

Chinese Medicine Board of Australia (CMBA)
9th October, 2011

RE: draft grand-parenting registration standard

Dear Board Members

I wish to register my objection to the proposed grand-parenting registration standard which requires that Australian-trained practitioners applying for registration under the national scheme should be required to demonstrate a higher grandparenting standard than applied under the Victorian scheme; this seems particularly unjust and unfair.

The CMBA should recognize that the Australian Acupuncture and Chinese Medicine Association (AACMA) has imposed for a number of years now stringent accreditation guidelines for its members and as such the list submitted by AACMA of Australian Chinese medicine programs ought to be deemed adequate for grandparenting purposes.

There are also the following two significant areas which I believe the CMBA has not addressed in the draft grand-parenting registration standard.

1. recognition for non-practicing members of the profession to enable them to obtain non-practising registration during the grand-parenting period.
2. the recognition for pre-manufactured pill form of Chinese herbal medicine namely the accreditation of practitioners dispensing Chinese patent herbal formulas.

There must be two categories of Chinese herbal medicine, which is what happens currently for many of the health funds. Grand-parenting standards should recognise practitioners in raw Chinese herbs and in a separate category, practitioners who dispense only patent herbal medicines.

Although patent herbs may not be able to be individualised unlike the raw, granules or powdered herbs these patent remedies have been in existence for years. Patent pills have been safely tried and tested and refined down to an individualised fine art, so that any qualified practitioner of Chinese medicine who arrives at an individual's diagnosis already has the individualised formula.

As long as the practitioner has the accredited Chinese medicine qualifications then it must be seen as safe for the public to consult a practitioner who dispenses only patent herbal medicines.

Surely it is not the role of the CMBA to hold Chinese medicine practitioners to a higher standard than is required for Allopathic medicines, especially in light of a report by Professor Terry Bolin of the Gut Foundation that a recent study has shown common top-selling anti-inflammatory drugs which can be bought unregulated at supermarkets and petrol stations, can increase the risk of heart attack and stroke by 22%.

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