

**Bills Committee on the Chinese Medicine Bill**  
**Issues discussed and outstanding issues**  
**(as at 24 May 1999)**

<u>Issues</u>	<u>Clauses</u>	<u>Position</u>
<p><b>1. Binding effect of the legislation</b></p> <p>The Bill does not bind the State by express provision.</p>	<p>Para. 25 of the LegCo Brief</p>	<p><u>7.4.99</u> Adm explained the reasons for this proposal.</p>
<p><b>2. Membership of the Chinese Medicine Council</b></p>	<p>4</p>	<p><u>4.3.99</u> Adm agreed:</p> <ul style="list-style-type: none"> <li>- to accommodate as far as possible each of the groups within the sector to be represented in the Chinese Medicine Council; and</li> <li>- a member of HA be appointed under the "lay person" category if necessary.</li> </ul>
<p><b>3. Regulation of dispensers of Chinese herbal medicine</b></p> <p>There is no provision to regulate dispensers of Chinese herbal medicine in the Bill.</p>	<p>-</p>	<p><u>4.3.99</u> Members proposed that dispensers of Chinese herbal medicines should be regulated under the Bill. Adm to prepare a paper for discussion at the next meeting.</p> <p><u>30.3.99</u> The Administration's Paper on "Dispensers of Chinese herbal medicines" (LC Paper No. CB(2)1604/98-99(01)) discussed.</p> <ul style="list-style-type: none"> <li>- The Administration did not propose to introduce a statutory scheme to regulate them but proposed a number of safeguards to ensure that dispensation of Chinese herbal medicine was carried out in a proper manner.</li> </ul>

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		<ul style="list-style-type: none"> <li>- Education institutions would be encouraged to organise courses for the existing dispensers.</li> <li>- The Chinese Medicine Council would be requested to draw up a schedule on the implementation of a mechanism for the regulation of the standards of dispensers in the long run.</li> </ul>
<p><b>4. Limited registration</b></p> <p>(a) <u>4.3.99</u> Members requested measures be put in place to prevent abuses of the system by Chinese medical practitioners outside Hong Kong to come to work here under the guise of "conducting clinical teaching or research work".</p> <p>(b) <u>30.3.99</u> Members suggested that the meaning of an "educational/scientific research institution" should be defined clearly under the relevant subsidiary legislation.</p>	<p>86</p>	<p><u>4.3.99</u> Adm agreed to convey members' concerns to the future Chinese Medicine Council which would prevent such abuses by defining clearly the requirements for limited registration.</p> <p><u>30.3.99</u> Adm agreed to consider the suggestion.</p>
<p><b>5. Restriction on sale of Schedule 2 medicines</b></p> <p>(a) Some members were worried that the proposal would cause much inconvenience to consumers and affect the sale of these medicines if they could only be sold in retail shops which had obtained a retailer licence in respect of the listed Chinese herbal medicines.</p>	<p>111</p>	<p><u>4.3.99</u> Adm to provide the following information –</p> <ul style="list-style-type: none"> <li>(a) the Chinese herbal medicines in Schedule 2 which were being sold in supermarkets; and</li> <li>(b) a list of the common food items which contained ingredients of the listed Chinese herbal medicines and to confirm whether their sale would be also subject to control set out in clause 111.</li> </ul>

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<p>(b) Members were concerned whether the affected supermarkets/dried sea produce shops/grocers could manage to meet the licensing requirements to be prescribed. They suggested that more stringent requirements should be imposed only on shops specialized in the retail sale of Schedules 1 and 2 medicines. The issuing of retailer licence to shops such as supermarkets/dried sea produce shops/grocers selling Schedule 2 medicines should be handled with more flexibility.</p>		<p><u>7.4.99</u> LC Paper No. CB(2)1637/98-99(02) entitled "Lists of some products containing Schedule 2 Chinese Herbal Medicines" discussed. The products (pre-packed soup ingredients) and items of Chinese herbal medicines set out at Annexes A and B are now being sold in supermarkets and, with passage of the Bill, they would be restricted to be sold in licensed Chinese medicine retail shops or other retail outlets which have obtained a licence for the sale of these products/Schedule 2 medicines.</p> <p><u>7.4.99</u> Adm confirmed that the dried sea produce shops and grocers selling Schedule 2 medicines or products containing Schedule 2 medicines would have to obtain the retailer licence for the sale of these products/Schedule 2 medicines.</p> <p>Adm agreed to convey members' concerns to the Chinese Medicine Council and request it to make regulations for this purpose.</p>

