

A brief history of the British Pharmacological Society

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The article traces the history of the BPS since its inception in 1931 until the present day. Details are given about the size and nature of the membership and how the governance of the Society has changed during the last 75 years. The emergence of the Clinical Section from within the main Society and the growth of the Society's publications are described.

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Abbreviations: ASPET, American Society for Pharmacology and Experimental Therapeutics; *BJCP*, *British Journal of Clinical Pharmacology*; *BJP*, *British Journal of Pharmacology*; BMA, British Medical Association; BPS, British Pharmacological Society; CPS, Clinical Pharmacology Section; EPHAR, Federation of European Pharmacological Societies; FBPharmacolS, Fellow of the British Pharmacological Society; IUPHAR, International Union of Pharmacology; *JPET*, *Journal of Pharmacology and Experimental Therapeutics*

The early days

While medicines derived from plant sources have been used since prehistoric times, the modern investigation of drug action is a relatively recent activity and had its origins in Germany. Oswald Schmiedeberg (1838–1921) ran an internationally renowned school at his Institute in Strasbourg attracting students from all over the world (Leake, 1975). J.J. Abel (1857–1938) was responsible for introducing the German tradition in pharmacology to the U.S.A. Abel had spent 7 years in Europe studying medical science, including a period with Schmiedeberg in Strasbourg, and it was upon the latter's recommendation that Abel took up the chair of *Materia Medica and Therapeutics* at the University of Michigan in 1891, moving on to Johns Hopkins Medical School in 1893 as the first Professor of Pharmacology, retiring in 1932. Today's pharmacologists may be unfamiliar with Abel, but will, nevertheless, be aware of some of his activities. He was the sole founder and first Chief Editor of the *Journal of Pharmacology and Experimental Therapeutics* (1909, *JPET*), just after the formation of the American Society for Pharmacology and Experimental Therapeutics (ASPET) in late 1908, Abel becoming its first President. The editorial board of *JPET* was initially entirely American and meanwhile British pharmacologists were finding it harder to publish pharmacological studies in either medical or physiological journals, as J.N. Langley (1852–1925), the then editor of the *Journal of Physiology*, 'was showing a steadily increasing reluctance to accept papers which could be regarded as pharmacological' (Dale, 1946). A.R. Cushny (1854–1936), a Scotsman, who had also spent time in Schmiedeberg's laboratory and had succeeded Abel in Michigan, was invited to become, with Abel, Joint Editor in Chief of *JPET* in 1912, along with several new British editors. A notice appeared in *JPET* from the publishers stating by this arrangement 'the ablest representatives of pharmacology in Great Britain

unite with American and Canadian colleagues in the conduct of the journal and the publishers feel confident that it will henceforth serve as a mechanism for publication of the best pharmacological researches of the English speaking countries'. Thus, *JPET* became a major vehicle for U.K. pharmacological science, a collaboration that was to remain so until 1946. The early volumes of *JPET* demonstrate the hospitality given to pharmacological studies carried out in the U.K.

The reluctance in Britain to get to grips with the emerging science of pharmacology had several causes. Trainee doctors were taught little about drugs in their medical curriculum, and even then, the course on drugs consisted largely of pharmacy, *materia medica* and prescription writing, the latter with its own brand of pidgin-Latin. As early as 1870, T.H. Huxley suggested this part of their instruction had no place in the training of doctors and should be removed from the curriculum. Physicians were mainly responsible for teaching the curriculum during the clinical years and so there was little background of pharmacology in the preclinical courses, alongside the pre-eminent subjects, such as anatomy, physiology, pathology and bacteriology. Further, much of what passed as investigations of drug action consisted of studies made with plant extracts, largely of unknown composition and containing a multitude of ingredients, only some of which were active. This was in spite of the arguments urged by Francois Magendie (1783–1855) that the precise actions of drugs could only be unravelled using pure materials, such as in his classic study of strychnine published in his *Formulaire*, in 1821. Thus, there was a view that therapeutics was more of an art than a science, and that laboratory investigations of drugs had little to offer. This being so, there was a corresponding lack of suitable posts within universities with medical schools that might act as nuclei from which academic pharmacology might grow. There were a few chairs of *Materia Medica and Therapeutics* in Scottish schools, of which Edinburgh was

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Figure 1 The three founders of the British Pharmacological Society. Walter E. Dixon (1871–1931) FRS (a), J.A. Gunn (1882–1958) (b) and Sir Henry Hallett Dale (1875–1968) OM, FRS (c) (a, © The Royal Society; c, © Godfrey Argent).

