



Summary of Proceedings
Public Hearing

Held on Friday, December 7, 2018
[10:48 a.m. to 12:25 p.m.]

2nd Public hearing re: An inquiry into the potential benefits of non-traditional medications in the treatment of non-communicable diseases in Trinidad and Tobago.

Venue: A.N.R. Meeting Room (East), Level 9, Office of the Parliament, Tower D, the Port of Spain International Waterfront Centre, 1A Wrightson Road, Port of Spain.

Committee members

The following committee members were present:

1. Mr. Paul Richards – Chairman
2. Brig. Gen. (Ret.) Ancil Antoine, MP
3. Mrs. Christine Newallo-Hosein, MP
4. Mrs. Glenda Jennings-Smith, MP
5. Ms. Allyson West
6. Mr. Rohan Sinanan

Witnesses who appeared

The following officials were present:

1. Dr. Lionel Gaskin Mayers - Soul Mind Body Renewal Institute (Acupuncturist)

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(Including Education, Health, Gender, Tourism, Public Administration, Labour, Culture,
Community Development, and other Social Services)

2. Dr. Asante Indira Van West-Charles–LeBlanc - Victoria Clinic (Acupuncturist) / Member of
Ministry of Health Herbal Sub-Committee
3. Mr. Marcus Ramkissoon - Caribbean Cannabis Institute
4. Mr. Phillip Franco - Natural Balance, the Natural Medicine Centre/ Natural & Alternative
Medicine Association of Trinidad & Tobago
5. Dr. Ernest Hazelwood - Vibrant Health Limited

Key Issues Discussed

The following are the key subject areas/issues discussed during the hearing:

Dr. Lionel Gaskin Mayers - Soul Mind Body Renewal Institute (Acupuncturist)

- i. The practice of Ozone Therapy as a form of alternative medicine used to treat non-communicable diseases such as Parkinson’s disease;
- ii. The public has several misunderstandings regarding the benefits and risks associated with Complementary and Alternative Medicine (CAM) due to a lack of knowledge;
- iii. Acupuncture and Homeopathic medicine have proven to be effective in the treatment of non-communicable diseases;
- iv. The lack of laboratories equipped to conduct analysis and tests which are necessary to verify the medical impact of both pharmaceutical and herbal medicine;
- v. The existence of two types of B12 vitamins; Cyanocobalamin is a synthetic form of vitamin B12 found in supplements, while methylcobalamin is a naturally occurring form that obtained through foods. Furthermore, methylcobalamin is easily digested by the body while cyanocobalamin contains traces of cyanide and is not easily digested;
- vi. The need for more viable research on and scientific development of the various disciplines within CAM;
- vii. The need for improved collaboration between medical practitioners and herbal experts as well as CAM practitioners;
- viii. An estimated 70% of patients, including cancer patients, may resort to CAM as a last resort in the treatment of non-communicable diseases, especially cancer;

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- ix. The need for regulation to manage persons in the practice of CAM. Such regulation should not stifle the practice of traditional or instinctive medicine.

Dr. Asante Indira Van West-Charles-LeBlanc - Victoria Clinic (Acupuncturist) / Member of Ministry of Health Herbal Sub-Committee

- i. That Herbal Medicine and other forms of Complementary and Alternative Medicine (CAM) should be used in conjunction with pharmaceutical treatments;
- ii. The need to establish a regulatory system to manage persons in the practice of CAM. Such a system should be established by legislation and managed via a statutory body or board (e.g. The Trinidad and Tobago Board of Natural Medicine);
- iii. The absence and need for a depository of all persons in the practice of CAM;
- iv. Lack of understanding and acceptance amongst the medical fraternity as it relates to the use of CAM in the treatment of illnesses/disorders/diseases. As a result, CAM is generally disregarded by the medical fraternity as a form of treatment;
- v. Actions should be taken against persons who claim to be medical practitioners and are not registered with the Medical Board of Trinidad and Tobago (MBTT);
- vi. Some herbal or natural substances may be considered dangerous;
- vii. That both a voluntary regulating system which is managed by the body of CAM practitioners and merchants and a system regulated by law may be utilized to regulate CAM use;
- viii. The inability of the Ministry of Health to fully regulate herbal medicine and CAM;
- ix. The production, supply and prescription of herbal substances are not regulated under the Food and Drugs Act, Chap. 30:01;
- x. The Herbal Sub-committee of the Drug Advisory Committee (DAC) is currently in the process of drafting a policy to regulate the use of Herbal Medicine and Complementary and Alternative Medicine (CAM);
- xi. The functions of the Herbal Sub-committee, DAC include providing guidance to the Drug Advisory Board and the Minister on *inter alia* the regulation and public dispensation of herbal substances;
- xii. Herbal medication should be assessed and approved by the Drug Advisory Committee (DAC);

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- xiii. The need for collaboration between CAM practitioners and registered doctors in the medical fraternity as it relates to the combined use of CAM and pharmaceutical drugs in the treatment of illnesses/disorders/diseases;
- xiv. The need to educate practitioners of Western Medicine on the use and benefits of CAM;
- xv. The existence of a herbal society and guild in the United States;
- xvi. Both CAM and pharmaceutical drugs have side-effects. However, the side effects associated with the use of herbal medicine and other forms of CAM are significantly lower than pharmaceutical drugs;
- xvii. The use of CAM in the treatment of non-communicable diseases. CAM is prescribed by Oncologists in conjunction with pharmaceutical treatments to Cancer patients. Soursop is used as a natural treatment for breast cancer;
- xviii. The need for CAM to be included into the Bachelors of Medicine programmes of tertiary institutions with a view to curbing the stigma associated with CAM through education;
- xix. The need for research and development to ascertain information on the benefits of CAM in the treatment of illnesses/disorders/diseases. Furthermore, public funding should be allocated for research and development in CAM;
- xx. The MOH is in the process of ensuring that all laboratories are standardized to conduct trials and testing on the components of pharmaceutical medication; and
- xxi. The need for consistent communication between medical practitioners and persons in the practice of CAM.

