

BHMA Herbal Medicine Seminar

Regulatory & Scientific Updates from Across the Herbal Sector

Thursday 15th June 2017

University of Westminster, 115 New Cavendish Street, London W1W 6UW

This Seminar follows the BHMA Annual General Meeting
(AGM open to BHMA members only).

Non-BHMA members welcome to arrive for registration & coffee from 11.15 a.m.

Chair: Dick Middleton

- 11.40 pm **Dr Linda Anderson**
Licensing Division - Medicines and Healthcare Products Regulatory Agency
A VIEW FROM THE REGULATOR'S DESK.....'
- 12.20 pm **Dr Chris Jones**
Manager – Medicines Borderline Section, Medicines and Healthcare Products Regulatory Agency
CURRENT TRENDS AND HOT TOPICS FROM A MHRA BORDERLINE PERSPECTIVE
- 1.00 pm *LUNCH*
- 2.00 pm **Patience Holland**
Operations Manager - British Pharmacopoeia and Laboratory Services, Medicines and Healthcare Products Regulatory Agency
BRITISH PHARMACOPEIA AND INDUSTRY CO-OPERATION – RAISING HERBAL STANDARDS IN THE UK MARKET PLACE
- 2.40 pm **Dr. Tony Booker**
Senior Lecturer - University of Westminster
QUALITY ASSURANCE AND QUALITY CONTROL – HOW DO THEY AFFECT THE AVAILABILITY OF HIGH QUALITY HERBAL SUPPLIES IN AN UNREGULATED MARKETPLACE?
- 3.20 pm **Professor Michael Heinrich**
Pharmacognosy and Phytotherapy Research Cluster, University College London, School of Pharmacy
ST JOHN'S WORT ANALYTICAL INVESTIGATIONS – LATEST RESEARCH FINDINGS AND IMPLICATIONS FOR UNREGULATED HERBAL MATERIAL
- 4.00 pm *TEA AND FINISH*

BHMA HERBAL MEDICINE SEMINAR: Thursday 15 June 2017

Registration Form

Please complete in capitals

Title: Name:

Address:

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E-mail address:

Telephone number:

Seminar fee including lunch:

£99.00 (inc VAT)

FREE for BHMA members

Total payment: £.....

METHOD OF PAYMENT (please tick one box)

Cheque or International Draft, in favour of The British Herbal Medicine Association
in £ sterling drawn on a UK bank.

Bank transfer to the BHMA account at:

Lloyds TSB Bank PLC, 4 Castle Street, CHRISTCHURCH BH23 1DU, UK
Sort code: 30-92-02 Account number: 01401529
IBAN: GB61 LOYD 3092 0201 4015 29 SWIFT: LOYDGB21188

Credit card: VISA or MASTERCARD only

Cardholder's Signature.....

Card Number Expiry Date

Card Security Code..... [This is the three digit number printed on the signature panel of the credit card]

If the name and/or address given above are different from those registered with the card provider,
please provide the Cardholder's details below.

Cardholder's Name

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Please send your registration form and payment to:

BHMA, PO Box 583, Exeter, EX1 9GX or Fax: 0845 680 1136

PLEASE DO NOT EMAIL US YOUR CREDIT CARD DETAILS

For enquiries please e-mail: secretary@bhma.info

PLEASE BOOK BY MONDAY 5TH JUNE