

National Pharmaceutical Control Bureau Biro Pengawalan Farmaseutikal Kebangsaan

MINISTRY OF HEALTH MALAYSIA / KEMENTERIAN KESIHATAN MALAYSIA

REGULATORY CONTROL FOR HERBAL/TRADITIONAL MEDICINES AND HEALTH SUPPLEMENT PRODUCTS IN MALAYSIA

11th MARCH 2015

DATIN SHANTINI THEVENDRAN COMPLEMENTARY SECTION, PPP, NPCB





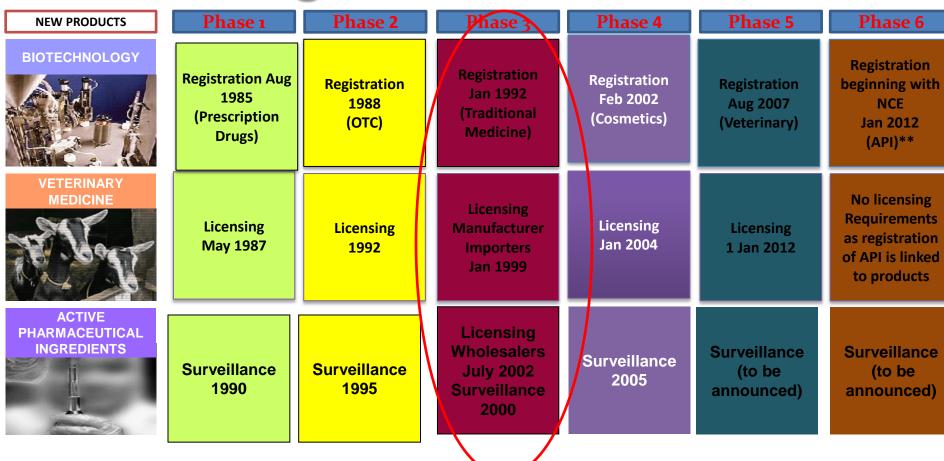
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CONTENTS

- Definition
- ☐ Product Registration Process
- ☐ Registration Criteria
- ☐ Safety, Quality, Efficacy / claimed benefits
- **□**Statistics

Registration Phases



1st January 2008 – Registration of Cosmetics replaced by NOTIFICATION

^{**} Voluntary registration of API commenced in April 2011. Registration of generic API will be announced at a later date.

What is a Traditional Medicine?

- <u>Traditional medicine</u> is defined as any product used in the practice of indigenous medicine, in which the drug consists solely of one or more naturally occurring substances of a <u>plant</u>, <u>animal</u> or <u>mineral</u>, or parts thereof, in the <u>unextracted</u> or <u>crude extract</u> form
- Indigenous medicine is defined as a system of treatment and prevention of disease established through traditional use of naturally occurring substances





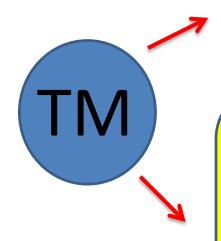




SUBSTANCE TO BE EXCLUDED

Active Ingredients:

- -Toxic constituents/ substances exceeding stipulated limits
- -Narcotics
- -Psycotropics



Others:

- -Isolated and chemical characterized substances
- -Extemporaneous preparations
- -Vaccines
- -Human parts derivatives
- -Sterile preparations
- -Product in food presentations (incl. beverages)

Traditional medicine claims

traditionally used ...

- Traditional general claims
 - general health
- Traditional medium claims
 - reduction of risk of a disease/disorder
 - relief of symptoms
 - aids/assists in the management of a named symptom/ disease
 - prevents/stops/ slows down the progress of a mild/ self-limiting disease or medical condition

HERBAL PRODUCT



Finished herbal products:

herbal preparations made from one or more herbs. If more than one herb is used, the term mixture herbal product can also be used. Finished herbal products and mixture herbal products may contain excipients in addition to the active ingredients. However, finished products or mixture products to which chemically defined active substances have been added, including synthetic compounds and/or isolated constituents from herbal materials, are not considered to be herbal.

World Health Organization (WHO) Guidelines (4th October 2010)

Herbal product claims

herbal product used ...



- General health maintenance
- Medium claims
 - reduction of risk of a disease/disorder
 - relief of symptoms
 - aids/assists in the management of a named symptom/ disease
- High claims
 - treats/ cures/manages any disease/disorder
 - adjunct / to complement any treatment

GUIDELINES : final draft

IMPLEMENTATION : 2015



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Health Supplement Definition

A Health Supplement (HS) means any product that is used to supplement a diet and to maintain, enhance and improve the health function of human body.

