

Individual responses (A-H) to the Chinese Medicine Board of Australia public consultation on the revised Safe Chinese herbal medicine guidelines

Response from Albert Yu-Sheng Wang

(Note: All responses have been reproduced as provided and have not been edited or otherwise altered.)

Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"I have read the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) over the last few weeks. I am opposing the wording change from "herbs" to "medicinal ingredient".

The Chinese medicine should follow the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

If it is mandatory to use "medicinal ingredients" to regulate the use of traditional Chinese herbal medicine, then it is not real Chinese Medicine."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

"The draft revised CMBA guidelines have some issues. 1 "Use of alcohol-based rubs"
Practitioners are expected to perform hand hygiene before/after touching the patient/procedures. We do not agree with the statement that: "Alcohol-based hand rubs are considered better than traditional soap and water.

The statement may be misleading. The promotion of soap and water for hand hygiene is equally important and should be used in hybrid with alcohol-based hand rubs especially when the practitioners feel their hands are sticky after multiple use of alcohol-based hand rubs.

2 "Washing with soap and water."

The promotion of soap and water for hand hygiene is equally important and should be used in hybrid with alcohol-based hand rubs.

3 Cuts, abrasions and other skin conditions

The Board expects all registered practitioners to cover any cuts and abrasions on their hands with waterproof dressings, to reduce the risk of cross-transmission of infectious Agents.

We recommend the practitioners to wear gloves if they are using any dressings as the dressing may impact the effectiveness of hand hygiene.

4 "Jewellery, watches, fingernails and clothing"

The Board expects all registered practitioners to wear short-sleeved clothing when practising acupuncture, to ensure their hands can be effectively decontaminated, and to avoid wearing lanyards or neckties.

Although we agree with the Board the importance of infection control, it is not practical to forcefully order all registered practitioners to only wear short-sleeved clothing especially in regions such as Victoria and Tasmania with colder climate."

Australian Health Practitioner Regulation Agency
National Boards

GPO Box 9958 Melbourne VIC 3001 Ahpra.gov.au 1300 419 495

Ahpra and the National Boards regulate these registered health professions: Aboriginal and Torres Strait Islander health practice, Chinese medicine, chiropractic, dental, medical, medical radiation practice, midwifery, nursing, occupational therapy, optometry, osteopathy, paramedicine, pharmacy, physiotherapy, podiatry and psychology.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice.

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

Yes, the draft revised CMBA guidelines practical to implement and sufficient for safe practice of acupuncture

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

A five-year review period is acceptable, but if interim review and revision is required, it must be done before the end of the five-year review period.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

I am asking any decision maker of CMBA to thoroughly understanding what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.

Response from Angela Ling

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Response from Annie Li

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Response from Bin Peng

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Response from Binbin Zhang

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Response from Bo Fei

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Response from Chang-Ming Kang

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Response from Chien-Hsien Wu

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"The term ""Medicinal Ingredient"" to be adopted instead of ""herb"" is somehow bringing an impact to current TCM society as this term refers to a ""Chemical Based Drugs"". When people did not receive a good result from convention medicine, they tend to seek alternative medicine in order to achieve their expectations. If Medicinal Ingredient is adopted, Chinese Herbs will leave no trustworthy to them. In my perspective, this is stopping them from receiving better quality of life.

In addition, the term ""Medicinal Ingredient"" will draw back those people who really enjoy and loving natural way of therapies due to excessive studies and qualifications. This will cause downhill to Traditional Chinese Medicine.

It is strongly disagree to change the term ""Herbs"" to ""Medicinal Ingredient"".

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

The term ""Medicinal Ingredient"" is not clear, and is not suitable to define Chinese Herbs due to reasons described in previous question.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

The revised guidelines currently fully described all aspects.

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Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

The guidelines are practical to implement and sufficient for safe prescription writing, labeling and dispensing of Chinese herbal medicines. It provides good public health to the community.

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

Yes, I agree with it.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

For all the decisions making in changing Chinese Medicine requires great understanding of this specialty. It is nothing similar to Convention Medicine (Western medicine) and should not follow the way how it was developed. Here I'm asking the decision maker, please listen to people that's working in this field and feel the power and the beauty of Chinese Herbs.

