

立法會
Legislative Council

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by the Administration)

Panel on Health Services

Subcommittee on Issues Relating to the Development of Chinese Medicine

Minutes of the meeting
held on Tuesday, 9 June 2015, at 10:45 am
in Conference Room 2B of the Legislative Council Complex

- Members present** : Hon CHAN Han-pan, JP (Chairman)
Hon WONG Ting-kwong, SBS, JP
Hon CHEUNG Kwok-che
Hon YIU Si-wing
Hon Alice MAK Mei-kuen, JP
Dr Hon KWOK Ka-ki
Dr Hon Elizabeth QUAT, JP
- Member attending** : Hon IP Kwok-him, GBS, JP
- Members absent** : Hon Vincent FANG Kang, SBS, JP
Prof Hon Joseph LEE Kok-long, SBS, JP, PhD, RN
Hon Christopher CHUNG Shu-kun, BBS, MH, JP
- Public Officers attending** : Items I and II

Professor Sophia CHAN Siu-chee, JP
Under Secretary for Food and Health

Miss Janice TSE Siu-wa, JP
Deputy Secretary for Food and Health (Health) 1
Food and Health Bureau

Dr Ronald LAM Man-kin
Assistant Director (Traditional Chinese Medicine)
Department of Health

Hospital Authority

Dr Eric ZIEA Tat-chi
Chief (Chinese Medicine and Integrative Medicine)

Ms Henny HUI Ling-wan
Manager (Chinese Medicine Integrative Medicine)

Clerk in attendance : Ms Joanne MAK
Chief Council Secretary (2) 3

Staff in attendance : Ms Priscilla LAU
Council Secretary (2) 5

Mrs Fonny TSANG
Legislative Assistant (2) 3

Action

I. Progress of the Integrated Chinese-Western Medicine Pilot Programme

[LC Paper Nos. CB(2)1616/14-15(01) and CB(2)322/14-15(02)]

The Subcommittee deliberated (index of proceedings attached at **Annex**).

Follow-up actions required of the Administration

Admin 2. The Subcommittee requested the Administration to provide information on the provision of acupuncture therapy in stroke care and low back pain care under the Integrated Chinese-Western Medicine Pilot Programme.

Admin 3. The Administration undertook to relay members' concerns about the training and professional development of Chinese medicine practitioners to the Chinese Medicines Board under the Chinese Medicine Council of Hong Kong.

II. Updates on the migration of proprietary Chinese medicines from transitional registration to formal registration

[LC Paper Nos. CB(2)1559/14-15(01), CB(2)983/14-15(01) and (03)]

4. The Subcommittee deliberated (index of proceedings attached at **Annex**).

- Admin 5. The Chairman requested the Administration to -
- (a) review the registration requirements and procedures of proprietary Chinese medicines ("pCms");
 - (b) consider providing a new registration category for those pCms which were not issued with the Certificate of registration of pCm but their use had proven to be safe;
 - (c) consider allowing pCms which had been issued with Notice of confirmation of transitional registration of pCm (i.e. "HKP") to freeze their HKP status for, say, 10 years and allow the HKP holders concerned to re-apply for formal registration in future before expiry of the 10-year period;
 - (d) provide a consultation platform for provision of free consultation service to the pCm industry in meeting the registration requirements of pCms; and
 - (e) provide further written information on the application of the Hong Kong Chinese Materia Medica Standards when available.

III. Any other business

6. There being no other business, the meeting ended at 1:00 pm.

Council Business Division 2
Legislative Council Secretariat
2 September 2015

**Proceedings of the meeting of the
Subcommittee on Issues Relating to the Development of Chinese Medicine
on Tuesday, 9 June 2015, at 10:45 am
in Conference Room 2B of the Legislative Council Complex**

Time marker	Speaker(s)	Subject(s) / Discussion	Action required
<i>Agenda item I - Progress of the Integrated Chinese-Western Medicine Pilot Programme</i>			
000550 - 001559	Chairman Administration	Opening remarks Briefing by the Administration	
001600 - 002206	Chairman Mr WONG Ting-kwong Administration	Mr WONG Ting-kwong made enquiries about the selection criteria of disease areas (namely stroke care, acute low back pain care and palliative care for cancer) and the patient participation in the Integrated Chinese-Western Medicine ("ICWM") Pilot Programme. The Administration explained the criteria as detailed in paragraph 8(i) of the Administration's paper. The Administration advised that eligible patients in three selected public hospitals, namely Tung Wah Hospital, Pamela Youde Nethersole Eastern Hospital and Tuen Mun Hospital, were invited to participate in ICWM Pilot Programme on a voluntary basis to receive treatment for stroke care, acute low back pain care and cancer palliative care respectively. While expressing support for the implementation of ICWM Pilot Programme, Mr WONG Ting-kwong called on the Administration to expand its service scope and increase the number of participating hospitals. The Administration and the Hospital Authority ("HA") advised that they aimed to gather experience on the operation of ICWM and Chinese medicine in-patient service through ICWM Pilot Programme. Phase II was expected to be launched in the fourth quarter of 2015 at four other public hospitals for the same three disease areas.	
002207 - 002359	Chairman Miss Alice MAK Administration	In response to Miss Alice MAK's enquiry, HA advised that the provision of acupuncture therapy in stroke care and low back pain care under ICWM Pilot Programme was under consideration. Miss Alice MAK requested the Administration to provide written information in this regard.	Admin (para. 2 of the minutes)
002400 - 004049	Chairman Mr YIU Si-wing Administration	Mr YIU Si-wing expressed concern about the salaries offered to the Chinese medicine practitioners ("CMPs") under ICWM Pilot Programme, as well as the training and professional	

