

PRESS RELEASE



Government U-turn leaves public safety at risk from rogue herbalists

[Friday, 27 March 2015, 09:00hrs] The European Herbal and Traditional Medicine Practitioners Association (EHTPA) and British Herbal Medicine Association (BHMA) says public safety is at risk following today's recommendation by the government to reject statutory regulation of the UK's 3000 herbal practitioners.

Despite previous agreement that statutory regulation could be the only way to safeguard the public from poorly trained and unethical herbal practitioners, the government now favours voluntary accreditation by the Professional Standards Authority (PSA).

The U-turn by the government comes 15 years after statutory regulation of herbal practitioners was first recommended to the Department of Health by the prestigious House of Lords' Science and Technology Select Committee in 2000.

The recommendation also reverses an earlier decision by the Secretary of State for Health in 2011 to implement *statutory regulation* for herbal practitioners and is at odds with calls for statutory regulation made by two previous Department of Health Working Groups, in each case supported by an overwhelming public vote in favour of statutory regulation to ensure safe treatment by trained practitioners.

Chair of the EHTPA and member of the Herbal Practitioner and Medicines Working Group, Michael McIntyre said: "Herbal medicine is internal medicine and like other types of internal medicine practised in the UK, requires statutory regulation for those who practise it.

"The only way that the public can be assured of receiving safe treatment from well trained, ethically practising herbal practitioners is via statutory regulation since voluntary accreditation leaves the public open to poor practice from ill-trained practitioners who have opted out of, or never signed up to the voluntary scheme in the first instance."

Not only will voluntary regulation fail to ensure the public are consulting trained and ethical practitioners, it will also fall short of ensuring herbs supplied by herbalists are sourced from companies with adequate quality assurance systems, leading to cheaper supplies of inferior and suspect quality.

Dr Dick Middleton, Chairman of the BHMA commented: "The proposals will not prevent the continued availability of low quality or adulterated herbal supplies to herbal practitioners for use in their practice. Herbal practitioners will be unable to identify high quality herbal material and this will inevitably lead to a continued and unacceptable risk to patient safety."

Voluntary accreditation under the PSA is no substitute for statutory regulation: Voluntary accreditation of herbal practitioners already exists in the UK via a number of well-run professional associations with decades of experience of delivering training and monitoring fitness to practise of their members.

"The essential weakness of voluntary accreditation is that any practitioner disbarred by one of the voluntary registers can leave the register and legally continue to practise outside its jurisdiction," said McIntyre.

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"Furthermore, training institutions that do not wish to submit themselves to independent accreditation can refuse to participate and operate outside the accreditation scheme.

"The PSA suffers exactly the same shortcomings that undermine other existing voluntary accrediting bodies since the PSA has no more ability than existing voluntary accreditors operating in the herbal sector to require herbal practitioners to belong to it or to require that all herbal training institutions adhere to agreed standards of training. More worryingly, accreditation via the PSA offers the public false security as it appears to have all the powers of a statutory regulating council but in reality in its role as a voluntary accreditor it has none."

McIntyre concluded, "A well trained herbalist is a safe herbalist. In the last two decades, practically every herbal misadventure has occurred at the hands of those practising outside the main UK voluntary registers without adequate training or unethically. Statutory regulation is the only way to ensure *all* practitioners work to the same high standards. With the growing interest in and use of herbal medicine, only statutory regulation can ensure that the sector as a whole works to agreed standards and can integrate herbal medicine into the healthcare systems of the 21st century."

In objection to the government's decision to recommend voluntary accreditation, an open letter to the Department of Health has subsequently been supported and signed by a over half* of the Herbal Practitioner and Medicines Working Group objecting to the government's ruling and calls on the government to reconsider its decision in the interests of public health.

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NOTES TO EDITORS:

- To interview Mr Michael McIntyre, Chair of the EHTPA and/or Dr Dick Middleton Chair BHMA both members of the Herbal Practitioner and Medicines Working Group or for a copy of the open letter to the Health Minister signed by members of the Working Group, please contact Michelle Redmond on 07734 681796. The 12 signatories of the open letter are:
 - Michael McIntyre, Chair European Herbal Practitioners and Traditional Medicine Practitioners Association, visiting professor Middlesex University
 - Dr Michael Dixon, visiting professor at University College and Westminster University, Chair College of Medicine, practising GP
 - Alison Denham, Member Herbal Medicines Advisory Committee (HMAC)
 - Dr Dick Middleton, Chair British Herbal Medicine Association
 - Emma Farrant, President Register of Chinese Herbal Medicine

- Kate Hoey, MP
- Penny Viner, Chair UK Herbal Forum
- Professor Bo-Ying Ma, Chair Federation of Traditional Chinese Medicine Practitioners (UK)
- Simon Mills, Secretary of the European Scientific Cooperative on Phytotherapy
- Dr Indira Anand, Chair British Association of Accredited Ayurvedic Practitioners
- Huijun Shen, Vice-President Association of Traditional Chinese Medicine
- Alasdair Mearns, Scottish Representative of Association of Traditional Chinese Medicine
- The Herbal Practitioner and Medicines Working Group was convened by the MHRA to work with the government body
 to determine the need for regulation of UK herbal practitioners. It comprises 23 members excluding the Chair and ViceChair and includes herbal practitioners, pharmacists, doctors and other healthcare professionals that have an interest in
 public health at large.
- Over-the-counter herbal medicines are currently regulated by statute via the Traditional Herbal Medicinal Products Directive that became fully operational in 2011.
- Regulation and accreditation are not the same. Statutory regulation involves complying with agreed rules that can be legally enforced, while voluntary accreditation is a seal of approval from some accrediting body certifying that an organization or individual has met specific standards.
- * Excludes Chair and Vice-chair.

PRESS ENQUIRIES:

Issued by Minx PR on behalf of the European Herbal and Traditional Practitioners Association and the British Herbal Medicine Association. For press enquiries in the first instance please call or email Minx PR representative, Michelle Redmond on 07734 681796 / michelle@minxpr.com