Response from Chi-Liang Lin

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"We, Chinese Medicine & Acupuncture Society of Australia Ltd (CMASA) have carefully considered the impact which the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) could have on patients and its Chinese Medicine practitioners.

The new Guidelines change the terms of reference from "herbs" to "medicinal ingredients", so CMASA is opposing this change.

Reason: The problem that the Chinese medicine profession is now facing is the bastardisation of Chinese herbal medicine by the West, where biomedicine becomes reductionist such that Chinese herbs work only because of their active biomedicine constituents/medicinal ingredients, rather than on the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

The rationale of traditional Chinese herbal medicine is extremely complex and difficult to analyse. Current levels of the cognition of traditional Chinese herbal medicine are not enough to fully understand and master all ""medicinal ingredients"". If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then its use will become greatly restricted. Such mandates create an opportunity for "unscientific" criticism from opponents of traditional Chinese herbal medicine, who only base their arguments on "medicinal ingredients".

Also, the experience of using manufactured Chinese herbal medicines (中成药) is a typical example from the past. Many commonly used manufactured Chinese herbal medicines have been severely restricted by the Therapeutic Goods Administration (TGA) in the past few years because some of the medicinal ingredients do not meet the requirements of the TGA. If the future use of Chinese herbal medicines is to be similarly regulated, as seen with our experience of manufactured Chinese herbal medicines in the past few years, similar restrictions may also occur with other Chinese herbal medicines. Traditional Chinese medicine practitioners will face the dilemma that fewer and fewer Chinese herbal medicines will be available to them due to these future TGA constraints."

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we are not seeing the possibility of further streamlining of herbs prescription protocols, to improve practitioner's efficiency and to reduce the burden of such time consuming requirements that are associated with herbal medicine dispensing as regulated by the Guidelines. We believe that these Guidelines must be more practical to adopt and enforce."

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"Yes, the Guidelines are not only practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines; they also protect the public and give enough information to other health practitioners.

But there is confusion in an example of a prescription: "To be divided into three packets".

The standard dosage of any prescription is for one package's weight. The custom of dispensing herbs is to write each packet's weight usage first, then we write how many packets are to be dispensed in total. Not "To be divided into three packets".

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Response from Cindy Cheng

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Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

Yes

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

Yes

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

Response from Desheng Zhou

(Note: All responses have been reproduced as provided and have not been edited or otherwise altered.)

Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"I have read the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) over the last few weeks. I am opposing the wording change from "herbs" to "medicinal ingredient".

The Chinese medicine should follow the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then it is not real Chinese Medicine."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

No. The new guideline is not clear in the definition of Chinese Herbs. Changing the terminology of Chinese Herbal Medicine to "Medicine" will give a false impression if Chinese Herbal Medicine is the same as "Western Chemical-based medicine". This will make sure that we are using Herbal terms rather than Western Pharmacology. I believe that these Guidelines must be more practical to adopt and enforce.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

"The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice."

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

Yes, the guidelines are practical to implement and sufficient for safe prescription writing, labelling, and dispensing of Chinese herbal medicines. It also protects the public and give enough information to the other health practitioners.

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

A five-year review period is acceptable, but if interim review and revision is required, it must be done before the end of the five-year review period.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

I am asking any decision maker of CMBA to thoroughly understanding what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.

Response from Dr. Wen Cheng Wang

(Note: All responses have been reproduced as provided and have not been edited or otherwise altered.)

Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"I have read the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) over the last few weeks. I am opposing the wording change from "herbs" to "medicinal ingredient".

The Chinese medicine should follow the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then it is not real Chinese Medicine."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

No. The new guideline is not clear in the definition of Chinese Herbs. Changing the terminology of Chinese Herbal Medicine to "Medicine" will give a false impression if Chinese Herbal Medicine is the same as "Western Chemical-based medicine". This will make sure that we are using Herbal terms rather than Western Pharmacology. I believe that these Guidelines must be more practical to adopt and enforce.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice.

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

"Yes, the guidelines are practical to implement and sufficient for safe prescription writing, labelling, and dispensing of Chinese herbal medicines. It also protects the public and give enough information to the other health practitioners."

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

A five-year review period is acceptable, but if interim review and revision is required, it must be done before the end of the five-year review period.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

"I am asking any decision maker of CMBA to thoroughly understanding what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.