It is presented in small unit dosage forms (to be administered) such as capsules, tablets, powder, liquids and shall not include any sterile preparations (i.e. injectables, eye drops).

(Malaysian DRGD 2014 July)



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Health supplements may contain one or more, or the following combination:

i)Vitamins, minerals, amino acids, fatty acids, enzymes, probiotics, and other bioactive substances;

ii)Substances derived from *natural sources, including animal, mineral and botanical materials in the forms of extracts, isolates, concentrates, metabolite;

iii)Synthetic sources of ingredients mentioned in (i) and (ii) may only be used where the safety of these has been proven.

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Claims for Health Supplements

☐General or Nutritional Claims

☐ Functional Claims

☐ Disease Risk Reduction Claims

Effective 1st March 2013

Maximum Daily Levels of Vitamins and Minerals for Adults allowed in Health Supplements

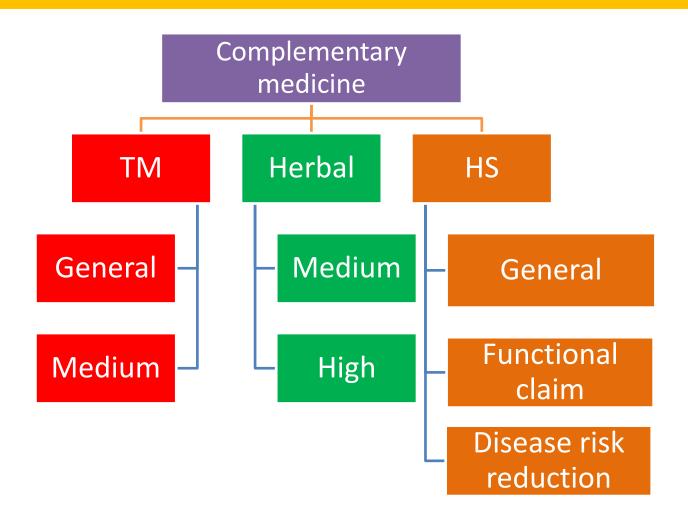
NO.	VITAMINS & MINERALS	UPPER DAILY LIMIT
1.	Vitamin A	5000 IU
2.	Vitamin D	1000 IU
3.	Vitamin E	800 IU
4.	Vitamin K (K1 and K2) 1	0.12mg
5.	Vitamin B1 (Thiamine)	100 mg
6.	Vitamin B2 (Riboflavine)	40 mg
7.	Vitamin B5 (Panthothenic Acid)	200 mg
8.	Vitamin B6 (Pyridoxine)	100 mg
9.	Vitamin B12 (Cyanocobalamin)	0.6 mg
10.	Vitamin C (Ascorbic Acid)	1000 mg
11.	Folic Acid	0.9 mg
12.	Nicotinic Acid	15 mg
13.	Niacinamide (Nicotinamide)	450 mg
14.	Biotin	0.9 mg
15.	Boron	6.4 mg
16.	Calcium	1200 mg
17.	Chromium	0.5 mg
18.	Copper	2 mg
19.	lodine	0.3 mg
20.	Iron ²	20 mg
21.	Magnesium	350 mg
22.	Manganese	3.5 mg
23.	Molybdenum	0.36 mg
24.	Phosphorus	800 mg
25.	Selenium	0.2 mg
26.	Zinc	15 mg

Vitamins/ Minerals:

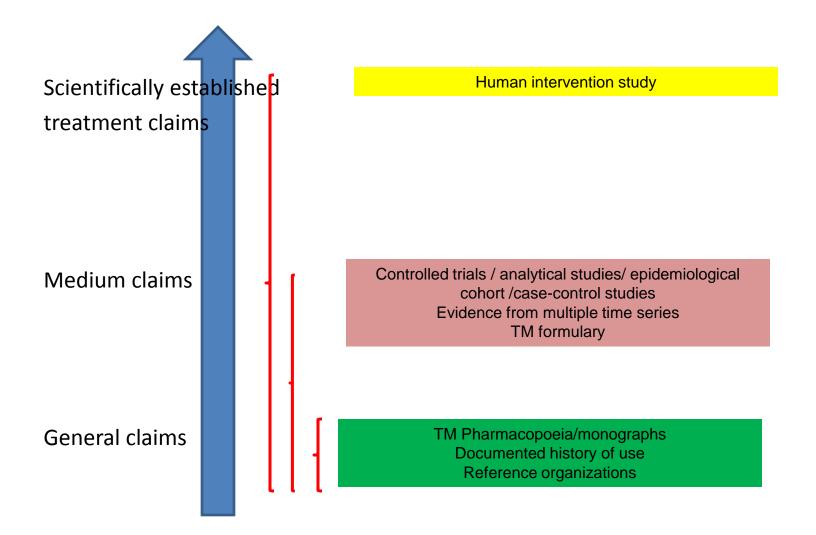
- Daily levels must not exceed maximum daily levels for adults allowed in health supplement
- For pre and antenatal use, as part of a multivitamin and mineral preparation, levels higher than the 20mg limit established for adults may be permitted at the discretion of the Authority.