the most active, but none in England. A significant change occurred in 1905 with the creation of a chair in pharmacology at University College London, to which Cushny was attracted back to England. There was a chair of *Materia Medica* and Pharmacology at Kings College London, but this was only a part-time post occupied by W.E. Dixon (1871–1931), who simply travelled to London to give lectures, returning home to Cambridge where he held a lectureship in Pharmacology. Dixon was an extraordinary man who, in 1907, published experiments suggesting the action of the vagus nerve upon the heart was due to the release of a chemical with actions like muscarine, anticipating the spectacular results of Otto Loewi in 1921. He gave up his position at Kings when promoted to Reader in Pharmacology in Cambridge in 1919 (Cuthbert, 2001). The dominant figure in the early 20th century among British pharmacologists was H.H. Dale (1875–1968) who, in 1904, accepted a position at the Wellcome Physiological Research Laboratories where he began to study substances found in ergot, the fungal growth that can ruin rye crops. Ergot contained a cornucopia of active materials that sent Dale along the tracks of his two abiding interests, neurotransmission and role of histamine in allergic reactions, culminating in the award of the Nobel Prize in 1936. Another who cannot be omitted from this early history is J.A. Gunn (1882–1958). An Orcadian, trained in medicine in Edinburgh and who stayed on as an assistant in *Materia Medica* before going to Oxford in 1912 as successively Reader and then the first Professor of Pharmacology, until 1937. It was the initiative of these three, Dixon, Dale and Gunn (Figure 1), that resulted in the formation of the British Pharmacological Society.

In June 1931, a letter was sent to around 30 persons responsible for teaching pharmacology or institutions of pharmacological research within the U.K. It was suggested that an annual meeting might be useful for pharmacologists where research findings could be presented and discussed, as well as matters concerning teaching and publication. The proposal was to hold a meeting at Wadham College in Oxford on Friday, July 3rd, 1931, ahead of the Physiological Society Meeting, where the formation of a Pharmacological Club might be considered. Dinner on Friday night, bed and breakfast and lunch on Saturday was to cost around 12 shillings and sixpence (63p). The letter was signed by Dale, Dixon and Gunn. In all, 19 persons attended the dinner at Wadham and decided to form a Society (rather than a club) and to hold a single meeting each year. They were joined by two others on the Saturday morning and seven others sent apologies for absence. Dale, Dixon and Gunn were appointed as the first committee and asked to draft a constitution. All those attending the organisational meeting or had sent apologies were considered to be the Original Members of the Society. Precirculation of brief accounts of the material to be presented at meetings was proposed and initially, at least, women and clinicians were to be excluded. On Saturday morning, following the dinner at Wadham, the first formal meeting of the Society was held in the Department of Pharmacology at Oxford, where five papers and one demonstration were presented. The papers were on cocaine (J.H. Burn), harmine (J.A. Gunn), local anaesthetics (A.D. Macdonald), ergotism (E. Mellanby) and pituitary extract (A.C. White). The demonstration displayed a new type of frog lever for recording muscle action (J. Trevan).

The way our Society was formed no doubt influenced the nature of the way it evolved. The close early associations with the Physiological Society and the continuing influence of distinguished scientists, such as Henry Dale, made it inevitable that the Society was to bear the stamp of physiological pharmacology for much of the early years. The exclusion of women did not last long; at the second meeting in 1932, held at University College London, a demonstration was given by Mary Pickford, the first woman to be elected as a member in 1935, and quickly followed by Edith Bulbring in 1936 and Marthe Vogt in 1937 (Figure 2). However, a quaint rule with regard to women members persisted until 1975. This was that female members were requested to announce their first names on precirculated abstracts and on the meetings' programmes. At the BPS meeting in Cambridge in 1975, the chairman innocently asked a woman member, after she had delivered a paper on L-Dopa, for her first name for the published record. Dr Dolphin replied it was Annette, but she felt it unnecessary to provide this information, with which the audience was entirely in agreement. Subsequently, the requirement for women members to give their first name was dropped, although the Meetings Secretary noted his minutes would need to report that a paper on L-Dopa was given by a dolphin.

In writing this account of the origins of the BPS, I have depended heavily on the excellent short history of the Society written by W.F. Bynum (1981) to celebrate the Society's 50th Anniversary. His account also contains thumbnail sketches of many of the original members of the Society. Interested readers will be well rewarded by seeking them out.