Response from FEILIU SUN

(Note: All responses have been reproduced as provided and have not been edited or otherwise altered.)

Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"The major concerns on the currently guideline is the mandatory method as of "medical ingredients/medicinal ingredients" to regulate TCM.

TCM/Chinese herb functions uniquely and complexly not only based on its active biomedicine constituents, but also based on the Yin-Yang, Five-Elements-Theory."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

The content itself is clear and relevant, but not helpful in applying in our clinical practices. The use of traditional Chinese medicine will be greatly restricted in the future if it is mandatory to use "medical ingredients/medicinal ingredients" to regulate its use.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

"The Board should respect and take the consideration of the unique theoretical characteristics of Chinese medicine when setting policy. It is not good enough to simply follow the management methodologies of Western medicine when managing and policing the practice of Chinese herbal medicine."

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

"As a guideline, it is helpful/safe for us to follow the instruction. But in some areas, the description on TCM dosage is not clearly explained."

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

Five years period is a bit longer from my point of view, may every three years as a review time be more practical.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

"The TCM practice should be managed under it's own association instead of through the government agency."

Response from George Sun

(Note: All responses have been reproduced as provided and have not been edited or otherwise altered.)

Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"We, Chinese Medicine & Acupuncture Society of Australia Ltd (CMASA) have carefully considered the impact which the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) could have on patients and its Chinese Medicine practitioners.

The new Guidelines change the terms of reference from "herbs" to "medicinal ingredients", so CMASA is opposing this change.

Reason: The problem that the Chinese medicine profession is now facing is the bastardisation of Chinese herbal medicine by the West, where biomedicine becomes reductionist such that Chinese herbs work only because of their active biomedicine constituents/medicinal ingredients, rather than on the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

The rationale of traditional Chinese herbal medicine is extremely complex and difficult to analyse. Current levels of the cognition of traditional Chinese herbal medicine are not enough to fully understand and master all ""medicinal ingredients"". If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then its use will become greatly restricted. Such mandates create an opportunity for "unscientific" criticism from opponents of traditional Chinese herbal medicine, who only base their arguments on "medicinal ingredients".

Also, the experience of using manufactured Chinese herbal medicines (中成药) is a typical example from the past. Many commonly used manufactured Chinese herbal medicines have been severely restricted by the Therapeutic Goods Administration (TGA) in the past few years because some of the medicinal ingredients do not meet the requirements of the TGA. If the future use of Chinese herbal medicines is to be similarly regulated, as seen with our experience of manufactured Chinese herbal medicines in the past few years, similar restrictions may also occur with other Chinese herbal medicines. Traditional Chinese medicine practitioners will face the dilemma that fewer and fewer Chinese herbal medicines will be available to them due to these future TGA constraints."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

"No. The new guideline is not clear in the definition of Chinese Herbs. Changing the terminology of Chinese Herbal Medicine to ""Medicine"" will give a false impression if Chinese Herbal Medicine is the same as ""Western Chemical-based medicine"". This will make sure that we are using Herbal terms rather than Western Pharmacology.

we are not seeing the possibility of further streamlining of herbs prescription protocols, to improve practitioner's efficiency and to reduce the burden of such time consuming requirements that are associated with herbal medicine dispensing as regulated by the Guidelines. We believe that these Guidelines must be more practical to adopt and enforce."

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

The revised draft Guidelines cover all the necessary aspects for safe Chinese herbal medicine practice.

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

"Yes, the Guidelines are not only practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines; they also protect the public and give enough information to other health practitioners.

But there is confusion in an example of a prescription: "To be divided into three packets".

The standard dosage of any prescription is for one package's weight. The custom of dispensing herbs is to write each packet's weight usage first, then we write how many packets are to be dispensed in total. Not "To be divided into three packets"."

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

A five-year review period is acceptable, but if an interim review and revision is required, it must be done before the end of the five-year review period.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

CMASA is asking any decision maker of the government to thoroughly understand what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.

Response from Gui Qing Xu

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Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"I have read the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) over the last few weeks. I am opposing the wording change from "herbs" to "medicinal ingredient".

