓越,固特別走斷了對霆茸和雪芝香 深入課題的爭處林莊冊營養師為你揭示舞 茸和量芝的真面目。

日本珍養「養養」是實芝的近 版·生長於日本東北深山之稱有唐 - 横(墨層狀菌或多孔盤目)・對醫治重 **肉有强住的效果,更被导与超复级**的

基種・養養内含量他命C、D2・B2、茶業・袋・婦・ 5. 編編及多種氨基酸·而從舞耳提取的異理萃取物 「D-電分」· 能好獎重宾氨基零在就嘗期間引起的各 種不真關作用及攜客,今思考更有信心概受治療、大 大提高度復裝會。「D-關分」在集并含量最為是當。 作用最為顯著。

中國國實「示量芝」被喻為 「長生不老・延年益費」之仙草・赤 震芝在六投画芝當中・英級疫高磁賞 位、並且極為貴重、其多積變貴天然 成份、能有效協助身體抵抗嚴重的都市獨。許多科學 研究改置·赤麗芝主美成份為多階體·三帖組及多種 **就量元禄等。多雷體能大大提高人體免疫能力**:三帖 類有降應繼、抗過數及應肝亦學的功效:微量元素如 有機等具有抗氧化作用、促進新原代制。

基署董曆表示· 夏里和志胜芝等是十分安全的免疫 力促進則 - 統合使用,可使免疫力和抵抗力以無何 級數提昇·日日抵抗力無限·無論是改善免疫力能 是作為重寫圖者的權助治學均為非常可謂的理理。

山下武史博士

董物熟練:2499 9559 www.healthyintl.com

(紅大陸東京宗教法) 温度 表面完整是宣光學的與文和宣在大約

Bcm之長質亦量定,能以55:45的比例游合

眉老精響·蓋生G.I.R.T.²²「幾何互動再生 故而」,专业农力及至於力無限是城界。 山下使全國士權力推薦,東何的文章之後

4/6/04 Indden weekly, 侧正三太調應

孤起一:

空服用破壁的重芝孢子先至有效 香養師話:要服用保健產品・含然 揮在優良環境下培植的賢體意芝 暋 - 现今绝大部份孢子破受技術不 量至100%全被壁・而且装覆的**妥**壁 厅以及當中的提取技術往往容易進成實責

份流失,則弱其中的營養療效。若要選擇報優質的提取技術,日 最免進的熱水靈芝提取法會是一個很好的腹擇。

滅解二:

野生鹽芝及舞茸是杏仕屬堂堪體的好?

曾要轉節:語)由於世界各地均受到污染,以野生聚是的万式所以 果的莫芝容易帶有電景及解質、品質難以控制、而且產量少、所以 並不是一個理想的選擇▼而護堂培植的方式・最常見的品種為赤薑 芝。由於目前科學研究大多以赤重芝為主,所以溫室塔假的技術也 是以亦實芝的養殖技術最為成熟、其產量具有一定經濟規模,且可 以有效控制其主長過程,以確保能達到最接近天然置芝的成份、品 質及營養療效。因此選問室芝斯曼先確定自己的國家,如果想用重 芝来遭到一些鞣助治療的效果,温室培植的重芝是比較好的遺權。 至於野生探察的雙芝,品質差異性很大,不建議長期使用。

調解三:

羅茲及靈芝只遇色病者及長者服用?

豐善篇[16]:西万曹學早己遊宣舞茸和黛芝母独放的抚纸化功能,可 以延度衰老,具有保健作用。其實不單只病告和長者,即使一般大 眾亦屬合服用,其增強免疫力及保健功效對身體各部份都能得益, 而且選馳製造駐原保護防線・溢紙思上都市縄之機會・建至全面捷 升身體健康的效能。

私太陽數單分數位。 問刻保障健康的新頂極





"海通海棠推开,是太阳观众尽意实,你的滥用,不多不存 24 117万人正规则。

- appropriate the property of th
- 医电影工作 医精液多层膨胀 化二氯氯化物医乙基甲二烯二甲基

医德温斯特氏试验 医外腺溶解检测部含物毒 电图 化

APP 5,1





會:根據外國一些研究,哲質的確有助脂肪 分解、預防脂肪積至及體重增加等問題。

Q2.怎樣吃更身能才是慢性?

主要身體完全吸收鈣質,量好從奶類食品 (動物性鈣質)着手。若從複物性食物吸收,如豆類食品或养菜等,身體較難吸收。

Q3.其4省的最高技术的。 食物配搭要依實理?