Figure 2 Mary Pickford FRS (1902–2002; a) was elected in 1935, followed by Edith Bulbring FRS (1903–1990; b) in 1936 and Marthe Vogt FRS (1903–2003; c) in 1937 (a, b, c, © Godfrey Argent).

Meetings of the BPS

From 1931 to 1939, there was one meeting of the Society each year, mainly in Oxford or Cambridge, with a single meeting at University College London and one in Edinburgh. From 1940 until 1942, there were no meetings, coincident with the early years of World War 2. In 1943, there was a meeting at University College at its wartime premises in Leatherhead in Surrey, but no meeting in 1944. In 1945, the meeting place for the Society returned to Oxford, but there were also two business meetings in London and Cambridge. These extra meetings indicate the escalation of activity related mainly to the launch of the Society's Journal in 1946. From 1946 to 1968, the Society met regularly, twice a year in January and July, with an occasional third meeting inserted into the programme. It was also during this period that joint meetings with other European pharmacological societies were established. For example, with the Scandinavian Society in Copenhagen in 1960, the German Society in Cambridge in 1967 and the Italian Society in Florence in 1968. Since 1968, there have been four meetings of the BPS each year, reduced to three in the years that the international pharmacological community gathered at the International Union of Pharmacology (IUPHAR) meetings.

BPS meetings have, by and large, remained general meetings in which any aspect of pharmacology was presented as a paper or a demonstration, although the latter are now rather rare. In the early days, there was a single session throughout the meeting which all attended. As research in pharmacology escalated both in industry and academe, there was too much information to be conveyed in a 2–3 day meeting and parallel sessions were introduced, together with poster sessions. The

early strictures against clinicians were soon abandoned, especially as the evolution of clinical pharmacology as a distinct discipline took place, and sessions devoted to clinical pharmacology were introduced (*vide infra*). Every centre endeavoured to put on a larger, more spectacular meeting than the preceding ones, with the introduction of symposia, laboratory visits and the like. In recent years, a number of factors have operated to curtail the enthusiasm for bigger and bigger meetings. First, university authorities and other organisations have seen meetings as an opportunity to charge increasing fees for the use of facilities and the employment of technical staff. Secondly, there are now so many specialist topic meetings with invited speakers that are alternative diversions for those who find the generalist approach is less rewarding. Indeed, the BPS has introduced one designated meeting each year in place of a generalist meeting. Nevertheless, BPS meetings remain a vibrant meeting ground at which pharmacologists can interact to exchange ideas and refresh their enthusiasms.

The Clinical Section

In 1969, a group of clinical pharmacologists (C.T. Dollery, D.R. Laurence, B.N.C. Pritchard, R.G. Shanks, J.R. Trounce, P. Turner and D.W. Vere) presented a paper to the BPS Committee proposing the formation of Clinical Section. The proposal was accepted in principle and a subcommittee (R.S. Stacey, J.R. Vane, B.N.C. Pritchard and R.G. Shanks) was set up to consider the implications and report back to the Committee. Agreement was reached rapidly and the first meeting of the Clinical Section (CPS) was held at the BPS, meeting, 2–4 April 1970 in London, with C.T. Dollery as chairman of the Clinical Section. The arrangements were that in two of the four yearly meetings of the BPS, there should be a session devoted entirely to Clinical Pharmacology. Members of the CPS had to be members of the BPS and, further, BPS members could attend CPS sessions. CPS had its own sectional committee that reported to the main BPS committee.

The Society's Journals

An agenda item at the organisational meeting of the BPS in 1931 was publication of pharmacological research. Through the generosity of the editorial board of *JPET*, British pharmacologists had enjoyed a special relationship with their American counterparts. The 1930s was a time in which pharmacology had risen to major rank world-wide among the scientific disciplines related to experimental medicine, but in Europe there were other concerns that were to take priority until the mid-1940s. The war itself no doubt accelerated the need for pharmacological research, for example, protecting troops from tropical diseases such as malaria, for preventing sea sickness in those facing battle as they stepped ashore and for protection of the population against possible chemical attack. These factors made it necessary to contemplate publication of a new journal devoted to pharmacological science. The British Medical Association agreed to sponsor a new journal following negotiations with the BPS Committee, to be called the *British Journal of Pharmacology and Chemotherapy*. The content of the Journal was left entirely



Figure 3 A.J. Clark (1885–1941) FRS (a) became a member of the governing body of the British Pharmacological Society in 1932, following the untimely death of W.E. Dixon, one of the original founding members. Sir John H. Gaddum (1900–1965) FRS (b) was the first chairman of the Editorial Board of the '*British Journal of Pharmacology and Chemotherapy*' (b, © Godfrey Argent).