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<p><b>6. Licensing of retailers in Chinese herbal medicines</b></p> <p>(a) Clause 114(2)(b)(i)- the nomination of a person who will be responsible for the supervision of the dispensing of Chinese herbal medicines</p> <p>(b) Clause 114(2)(b)</p>	<p>114</p>	<p><u>30.3.99</u> A member commented that since there were no specific requirements on the standards of this nominee, this requirement served no purpose in safeguarding the interest of public health.</p> <p><u>26.4.99</u> Adm to consider the drafting aspect of Clause 114(2) to specify the details of the arrangements.</p>
<p><b>7. Registration of proprietary Chinese medicine</b></p> <p>Some members noted that there would be no licensing control on the retail sale of proprietary Chinese medicines and were concerned about the definition of proprietary Chinese medicines.</p>	<p>121</p>	<p><u>7.4.99</u> The Chinese Medicine Council to issue guidelines on matters related to applications for registration of proprietary Chinese Medicines.</p>
<p><b>8. Factors relevant to determination of application for registration</b></p>	<p>122</p>	<p><u>26.4.99</u> A member requested the Adm to elaborate as far as possible in clause 122(1) the factors to be taken into consideration by the Medicines Board in determining an application for registration.</p>
<p><b>9. Clinical trials and medicinal tests</b></p>	<p>129</p>	<p><u>26.4.99</u> Adm explained the policy and clarified that it was not a mandatory requirement for every proprietary Chinese medicine which applied for registration to have a clinical trial.</p>

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<p><b>10. Regulation of Chinese herbal tea shops</b></p>	<p>-</p>	<p><u>7.4.99</u> Adm explained its position and proposed maintaining the existing regulatory mechanism for these shops. i.e. they would continue to be subject to the licensing control by the provisional municipal councils. Some members disagreed with the proposal and considered that these shops should be also required to apply for a licence from the Chinese Medicine Council. Adm agreed to re-consider the issue.</p>
<p><b>11. Need to prohibit Chinese medicine practitioners from –</b></p> <p>(a) using modern medical technology in the treatment of patients</p> <p>(b) signing death certificates</p>	<p>-</p>	<p><u>30.3.99</u></p> <p>(a) The Chinese Medicine Council to consider the issue.</p> <p>(b) Adm explained why Chinese medical practitioners would not sign death certificates.</p>
<p><b>12. Experience of other countries in the regulation of traditional medicines</b></p>	<p>-</p>	<p><u>7.4.99</u> LC Paper No. CB(2)1637/98-99(01) on "The regulatory system for traditional medicine in some places outside Hong Kong" discussed.</p> <p>Adm to seek additional information from the State of Victoria in Australia and Vancouver (British Columbia) in Canada for members' reference.</p> <p><u>26.4.99</u> Adm provided additional information on the regulatory systems in the US, Canada and Japan (LC Paper No. CB(2) 1778/98-99(04)) but the paper was not yet discussed at the meeting.</p>

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<b>13. Administration's response to public submissions</b>	-	<p><u>30.3.99</u> LC Paper No. CB(2)1604/98-99(02) discussed.</p> <p><u>13.4.99</u> The Bills Committee met with 9 organizations and 5 individuals. (Summary of their views (LC Paper No CB(2) 2084/98-99(02)) attached.)</p> <p><u>26.4.99</u> The Bills Committee met with 3 organizations.</p> <p><u>5.5.99</u> LC Paper No. CB(2)2084/98-99(02) discussed. Discussion of the paper to be continued.</p> <p><u>18.5.99</u> Discussion of LC Paper No. CB(2) 2084/98-99(02) completed.</p>
<b>14. Decoction of Chinese herbal medicines for customers by retail shops selling these medicines</b>	-	<p><u>7.4.99</u> A member expressed concern about the need to regulate the provision of this service by some Chinese herbal medicine retail shops. Adm agreed to seek legal advice.</p>
<b>15. Acceptance of the medical certificates issued by Chinese medicine practitioners for sick leave and insurance purposes and their referral letters for X-ray service.</b>	-	<p><u>7.4.99</u> Adm explained that no such provisions were included in this Bill but subject to further consultation with health care professional bodies and other parties concerned, they would be dealt with as part of consequential amendments to other ordinances and/or their subsidiary legislation.</p>