Mr. Marcus Ramkissoon - Caribbean Cannabis Institute

- i. Antigua and Barbuda are set to legalize the regulated production and supply of cannabis for religious and medical purposes. That country's Cannabis Bill, 2018 has two main functions: regulating the production, supply and prescription of medicinal cannabis for patients; and permitting religious groups to possess, cultivate and supply cannabis;
- ii. The urgent need for legislative provisions regarding the regulation of non-traditional and alternative medication in Trinidad and Tobago. Consultations should be held with CAM practitioners;
- iii. The need for the World Health Organization (WHO) guidelines to be adhered to by CAM practitioners in Trinidad and Tobago which will promote proper use of herbal and

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- alternative medicines. Furthermore, legislative provisions must align with said international standards/guidelines;
- iv. That all persons in the practice of CAM should be certified by an accredited institution;
 - v. The need for the establishment of a regulatory board as it relates to the administration of medicinal cannabis;
 - vi. Some pharmaceutical companies in Trinidad and Tobago dispense herbal supplements. However, there are herbal supplements that are not dispensed through pharmaceutical companies due to the fact that they are not standardized;
 - vii. That Cannabis in its raw form should not be dispensed by pharmacies;
 - viii. The notion that Cannabis is recommended and not prescribed by registered physicians in Trinidad and Tobago for the treatment of certain non-communicable diseases;
 - ix. There are thousands of strains of cannabis, each with a different cannabinoid profile which has different effects;
 - x. Herbal practitioners cannot ‘prescribe’ but instead ‘recommend’ the use of herbal medicine in the treatment of illnesses/disorders/diseases;
 - xi. Some pharmaceutical companies in Antigua and Barbuda are permitted to dispense drugs that contain Cannabis compounds;
 - xii. The need for accountability mechanisms for CAM practitioners and the urgent need for penalties and the introduction of some level of oversight as it relates to the practice of CAM;
 - xiii. The benefits of Cannabis (THC)¹ inhalation in the treatment of non-communicable diseases;
 - xiv. That Cannabis should have its own legislative provisions apart from CAM;
 - xv. The decriminalization and legalization of Cannabis in Jamaica; and
 - xvi. The need for the Ministry of Health to consult with herbal specialists and CAM practitioners regarding a possible legal framework for the regulation of Traditional medicine or Complementary and Alternative Medicine (CAM).

¹ Tetrahydrocannabinol (THC), natural compounds found in plants of the Cannabis genus. Furthermore, THC is the main psychoactive compound in marijuana.

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**Mr. Phillip Franco - Natural Balance - Natural Medicine Centre / Natural & Alternative
Medicine Association of Trinidad & Tobago**

- i. The need for legislative provisions to regulate the production, supply and prescription of herbal medication;
- ii. There exists a diverse range of CAM practitioners in Trinidad and Tobago, both qualified and unqualified. Regulation of the marketing and promotion of non-registered persons involved in the practice of CAM is needed;
- iii. On average there are over 100,000 deaths per year in the US as a result of the improper use of pharmaceutical drugs. However, there are only a handful of deaths as a result of CAM usage;
- iv. The use of herbal substances is regulated in countries such as the United States, New Zealand, Canada, and Europe which may provide a rubric for Trinidad and Tobago;
- v. That a voluntary system be utilized in the interim for the regulation of CAM. Government support is necessary for the holistic integration of natural medicine into the health system;
- vi. The success of CAM in the treatment of non-communicable diseases is dependent on patients use i.e. the appropriate use of CAM whether alone or in conjunction with pharmaceutical drugs; and
- vii. The need for the establishment of a regulated and accessible database to record all drugs that are imported into Trinidad and Tobago.

Dr. Ernest Hazelwood - Vibrant Health Limited

- i. Mind, Body and Spiritual Intervention as a form of CAM;
- ii. All plants contain medicinal properties. Scientific research is needed to record these properties;
- iii. That the production, supply and prescription of herbal medication be legalized. Furthermore, there is a need for proper documentation and certification with respect to the dispensing of CAM treatment;
- iv. The need for accredited training for practitioners in the use of CAM;

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- v. Scientific research is available on the potential benefits of Herbal Medicine and many forms of CAM;
- vi. Herbal substances are used on a daily basis for cooking and as traditional ‘backyard’ remedies for illnesses;
- vii. The need for the Ministry of Health to undertake public awareness and education initiatives regarding the use and potential benefits of herbal substances and CAM; and
- viii. Pharmaceutical drugs have proven to be ineffective in the treatment of certain illnesses/disorders/diseases.

View the Hearing

The hearing can be viewed on our YouTube channel via the following link:

<https://www.youtube.com/watch?v=erlZX0NZBZA>

Contact the Committee’s Secretary

jscspa@tpparliament.org or 624-7275 Ext. 2283

Committees Unit

December 13th, 2018