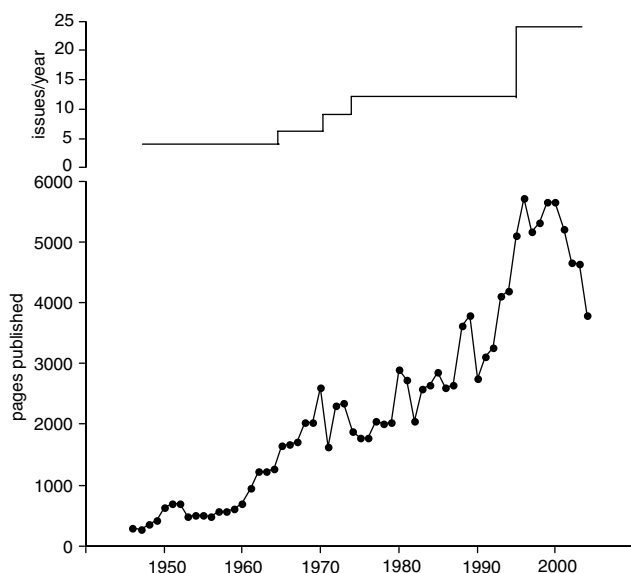


Figure 4 Total numbers of pages published in the *British Journal of Pharmacology* since its inception until the present day, together with the number of journal issues each year. The numbers of pages do not include the abstracts of communications and poster presentations given at meetings of the Society.

to the Editorial Board chaired by J.H. Gaddum (Figure 3), while technical matters concerning production, distribution and financial matters were entirely in the hands of the BMA. There were to be four issues each year, the first appearing the Spring of 1946. The new journal was introduced in a foreword by Sir Henry Dale, who briefly sketched the need for a new journal referring to the rejection of his own paper by the *Journal of Physiology* because of its too pharmacological content.

The first issues of *BJP* had a simple buff-coloured cover carrying the Journal name, the names of members of the editorial board and the name of the publisher. The total pagination for 1946 was 299 pages. How the pagination has changed since that time can be seen in Figure 4, together with the number of issues each year.

Today's pharmacologists with their computers with statistical and graphic packages would be amused at the early deliberations of the editorial board discussing the instructions to be provided for authors. Line drawings were to be in Indian ink on Bristol board at twice their intended size. Graphs were to be drawn in Indian ink on blue-lined or plain paper. Lettering on kymograph records needed to be large enough to withstand photographic reproduction!

There have been many changes in the *BJP* since that time. A subtle change occurred in February 1968 that the casual reader might well miss since the overall appearance of the journal did not change. However, closer inspection of the small print reveals that the publisher had changed from the BMA to Macmillans Ltd. While the BMA had served the Society well for 22 years, none of the profits from the Journal accrued to the Society. The arrangement with Macmillan was one of profit sharing, producing a second income stream alongside membership fees. Naturally, Macmillan wanted to put its own stamp on the Journal, so later in the same year, in September, the cover changed to blue and white simultaneously with a change in title to the *British Journal of Pharmacology*, missing out Chemotherapy. It was felt that there were many other specialities developing at the time and that to pick out chemotherapy was no longer necessary. At the Society's AGM, there was also discussion as to the desirability of retaining British in the title, but its continued use was defended strongly. In retrospect, that may have been a mistake. There is now a plethora of relatively recent nonspecialist pharmacological journals, but few have the prominence of *JPET* and *BJP*, but, alas, the title of *The Journal of Pharmacology* is no longer available. In 1974, the cover design was again changed to what became known as the 'pill' design with the title contained within a circle on a predominantly blue cover, a design that was to remain until the end of the century. From 1981 onwards, approved abstracts for oral and poster communications from BPS meetings were published as Journal supplements. They are a considerable addition to the size of the output of the *BJP*, but have not been included in the pagination statistics given in Figure 4. During the 1970s and 1980s, the number of pages published showed a peak-and-trough pattern and the reason for this is complex. The increasing success of the Journal for the publication of approved papers in pharmacology led to increasing delays in publication times. This, in turn, had a negative feedback effect on submission rates. To deal with this, a variable pagination contract was devised with Macmillan. Sometimes extra issues were produced and, at other times, the size of the issue was dependent upon the number of titles waiting to be published, keeping time to publication within acceptable limits. From 1986, the requirement that authors' names had to be in alphabetical order was dropped, leading to a further surge in submission rate. In the same year, a special issue was produced, containing seminal papers from the past, to celebrate the Journal's 40th year. In 1990, the Journal changed to a larger format and from 1995, there were 24 issues per year. Since 2000, total pagination shows a decline due to a more rigorous reviewing policy with a consequent reduction in the acceptance rate. More colour was introduced into the cover design in 1998, but essentially the pill design was retained until 2002, when illustrations first appeared.

