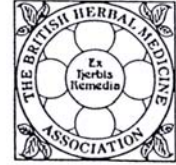


BHMA

THE BRITISH HERBAL MEDICINE ASSOCIATION (LIMITED BY GUARANTEE)

PO BOX 583 EXETER EX1 9GX

Tel: 0845 680 1134 Fax: 0845 680 1136



BHMA HERBAL MEDICINE SEMINAR

Thursday 17 June 2010

Canterbury Hall, Cartwright Gardens, London WC1H 9EE
(nearest Underground Stations: Russell Square or King's Cross & St Pancras)

Coffee will be served in the dining room from 11.15 a.m. The seminar commences at 11.50 a.m.

PROGRAMME

Chair: Simon Mills

- 11.50 am **Richard Woodfield**
Group Manager Herbal Policy
The Medicines and Healthcare products Regulatory Agency (MHRA)
TRADITIONAL HERBAL REGISTRATION – WHERE ARE WE NOW?
- 12.20 pm **Dr Ann Walker**
Nutritionist and Medical Herbalist
Course Director: Discovering Herbal Medicine
ARE 'NO-EFFECT' RESULTS IN CLINICAL TRIALS OF MEDICINAL PLANTS THE LAST WORD?
- 12.45 pm **Andrea Chandler**
Librarian Specialist
CAMLIS- Complementary and Alternative Medicine Library & Information Service, RLHH
AN UPDATE ON THE WORK OF CAMLIS
- 1.00 pm **BUFFET LUNCH**
- 2.00 pm **Professor Peter Hylands**
Head of Pharmacy, King's College London
Director of the Centre for Natural Medicines Research
THE WORK OF THE CENTRE FOR NATURAL MEDICINES RESEARCH AT KING'S COLLEGE
- 2.45 pm **Michael McIntyre**
Chair, European Herbal and Traditional medicine Practitioners Association (EHTPA)
SAVING OUR HERBAL TRADITIONS
- 3.30 pm **TEA AND FINISH**

NOTES

The Seminar follows the BHMA Annual General Meeting (open to BHMA members and guests only).

Non-members are welcome to attend the Seminar and buffet lunch for a registration fee of £50.00 (including VAT).

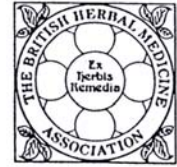
PLEASE BOOK BY 7TH JUNE 2010

BHMA

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REGISTRATION FORM FOR BHMA HERBAL MEDICINE SEMINAR – 17th June 2010

Please complete the following in capitals

Title:.....Name:

Address:

.....

.....

Email address:.....

Telephone number:.....

Payment

The fee for the seminar is £50.00 to include a buffet lunch (and VAT).

Cheques or International drafts, in favour of **British Herbal Medicine Association**, should be in £ sterling drawn on a UK bank.

Please fill in the following details as registered with the card provider if paying by VISA or MASTERCARD.

Amount to be paid.....Signature.....

Card NumberExpiry Date

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

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

Cardholder's Address

.....

.....

Please send your registration form and payment to:-

Herbal Medicine Seminar, BHMA, PO Box 583, Exeter, EX1 9GX.

Or **fax** to: +44 (0) 845 680 1136

Please email secretary@bhma.info for further details.