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		<p>development for CMPs. In his view, the Administration should consider establishing a rank structure and pay scale for CMPs under ICWM Pilot Programme. Systematic training should also be provided to CMPs so as to enhance the professional development of CMPs.</p> <p>The Administration advised that -</p> <ul style="list-style-type: none"> (a) CMPs under ICWM Pilot Programme were deployed from the public Chinese Medicine Centres for Training and Research ("CMCTR"), which operated on a tripartite collaboration model involving HA, a non-governmental organization ("NGO") and a local university. These CMPs were employed by NGOs commissioned to CMCTRs, and their terms of appointment and salaries were determined by the NGOs concerned. HA had issued operational guidelines on staff employment for NGOs' reference; (b) to provide training for CMPs, HA collaborated with renowned Chinese medicine universities in the Mainland to establish junior and senior scholarship and fellowship programmes. Through the visiting scholar scheme, Chinese medicine experts from the Mainland were invited to conduct clinical teaching with a view to expediting specialist service development; and (c) a Chinese Medicine Practice Sub-committee had been set up under the Chinese Medicine Development Committee ("CMDC") to study issues relating to the training and professional development of CMPs. 	
004050 - 005006	Chairman Administration	<p>The Chairman was concerned that the number of participating patients in ICWM Pilot Programme was on the low side. He further enquired about the Administration's plan to expand the scope of disease areas. On the development of the Chinese Medicine Hospital, the Chairman was of the view that CMPs should assume a leading role in the provision of treatment to patients in the Chinese Medicine Hospital. Otherwise, it would not be conducive to the development of Chinese medicine and the enhancement in professional training for CMPs. The Administration should make reference to the Mainland's experience in the implementation of ICMW and the operation of Chinese Medicine Hospitals.</p> <p>The Administration advised that -</p> <ul style="list-style-type: none"> (a) the scope of services and the number of pilot hospitals were limited to three disease areas and three public 	

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		<p>hospitals in Phase I of ICWM Pilot Programme as it aimed to, among others, gather experience in respect of clinical management, clinical risk management and patient care, etc. for the development of Chinese medicine in-patient services. Under the Programme, a set of operation guidelines setting out the roles and responsibilities of the Chinese and Western medical personnel, workflow of transfer, discharge and follow-up treatment of patients was developed;</p> <p>(b) HA planned to launch Phase II of ICWM Pilot Programme at four other public hospitals for the same three disease areas in the fourth quarter of 2015. Evaluation reports which assessed the effectiveness of Phases I and II of ICWM Pilot Programme would be completed in the second quarter of 2015 and the second quarter of 2016 respectively; and</p> <p>(c) given the existing healthcare and legal framework, the Administration agreed with CMDC's recommendation that it would be more feasible to develop the Chinese medicine hospital with ICWM, rather than pure Chinese medicine.</p>	
005007 - 010052	Chairman Mr WONG Ting-kwong Administration	<p>Mr WONG Ting-kwong considered that CMPs should be allowed to make use of x-ray examinations and diagnostic imaging services in their practice.</p> <p>The Administration advised that with the experience gained in the operation and regulation of ICWM and Chinese medicine inpatient services, the Administration would consider how to enhance the standard and professional training of CMPs where necessary.</p>	
010053 - 010512	Chairman Mr YIU Si-wing Administration	<p>In response to Mr YIU Si-wing's enquiry, the Administration advised that after completion of Phase I and II, an external party would be engaged to conduct outcome evaluation for the future development of Chinese medicine, taking into account patients' and stakeholders' feedback, costs, clinical outcome and the number of bed days, etc.</p>	
010513 - 010852	Chairman Mr WONG Ting-kwong Administration	<p>To facilitate the integration of Chinese medicine and Western medicine, Mr WONG Ting-kwong reiterated that apart from strengthening the training relating to Western medicine in the Chinese medicine programme, consideration should be given to making necessary amendments to the existing legislation so as to relax the restriction imposed on the practice of CMPs. The Administration would relay Mr WONG's view to the Chinese Medicine Practitioners Board.</p>	<p>Admin (para. 3 of the minutes)</p>