Ref: ASEAN Guidelines for HS

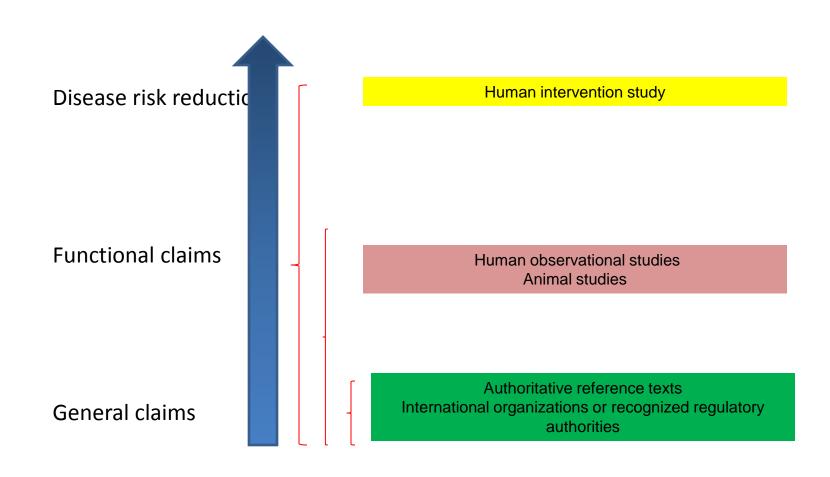
SUMMARY OF CLAIMS



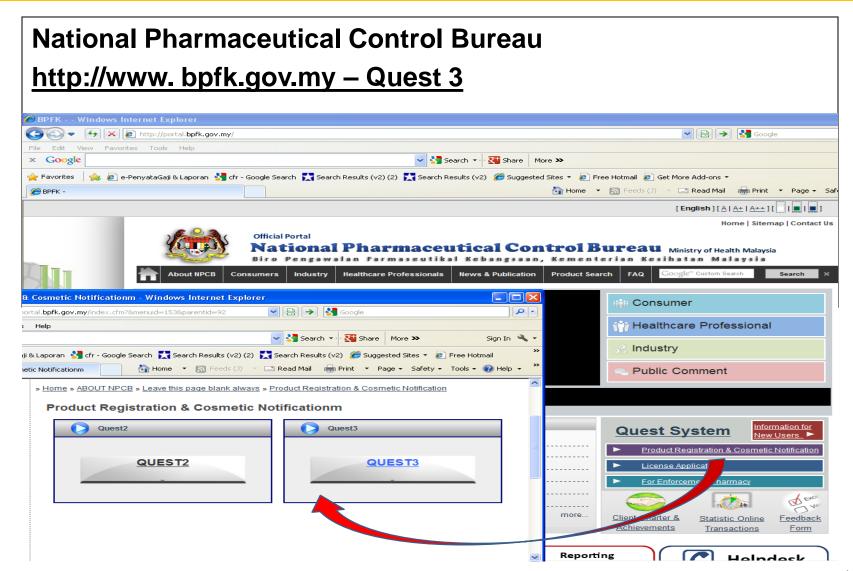
Sources of evidence – TM/Herbal



Sources of evidence - HS

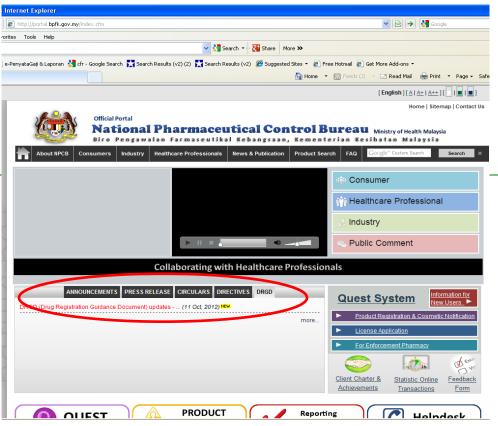


ON-LINE REGISTRATION



DRUG REGISTRATION GUIDANCE DOCUMENT

- 1) National Pharmaceutical Control Bureau: http://www.bpfk.gov.my - Regulatory Information
- 2) Drug Registration Guidance Document