The Chinese medicine should follow the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then it is not real Chinese Medicine."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

No. The new guideline is not clear in the definition of Chinese Herbs. Changing the terminology of Chinese Herbal Medicine to "Medicine" will give a false impression if Chinese Herbal Medicine is the same as "Western Chemical-based medicine". This will make sure that we are using Herbal terms rather than Western Pharmacology. I believe that these Guidelines must be more practical to adopt and enforce.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

"The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice."

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

Yes, the guidelines are practical to implement and sufficient for safe prescription writing, labelling, and dispensing of Chinese herbal medicines. It also protects the public and give enough information to the other health practitioners.

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

A five-year review period is acceptable, but if interim review and revision is required, it must be done before the end of the five-year review period.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

I am asking any decision maker of CMBA to thoroughly understanding what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.

Response from Hai Wei Chen

(Note: All responses have been reproduced as provided and have not been edited or otherwise altered.)

Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"I have read the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) over the last few weeks. I am opposing the wording change from "herbs" to "medicinal ingredient".

The Chinese medicine should follow the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then it is not real Chinese Medicine."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

No. The new guideline is not clear in the definition of Chinese Herbs. Changing the terminology of Chinese Herbal Medicine to "Medicine" will give a false impression if Chinese Herbal Medicine is the same as "Western Chemical-based medicine". This will make sure that we are using Herbal terms rather than Western Pharmacology. I believe that these Guidelines must be more practical to adopt and enforce.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice.

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

"Yes, the guidelines are practical to implement and sufficient for safe prescription writing, labelling, and dispensing of Chinese herbal medicines. It also protects the public and give enough information to the other health practitioners."

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

A five-year review period is acceptable, but if interim review and revision is required, it must be done before the end of the five-year review period.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

"I am asking any decision maker of CMBA to thoroughly understanding what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.

Response from Haiou Chen

(Note: All responses have been reproduced as provided and have not been edited or otherwise altered.)

Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"I have read the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) over the last few weeks. I am opposing the wording change from "herbs" to "medicinal ingredient".

The Chinese medicine should follow the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand' s years of history.

If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then it is not real Chinese Medicine."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

No. The new guideline is not clear in the definition of Chinese Herbs. Changing the terminology of Chinese Herbal Medicine to "Medicine" will give a false impression if Chinese Herbal Medicine is the same as "Western Chemical-based medicine". This will make sure that we are using Herbal terms rather than Western Pharmacology. I believe that these Guidelines must be more practical to adopt and enforce.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice.

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

"Yes, the guidelines are practical to implement and sufficient for safe prescription writing, labelling, and dispensing of Chinese herbal medicines. It also protects the public and give enough information to the other health practitioners."

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

A five-year review period is acceptable, but if interim review and revision is required, it must be done before the end of the five-year review period.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

"I am asking any decision maker of CMBA to thoroughly understanding what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.

Response from Happie

(Note: All responses have been reproduced as provided and have not been edited or otherwise altered.)

Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

No

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

Yes

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

More supportive guidelines to TCM practice. More diploma course for TCM study.

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

Yes

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

Yes

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

Using herbs is not medicine.

Response from Hong Wang

(Note: All responses have been reproduced as provided and have not been edited or otherwise altered.)

Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"I have read the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) over the last few weeks. I am opposing the wording change from "herbs" to "medicinal ingredient".

The Chinese medicine should follow the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then it is not real Chinese Medicine."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

No. The new guideline is not clear in the definition of Chinese Herbs. Changing the terminology of Chinese Herbal Medicine to "Medicine" will give a false impression if Chinese Herbal Medicine is the same as "Western Chemical-based medicine". This will make sure that we are using Herbal terms rather than Western Pharmacology. I believe that these Guidelines must be more practical to adopt and enforce.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice.

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

Yes, the guidelines are practical to implement and sufficient for safe prescription writing, labelling, and dispensing of Chinese herbal medicines. It also protects the public and give enough information to the other health practitioners.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

"I am asking any decision maker of CMBA to thoroughly understanding what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.

Response from Hua Li

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Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"Chinese herbs should not be considered a medicinal ingredient as Chinese herbs works with different combinations and form different decoction, and treat different diseases. This application is guided by Traditional Chinese medicine theory and each herb's characters. If we use herbs like medicinal ingredients, it will significantly inhibit its usage and impede Chinese medicine's effects.