Soon after the CPS was formed in 1970, the CPS committee began to discuss publication of a sister journal. The *British*

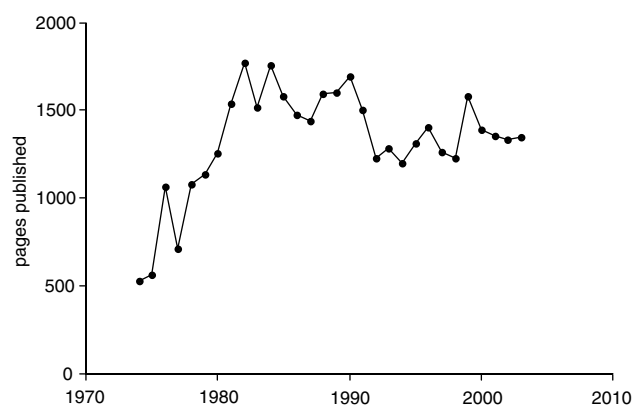


Figure 5 Total numbers of pages published in the *British Journal of Clinical Pharmacology* since its inception until the present. The numbers of pages do not include the abstracts of communications and poster presentations given at meetings of the Society or the symposia supplements published in the Journal.

Journal of Clinical Pharmacology first appeared in 1972, with G.M. Wilson as the first chairman of the editorial board and with P. Turner as secretary. The format of *BJCP* was similar to *BJP* with the pill design, except *BJCP* was predominantly green. Both journals were initially published by Macmillan, but *BJCP* transferred to Blackwell in 1982 and was followed by change to a larger format in 1991. Figure 5 shows the pagination published by *BJCP* since its inception and, as with the data given in Figure 4, the data does not include the abstracts from CPS meetings or symposia that were published as supplements to *BJCP*.

The value of these two sister journals to the BPS cannot be overestimated. Not only are they both prestigious international journals but they have generated profits for the Society without which many of the Society's activities would not be possible.

Membership of the Society

The original members of the Society numbered 38. No doubt all of these original members would be astonished to see how our Society has grown, both in size and the variety of activities in which the Society is involved. In 1939, there was a proposal that the number of members of the Society should be limited to 50 persons, but the proposal was dropped at the Leatherhead meeting in 1943. By the 25th anniversary in 1956, membership had reached 207, but by now there was two sorts of members, ordinary and honorary, the latter category being an honour awarded to particularly distinguished members, some of whom had retired.

Membership of the Society required a candidate to be actively involved in pharmacological research and have published work in the discipline and preferably had communicated new data at one of the Society's meetings. However, in 1967, a more liberal policy was adopted, in the hope of attracting persons who were not strictly pharmacologists, but those from the enabling technologies of molecular biology, methodologies destined to become of increasing importance to pharmacological science. Potential members were scrutinised by a membership committee and recommendations put before

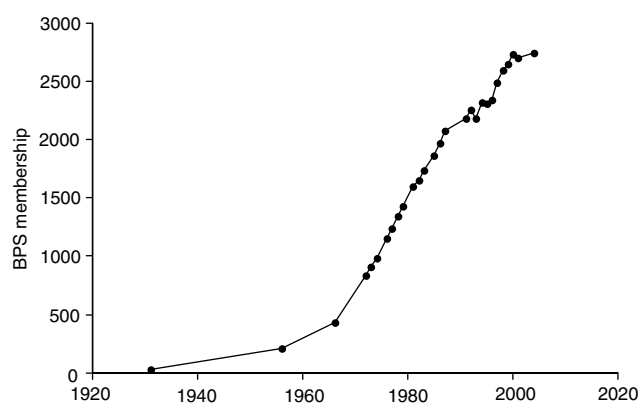


Figure 6 Membership of the British Pharmacological Society (all classes) since its formation until the present day.