NATIONAL PHARMACEUTICAL CONTROL BUREAU
MINISTRY OF HEALTH MALAYSIA
PETALING JAYA

DRUG REGISTRATION GUIDANCE DOCUMENT

PREAMBLE

This "DRUG REGISTRATION GUIDANCE DOCUMENT" will serve as the reference guide for both pharmaceutical products for human use and traditional products. It will replace the "Guidelines for Application for Registration of Pharmaceutical Products" Third Edition of October 1993 and "Garispanduan Permohonan Pendaftaran Keluaran Ubat Tradisional" Second Edition, December 1998. The contents of this version include:

- Updated information relating to administrative requirements and procedures
- . Information on Drug Control Authority (DCA) policies currently applicable.
- Guidelines on the on-line application process and requirements which will incorporate the ASEAN technical requirements and standards for pharmaceuticals (where applicable).

An on-going review of policy matters will continue, taking into account the global regulatory environment, to allow for timely and pertinent changes.

Information relating to DCA policy decisions is current up to its 220th meeting on 01 Oktober 2009. Please visit the National Pharmaceutical Control Bureau (RPCB) website at http://www.bpfk.gov.my for updates in regulatory information.

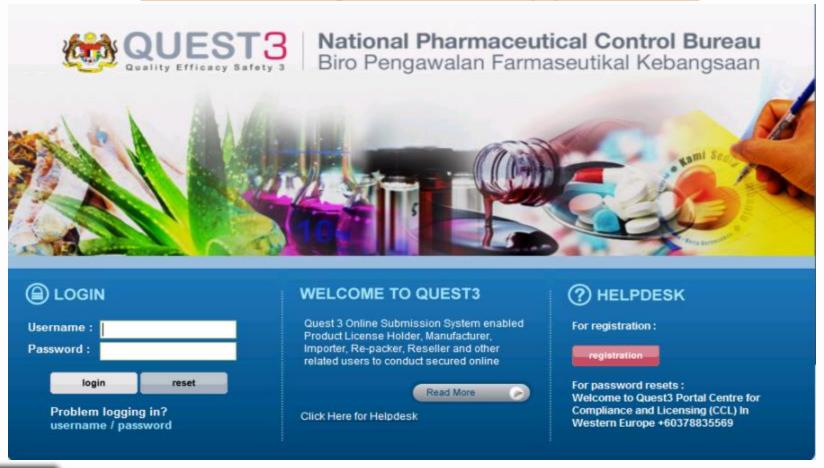
March 2010 Revision



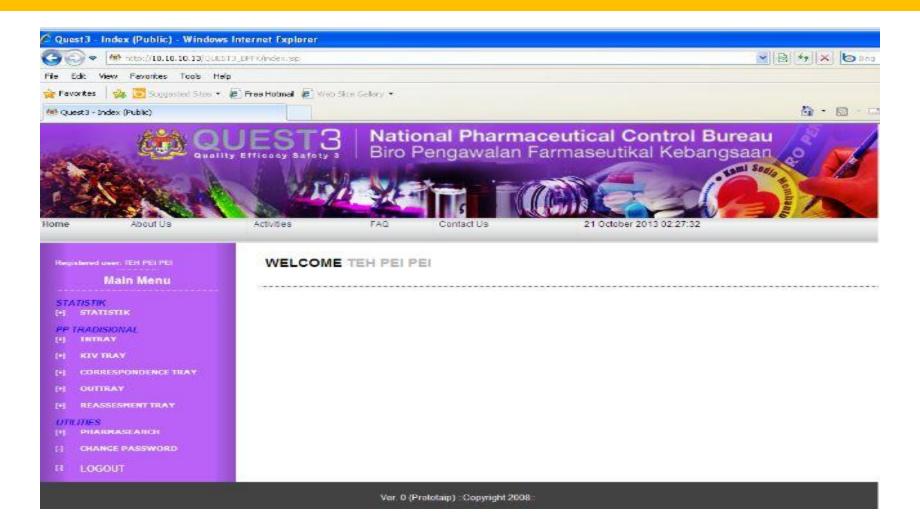
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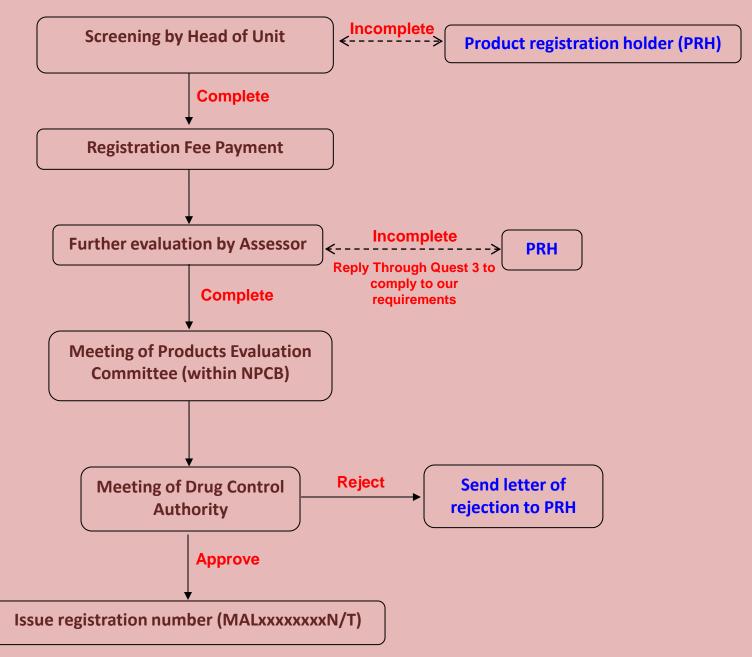
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Product Registration Application