票:其實食物配搭絕對沒所謂,最好是低卡 路里餐車每日吸收約800-1000卡姆里,由於 奶類食品多含脂肪,故最好選擇脱脂或低脂 一類,钙質份量同樣但卡路奧大減。

24. 金幣有事或運用數詞繼續教务實 ? 聲:語:雖然衡湯或重節也含豐富药質、舉例每100g的聲師含有50mg的药,但由於當中預腳及蛋黃含有質富脂肪、多吃會致肥、 或您生食物不是最好的药質來源。

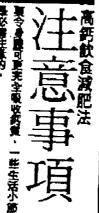






總統











App 5.2

抗胃酸膠囊才能發揮作用

§ 5 呎 2 吋,原本體質 120 磅的酸小姐。 **『我被破**:但只要我停飲城肥茶,取者多 **该快反常**。所以我又须给試食其他的減肥。上不了厨所,今我"谷"得很辛苦,

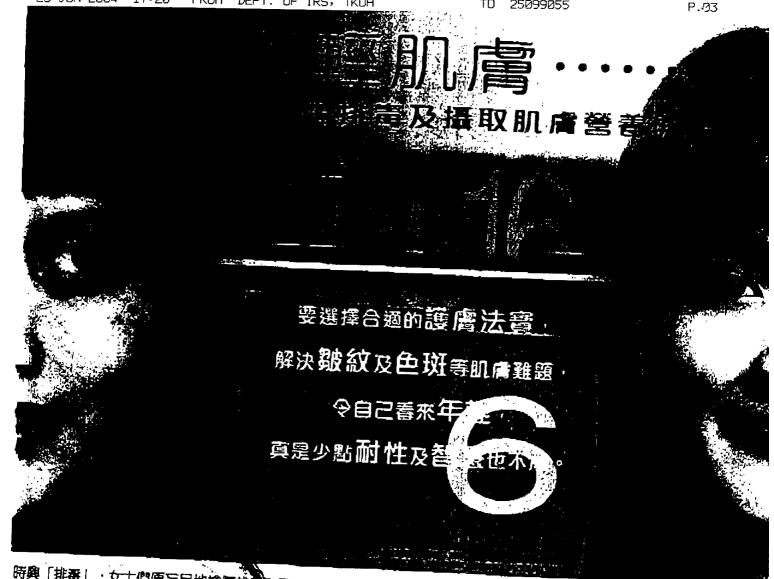
始非常困擾,「以前我每天都可以上一次厕所,在食氣 肥寬時,一天起碼四、五次,但停原後常常門。

層,陳小姐在普賽兩建領下試食器實裝的並生

營養無指出,除了減肥的女性外 **煮都需要補充益生菌。「每個人一出:** 50 真,但在幼年時期關鍵內絕大多數是打 子在地上風經 再拼命吮手指都不容易 [5] 蒙量會 隨年射增長而減少,這是無可抗! 年次於乏益數保護,所以大人反而比小! 不服之類的醫胃問題。

李、[此外]工作屋力大·唐徽多,平J 會在歸城被存入量刺激性審索和廢物。[生酶來改善消化系統和維持層道健康。 研究已更証明六益生萬能加強騙進正常!P 內環保學。就是利用某些蓄權或營養索? 做法,而 Probiotic 異 Prehiotic 用個專

置內環保 助長



時與「排棄」·女士們便盲目地擔應排棄產品·以為上多兩次洗手間便可以觀。再聽閱某營養補充刪新推出·更不深究成 份是否天然,當中所含營養是否本身所需,便輕率選用,務求令目己又年輕又美麗。

為求員相,筆者於是走訪營養學及美容界別、搜集專家意見。他們不約而同表示,從內進行排毒和補充營養、銀外塗面電

養顧問 排毒及攝取營養・缺一不可99

塞索危害魔督

Alfred屬設督遍具高等教育水平的香港女士對排毒存在重大談解:「大部份香港女性將排便等 同排卷,其實透過消化系統排出身體驗物,只佔排毒的一部份。真正的排塞,是要消除外在環 境及體內積存的有害物質,透過身體系統、自然分泌及細胞等層面辨除出體外。」

「皮膚健康與膜内狀況思思相關。當年數據長、緊張生活及環境污染等因素導致遊職基肆虐及毒素 積無最内・有害物質便會經由血管帶到皮膚的微絲血管・阻礙無份輸送・導致皮膚暗啞、肝斑、 黃褐斑的出現:而且過多在柔視整會便皮膚的運転組織充血及失去彈性·增加嚴权形成的標實·」

排毒加營費・內外俱美

Alfred類別:「抹塞對信貸自然有一定幫助。但是,若認為單係辦出每季,皮膚賦膏參美騰, 这個論點又有點言通其實。革章排審,即使令到體內無學素積聚,但身體及肌膚所需的聲響依 然缺乏,試問身體又點會好?皮膚又點會關?其實,先滑運體內有損體質及膚質的茬莢,有 即口服燙飢替養的吸收及發揮、效果比單層使用外漆產品更理想。」

(Dewale)



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99%

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