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010853 - 011454	Chairman Administration	<p>The Chairman expressed concern about the lack of transparency of CMDC (e.g. the agendas and minutes of meetings of CMDC and its subcommittees were not made public) and the lack of a timetable for the development of the Chinese Medicine Hospital.</p> <p>The Administration advised that -</p> <p>(a) while the meetings of CMDC and its subcommittees were not made open, the Administration would keep the Panel on Health Services informed of any recommendations made by CMDC; and</p> <p>(b) a site in Tseung Kwan O was reserved for the development of the Chinese Medicine Hospital, and its establishment required thorough study and planning. Moreover, some specific issues and proposals as deliberated by CMDC might need to be looked at first before the establishment of the Chinese Medicine Hospital.</p>	
<i>Agenda item II - Updates on the migration of proprietary Chinese medicines from transitional registration to formal registration</i>			
011455 - 012004	Chairman Administration	Briefing by the Administration	
012005 - 012844	Chairman Mr YIU Si-wing Administration	<p>Mr YIU Si-wing expressed concern that 18% of proprietary Chinese medicine (pCm) products issued with "Notice of confirmation of transitional registration of pCm" (i.e. "HKP") still did not have the relevant quality specification and stability test reports submitted. He also expressed concern about the transitional arrangements for pCms issued with HKP when migrating to the Certificate of registration of pCm (i.e. "HKC").</p> <p>The Administration advised that -</p> <p>(a) there were 1 470 pCm products carrying HKP status with outstanding quality specification and stability test reports. Around one third of these pCm products had not been actively traded on the Hong Kong market and without import records in the past two years;</p> <p>(b) the Chinese Medicines Board ("CMB") of the Chinese Medicine Council of Hong Kong had decided to maintain the deadline, and HKP holders should submit quality specification and stability test reports for their pCms before 30 June 2015. For those who failed to</p>	

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		<p>submit the required test reports, CMB would issue reminders and require them to submit the required reports within three months. If the relevant HKP holders could still not provide the test reports within three months, they should give reasons for consideration by CMB of submission later; and</p> <p>(c) a product holder was given 12 months after he was notified of the granting of HKC status to replace labels and package inserts for his product. If more time was needed, HKP holders might apply to CMB for further extension which would not be longer than 12 months.</p>	
012845 - 015339	Chairman Mr IP Kwok-him Administration	<p>Citing a case involving an application for registration of a Mainland pCm product which had taken more than four years for processing, Mr IP Kwok-him expressed grave concern about the long processing time and the cumbersome procedures. The Administration explained the registration requirements for pCms in accordance with the Chinese Medicine Ordinance (Cap. 549) ("the Ordinance"). Generally speaking, applications for registration under the "New medicines category" took longer time than that of the "Established medicines category" as clinical trial was required to prove the efficacy of the pCm concerned.</p> <p>The Chairman considered that due to the long processing time and the high threshold for pCm registration, some pCms were sold as health food products. He stressed the need to review the registration system of pCms under the Ordinance.</p>	Admin (para. 5(a) of the minutes)
015340 - 020939	Chairman Administration	<p>The Chairman made the following suggestions in view of the fact that only a small number of pCms were issued with HKC -</p> <p>(a) the Administration should review the Ordinance to explore creating a new category for the registration of pCms which were not issued with HKC but their use had proven to be safe;</p> <p>(b) for the benefit of preserving traditional pCms, the Administration might consider allowing pCms issued with HKP to freeze their HKP status, say, for 10 years, so as to allow the HKP holders concerned to re-apply for formal registration again before the expiry of the 10-year period; and</p> <p>(c) a consultation platform comprising academics, laboratory service sector and stakeholders concerned should be set up to provide free consultation service to pCm manufacturers and traders to facilitate them to meet the pCm registration requirements.</p>	Admin (para. 5(b) to (d) of the minutes)

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		<p>The Administration explained that the suggestions referred to in (a) and (b) might not be feasible from the legal perspective first and would entail amendment of the Ordinance. Nevertheless, the Administration agreed to relay the Chairman's views and suggestions to CMB.</p> <p>In response to the Chairman's enquiry, the Administration advised that HKP holders should submit the required documents and testing reports by the deadline of 30 June 2015. If they had any information not yet available by the deadline, they could explain to CMB why the information was not yet available with supporting documents and seek extension for submission later.</p>	
020940 - 021459	Mr YIU Si-wing Administration	Mr YIU Si-wing pointed out that many local pCm manufacturers had grave concern about the implementation of the Good Manufacturing Practice ("GMP") in pCm manufacture. Apart from encouraging pCm manufacturers to engage in GMP contract manufacturing under the three-year GMP product development and technical support platform run by the Hong Kong Institute of Biotechnology, Mr YIU called on the Administration to provide adequate support to pCm manufacturers to become GMP compliant.	
021500 - 021730	Chairman	<p>The Chairman requested the Administration to provide further information about the application of the Hong Kong Chinese Materia Medica Standards when available.</p> <p>Items for discussion at the next meeting</p>	Admin (para. 5(e) of the minutes)