QUEST 3 LAYOUT







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Product Registration Number

MAL2014.... "Code"

A: Scheduled Poisons

X: Non-scheduled Poisons

(over the counter products)

T: Traditional Medicines

N: Health Supplements

C: Contract Manufacturer

E: Export Only

R: Repacked

S: Second source

- Validity period of registration 5 years
- Renewal of product registration should be done not later than 6 month prior to expiry of product registration



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CLIENT'S CHARTER

NCE & Biotech

< 245 working days

Generics & OTC

- < 210 working days</p>

TM & HS (high claims) -

< 210-245 working days

TM & HS (single ing)

< 113 working days</p>

TM & HS (comb)

- < 136 working days

On condition

Full Compliance to Requirements



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<u>FEES</u>

PROCESSING FEES

- Pharmaceuticals RM 1000

- Traditional RM 500

- Cosmetics RM 50

LABORATORY TESTING

- Pharmaceuticals RM 1200- 2000

- Traditional RM 700

REGULATORY REQUIREMENTS



Quality

Status of manufacturer



Safety

maximum daily limits

Heavy metals

Microorganisms



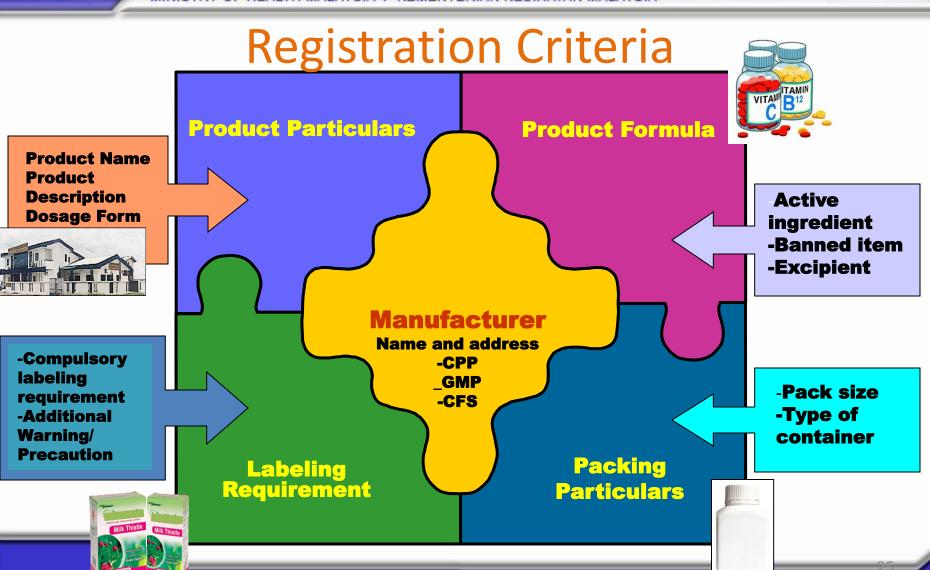
Efficacy

As claimed



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PRODUCT PARTICULARS

Fields	Description
A1	Name of Product
A2	Product Description
А3	Dosage Form
A4	Name and Strength of Active and Excipient Substance
A5	Product Indication
A6	Dose / Usage instruction
A7	Contraindication
A8	Warning / Precaution
A9	Drug Interaction
A10	Side Effects / Adverse Reaction
A11	Signs of Overdose
A12	Storage Condition
A13	Shelf Life
A14	Therapeutic Code