Herbs are not chemicals. Herbs come from nature. If we use it properly, it benefits our health greatly with rare side effects, compared with western medicine. The human's future really counts on naturopathy. It never has drug resistance issues like western medicine. We should do everything to support Chinese medicine to help people's well-being and reduce medical costs. "

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

"The new guideline is not clear in the definition of Chinese Herbs.

A more practical protocol is needed to improve TCM practitioners' efficiency and effectiveness. "

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

N/A

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

"There is confusion in the examples of prescriptions: "To be divided into three packets"
If Australia could raise funds to develop an app for TCM practitioners like GP has, it would solve all the problems with writing, labelling and dispensing."

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

Yes. But it should also allow for review in-between when is needed.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

If Australia could raise funds to develop an app for TCM practitioners like GP has, it would solve all the problems with writing, labelling and records. It also greatly reduces time consumption and help develop better records for clients and track the treatment history.

Response from Hui He

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Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"I have read the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) over the last few weeks. I am opposing the wording change from "herbs" to "medicinal ingredient".

The Chinese medicine should follow the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then it is not real Chinese Medicine."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

No. The new guideline is not clear in the definition of Chinese Herbs. Changing the terminology of Chinese Herbal Medicine to "Medicine" will give a false impression if Chinese Herbal Medicine is the same as "Western Chemical-based medicine". This will make sure that we are using Herbal terms rather than Western Pharmacology. I believe that these Guidelines must be more practical to adopt and enforce.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice.

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

"Yes, the guidelines are practical to implement and sufficient for safe prescription writing, labelling, and dispensing of Chinese herbal medicines. It also protects the public and give enough information to the other health practitioners."

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

A five-year review period is acceptable, but if interim review and revision is required, it must be done before the end of the five-year review period.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

"I am asking any decision maker of CMBA to thoroughly understanding what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.

Response from Hwe Tang

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Question One: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

Response provided to the question: Are there any specific issues or effects from applying the current guidelines? If so, what are they?

"I have read the revised Guidelines for Safe Chinese Herbal Medicine Practice (the Guidelines) over the last few weeks. I am opposing the wording change from "herbs" to "medicinal ingredient".

The Chinese medicine should follow the foundations "Yin-Yang, Five-Elements, Four Properties and Five Tastes, Ascending and Descending theory" (阴阳五行、四气五味、升降浮沉理论). Chinese herbal medicine never works in such way of "medicinal ingredients" during its thousand's years of history.

If it is mandatory to use ""medicinal ingredients"" to regulate the use of traditional Chinese herbal medicine, then it is not real Chinese Medicine."

Question Two: Is the content and structure of the draft revised guidelines helpful, clear, and relevant?

Response provided to the question: Is the content and structure of the draft revised guidelines helpful, clear and relevant?

No. The new guideline is not clear in the definition of Chinese Herbs. Changing the terminology of Chinese Herbal Medicine to "Medicine" will give a false impression if Chinese Herbal Medicine is the same as "Western Chemical-based medicine". This will make sure that we are using Herbal terms rather than Western Pharmacology. I believe that these Guidelines must be more practical to adopt and enforce.

Question Three: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

Response provided to the question: Is there anything missing that needs to be added to the draft revised guidelines, if so please provide details?

The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice.

Question Four: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicines?

Response provided to the question: Taken as a whole, are the guidelines practical to implement and sufficient for safe prescription writing, labelling and dispensing of Chinese herbal medicine?

Yes, the guidelines are practical to implement and sufficient for safe prescription writing, labelling, and dispensing of Chinese herbal medicines. It also protects the public and give enough information to the other health practitioners.

Question Five: The Board is proposing a five-year review period of the guidelines. Do you agree?

Response provided to the question: The Board is proposing a five-year review period of the guidelines. Do you agree?

The revised draft guidelines cover all necessary aspects for safety Chinese Medicine practice.

Question Six: Do you have any other comments?

Response provided to the question: Do you have any other comments?

I am asking any decision maker of CMBA to thoroughly understanding what Chinese medicine is, to appreciate the law that governing the Chinese herbal medicine, to respect the unique theoretical characteristics of Chinese herbal medicine. Any blindly usage the management method of Western medicine to regulate and control the practice of Chinese herbal medicine is to be stopped.