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SECTION B PRODUCT FORMULA

Fields	Description
B 1.1	Batch Manufacturing Formula
B 1.2	Attachment of Batch Manufacturing
B 2.1	Manufacturing process
B 2.2	Attachment of manufacturing
B 3.0	In Process Quality Control



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SECTION C PACKING

Fields	Description
C1	Pack Size
C2	Container Type /Container Type Description e.g.: HDPE Plastic Bottle, Glass Bottle, Aluminum Blister Pack
C3	Barcode/Serial Number
C4	Recommended Distributor's Price, RM
C5	Recommended Retail Price, RM



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SECTION D LABELS & PACKAGE INSERT

Fields	Description
D 1	Label (mock up) for immediate container
D 2	Label (mock up) for outer carton
D 3	Proposed package insert



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SECTION E PARTICULARS OF THE MANUFACTURER/ IMPORTER / REPACKER/ PRODUCT OWNER/STORE ADDRESS

Fields	Description
E 1	Product Owner
E 2	Manufacturer
E 3	Repacker
E 4	Other Manufacturer(s) Involved (If Any)
E 5	Store Address
E 6	Importer



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SECTION F

SUPPLEMENTARY INFORMATION

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Fields	Description
F 1.0	Letter of Authorisation from Product Owner
F 2.1	Letter of Appointment of Contract manufacturer from Product Owner
F 2.2	Letter of Acceptance from Contract Manufacturer
F 3.0	Is the Active Substance(s) Patented in Malaysia
F 4.0	Certificate of Pharmaceutical Product (CPP)
F 5.0	Certificate of Free Sale (CFS)
F 6.0	Good Manufacturing Practice (GMP) Certificate
F 7.0	Summary of Product Characteristics (Product Data Sheet – if any)
F 8.0	Patient Information Leaflet (PIL)
F 9.0	Attachment of Protocol Analysis
F 10	Attachment of Certificate Analysis (Finished Product)
F 11	Attachment of Certificate of Analysis (Active Ingredient)
F 12	Other Supporting Document



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SAFETY CRITERIA

Limits for heavy metals

Limits for microbial contamination

Absence of steroids and other adulterants

Indications and claims

Prohibition of herbs/ingredients with known adverse effects

Labeling



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SCREENING FOR ADULTERANTS

Based on product indications:

Men's health - e.g. Sildenafil, Tadalafil and its analogues

Slimming - e.g. Fenfluramine

Muscle and joint pains — e.g. NSAIDs, Steroids

Cough and cold - e.g. Anti- histamines



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RED YEAST RICE...

For products containing Red Yeast Rice (*Monascus purpureus*), applicants shall provide certificates of analysis (for both raw material and finished product) showing the Monacolin-K content.

The percentage of Monacolin-K shall not exceed 1% and the Monakolin-K consumed shall not exceed 10 mg per day.

Supporting Documents for New Active Ingredients/ New Dose

Reference Countries

- United Kingdom, Sweden, France, United States of America, Australia, Canada, **Japan** and Switzerland
- Must be provided from competent authorities (e.g. US FDA, TGA, Health Canada)
- Examples: Registration status, established monograph

Clinical Studies / Scientific Evidences / Researches

- Full articles from the published journals
- Examples: Human clinical studies, scientific reviews, animal toxicological studies etc

Established References

• Examples: Martindale, Pharmacopeias, US PDR, The Merck Index etc

QUALITY CRITERIA

HEAVY METAL SPECIFICATION

Mercury - not more than 0.5 ppm

Arsenic - not more than 5.0 ppm

Lead - not more than 10 ppm

Cadmium - not more than 0.3 ppm

QUALITY CRITERIA

12.6 QUALITY CONTROL TEST SPECIFICATIONS FOR TRADITIONAL MEDICINE PRODUCTS

1. **Limit Test for Heavy Metals**

Maximum limit for heavy metals:

NMT 10.0 mg/kg or 10.0 mg/litre (10.0ppm) Arsenic Mercury 1.2 NMT 5.0 mg/kg or 5.0 mg/litre (5.0ppm) 1.3 NMT 0.5 mg/kg or 0.5 mg/litre (0.5ppm) 14 NMT 0.3 mg/kg or 0.3 mg/litre (0.3ppm) Cadmium

2. Disintegration Test (for tablets, capsules and pills)

Disintegration time

2.1 Uncoated tablets NMT30 minutes 2.2 Film-coated tablets NMT 30 minutes 2.3 Sugar-coated tablets : NMT 60 minutes

2.4 Enteric-coated : Does not disintegrate for 120 minutes in acid tablets solution but to disintegrate within 60 minutes in

buffer solution NMT 30 minutes

- 2.5 Capsules 2.6 Pills NMT 120 minutes
- 3. Test for Uniformity of Weight (tablets and capsules only)

Not more than 2 capsules / tablets exceed the limit by ± 10% from the average weight AND no tablet / capsule exceed the limit by ± 20% from the average weight.

4 Test for Microbial Contamination

Route of Administration	TAMC (CFU/g or CFU/ ml)	TYMC (CFU/g or CFU/ ml)	Test for Specified Microorganisms
Rectal Use	NMT 2 x 10 ³	NMT 2 × 10 ²	
Oromucosal Use Gingival Use Cutaneous Use Nasal Use Auricular Use	NMT 2 × 10 ²	NMT 2 × 10 ¹	Absence of Staphylococcus aureus in 1g or 1ml Absence of Pseudomonas aeruginosa in 1g or 1ml
Vaginal Use	NMT 2 × 10 ²	NMT 2 × 10 ¹	- Absence of Staphylococcus aureus in 1g or 1ml

SUMMARY - ASSESSMENT CRITERIA

SAFETY	QUALITY	INDICATIONS & CLAIMS	LABELLING
•Absence of banned/prohibited ingredients •Pre registration testing •Heavy metals – Mercury, Arsenic, Lead, Cadmium •Microbial limit test •Adulterants •Prohibition on the use of premixes •Declaration that product is free from TSE •ADR reporting	 Compliance with Good Manufacturing Practices Limits for disintegration time Uniformity of weight Stability data Evidence of marketing authorization in exporting country 	•Low level claims supported by documents/literature on traditional use •Prohibition on claims for 20 diseases as stipulated in the Medicines (Advertisement & Sale) Act •Revocation of license if found to be making false / unauthorized claims	 Full ingredient listing Name of Marketing Authorization Holder Name of manufacturer (and repacker, if any) Serialized Security label (Hologram) Warning statements Precautions
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Label

- Name and Strength of active substances
- RDA (optional)
- Preservative(s) (where present)
- Alcohol (where present)
- Indication
- Dose / Use Instruction



- Name & address of Product Registration Holder
- Name & address of Manufacturer
- Sources (animal origin)
- Source of capsule shell (if applicable)

- Functional Claim (if applicable)
- Warnings (If applicable)



- Storage Condition
- Keep out of reach of children / Jauhi dari kanak-kanak

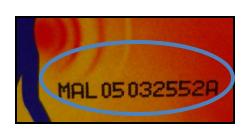
- Pack Size
- Dosage Form

- Batch Number
- Manufacturing Date
- Expiry Date

MAL													
SARC F	 												а

HOLOGRAM MEDITAG®

SECURITY FEATURES







Both overt (visible) and covert (hidden)





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Challenges

□TM and HS have differences in their functions,
requiring different 'tools' for the pre market control and
assesment for the risks.
□TM can not only be seen as a trade commodity but
also as a comprehensive health care involving traditional
practitioner.
■ Doses and usage of the same ingredients may be
different
☐ Selective publication of study results (limited research
budget)
□CĂM products in most countries are not required to be
registered
□Ingredient or product?



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Challenges

- New active ingredients
- Products of new combinations of active ingredients
- New claims
- New technology (e.g. bilayer technology)
- New invention (e.g. new dosage form, extended release/slow release)



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Challenges

- Adulteration
- Illegal Manufacturing
- Unregistered Products
- Slick marketing campaigns involving unsubstantiated gimmicky products
- Misleading Claims
- Premix

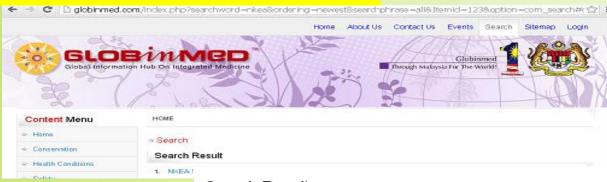
THE WAY FORWARD

- ✓ Educating the public about current CAM evidence
- ✓ More quality research
- ✓ Intellectual property protection
- ✓ CAM to be used as adjunct to modern medicine (complementary)
- ✓ CAM to be used in place off conventional therapy (alternative)
- ✓ Physicians being oriented to CAM modalities and philosophy

THE WAY FORWARD

- Official analytical methods
- Pre-cleared information -Recognized standards monographs
- Herbal reference standards
- Competent expertise
- Laboratories

MONOGRAF HERBA MALAYSIA NKEA



The Malaysian Herbal Monographs Vol. 1, 2 & 3.



Search Result

1. NKEA Monograf

Category: Uncategorised

1	Andrographis paniculata Nees
2	Centella asiatica (L.) Urban
3	Eurycoma longifolia Jack
4	Ficus deltoidea Jack
5	Hibiscus sabdariffa Linn
6	Labisia pumila
7	Morinda citrifolia Linn.
8	Orthosiphon stamineus Benth
9	Phyllanthus amarus Schum
10	Zingiber officinale Rosc

On-going research projects

- Gamma Aminobutyric Acid (GABA) active ingredient
 - GABA will be prohibited until data of it's safety and recommended dosage can be provided.
- Active ingredients containing naturally occurring Theophylline and Caffeine.
 - Assessment of the level of Theophylline and Caffeine in registered products will be done starting with the list of registered products in QUEST 2.
 - Maximum level of Theophylline/ Caffeine will be set based on safety assessment for traditional products

- •Quantification of α & β -asarone in finished traditional products
- -α and β-asarone were reported to cause toxicity ad carcinogenicity in mammalians
- EMEA has set the safety level as not more than 115 μ g/ day or 2 μ g/ kg bw/ day)
- On-going assessment of the levels of α and β -asarone on registered finished products on the market

NEW PROPOSAL

NEW INDICATIONS FOR Traditionally used.......

- -To conduct a pilot study starting with the CHINESE PHILOSOPHY OF USE first, followed by the other traditional practices later
- -A working group will be formed to address the issues and prepare a guideline for the convenience of the industry
- -The committee may wish to list our the acceptable references

NEW INDICATIONS FOR Traditionally used......

BASED ON PHILOSOPHY OF USE – EXAMPLES

	_0	
PRODUCT NAME	INDICATION REGISTERED	INDICATION BASED ON THE PHILOSOPHY
ABC Tablet	Traditionally used for general health	Deficient and insecure exterior pattern manifested as spontaneous sweating, aversion to wind, bright pale complexion or people with weak constitution who are susceptible to wind
Dang Gui Bu Wie Tang Extract XYZ	Traditionally used for improving blood circulation	To tonify Qi and nourish blood
DEF	Traditionally used for reducing toothache	Stomach heat with yin deficiency, marked by fever, thirst, headache, toothache, nosebleed, hemoptysis, red tongue with

white or dry yellow coating and rapid pulse

REPORT ON SUSPECTED ADVERSE DRUG REACTIONS NATIONAL CENTRE FOR ADVERSE DRUG REACTIONS MONITORING (Please report all suspected drug reactions including those for vaccines and traditional medicines. Do not hesitate to report if some details are not known. Identities of Reporter, Patient and Institution will remain Confidential.) REPORT No (for official use only) A. PATIENT INFORMATION Initials or RVN only Sex Wt(kg) Ethnic Group Hospital/Clinic 12493 73 MALLE Jawa B. ADVERSE REACTION DESCRIPTION ic hemotroriza i month gartice intesting bired was 4) spigastne prin not haematuria Stock Sinck Time to onset of reaction (houndays): I would Date of reaction : 18-8-2007 Reaction subsided after stopping drug / reducing dose No Unknown Reaction reappeared after reintroducing drug-Yes No Not applicable Extent of reaction : Moderato Severe Treatment of adverse reaction Supertal relief and IV rentratine some tals Outcome: Recovered Not yet recovered Unknown Fatal-Date of death : Drug Reaction Relationship: Certain Probable Possible Untikely Unclassifiable Suspected drug # all Manufacturor Therapy Dates Indication other ungs used Reg. No. & Batch No. NSAID Joint Pain iscrease strength Traditional medicines of the body Mark "" for suspected drugter and please use trade names where possible D. RELEVANT INVESTIGATIONS/ E. RELEVANT HISTORY (e.g. hepatic/renal LABORATORY DATA dysfunction, allergies, etc.) Anemia REPORTER Signature Date 21.9 2007 Tel. No: If you would like further information about other reports associated with the suspected drug, please lick here. Submission of a report does not constitute an admission that medical personnel or the products caused or contributed to the reaction. Thank you for reporting.

Suspected Drug: Traditional Medicine

Local Report: Whitening Cream

- Information on product used and where it was purchased was provided
- Sample taken for testing and was found to contain 25% hydroquinone
- Actions taken:
 - GMP audit done of manufacturing premise
 - Found gross violation of GMP principles
 - Manufacturer instructed to shut down
 - Total product recall
 - Decision made not to allow use of hydroquinone in Over-The-Counter products



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Number of applications (payment made)