the Society's AGM for approval. In 1958, another class of member, that of Associate member, was introduced. Overseas pharmacologists who only rarely were able to attend BPS meetings were obvious candidates for this category, but as the number of British pharmacologists who were working overseas increased, the distinction between Ordinary and Associate membership became unclear. In 1973, the Society combined Associate membership into a single class with Ordinary members. Inevitably, there were ordinary members who reached retiring age but remained interested in the discipline, so the category of Retired Ordinary members was introduced. In 1996, student membership was introduced, designed for postgraduate students reading for a doctorate in pharmacology, and extended to include a few undergraduate student members, in 1999, who were reading honours courses in the subject. Both postgraduate and student members are now described as Associate members, resurrecting a previously used title. Their membership is only of limited tenure and does not carry any voting power. A further category of Associate membership was introduced recently for persons interested in pharmacology but not fulfilling the criteria for Ordinary membership. In 2004, the BPS Council introduced the title of Fellow of the British Pharmacological Society (FBPharmacolS) for senior Ordinary members who had significantly contributed to the Society's activities, with the consequent change in the designation of Honorary members to Honorary Fellows. Thus, in 2004 the membership of the Society consisted of a total of 2743 members comprising 37 Honorary Fellows, 114 Fellows, 1802 Ordinary members, 293 Retired Ordinary members, 16 Associate members, 388 Postgraduate Associate members and 93 Graduate Associate members. The changes in the total membership of the Society since its inception is given in Figure 6.

Society Committees and Governance

While the Society remained small the need for an elaborate or extensive organisation was unnecessary. After the formation of the Society in 1931, the three founders, Dale, Dixon and Gunn were asked to draw up a constitution. They appointed Dr M.H. MacKeith to serve both as Secretary and Treasurer of the Society. It is insightful to consider what were the concerns of the Society when the Committee first met on 27th July 1932

on the occasion of the Society's second meeting, especially to compare this with the level and complexity of the organisation that obtains 75 years later. Unfortunately, Dixon had died before the meeting and was replaced by A.J. Clark (Figure 3). These three, Dale, Gunn and Clark together with the Secretary/Treasurer, MacKeith, were the governing body. It was decided forthwith that the Committee would be chaired by whosoever was the head of the host department where the meeting was being held, an arrangement that was retained until 1953. The annual subscription rate for members was set at 5 shillings (25P) without precluding future revision. It was decided that proposals for new members had to be supported by at least two existing members and the papers submitted at least 14 days before the annual meeting of the Society. Election was to be by ballot. A strict rule preventing papers being read to the Society was introduced. It was also decided that one member of the committee would be replaced each year to provide adequate turnover with Dale to go in 1933, Gunn in 1934 and Clark in 1935.

The situation remained more or less unchanged until 1947 when the membership of the Society reached around 80 members when it was thought necessary to have a separate Secretary, Treasurer and Foreign Secretary, and G. Brownlee, W.A. Bain and J.H. Burn were respectively appointed to these three offices.

There are several comments that should be made about this period. Although the membership remained small, the meetings of the Society included numerous guests whose *bona fides* were guaranteed by members who had introduced them. Membership of the Society remained rather special and it was a signal honour to be elected into full membership. Curiously, the Society remained without a head, and while the officers had specific duties, there was no person who could speak with authority for the Society. As we have seen Committee meetings were generally held during Society meetings and chaired by the head of the hosting department. These meetings went largely unrecorded. The situation can be contrasted with that of the Editorial Board of the *BJP*, formed in 1945, with its Chairman and Secretary.

The position changed in 1953 when the BPS adopted a formally approved Committee that reported to the members. Its first Chairman was J.H. Burn, who together with the *ex officio* Secretary, Treasurer and Foreign Secretary plus ordinary committee members ran the Society's affairs. The consequence of this arrangement was that the hub of the Society's administration would circulate around the Departments of Pharmacology that provided the current chairman. Thus, in the period 1953–1975 the hub, generally but not exclusively in a pharmacology department, was in Oxford, Edinburgh, Leeds, London, Cambridge, Oxford, Nuffield Institute for Medical Research, Cambridge and Glasgow. These arrangements no doubt had hidden costs absorbed by the secretariat of the host department, a situation no longer sustainable as the financial situation in universities deteriorated.

A further important change occurred in 1968. By this time, the popularity of BPS meetings had grown considerably and the arrangements needed for meetings grew in complexity. The office of Meetings Secretary was introduced, with an assured succession to the position of Secretary, who forthwith would be called the General Secretary. The Meetings Secretary would have an *ex officio* position on the Committee. This required

a considerable undertaking by individuals who would serve in front-line posts for 6 years. J.R. Vane was the first Meetings Secretary.

The situation remained stable for the next 25 years until 1994 when the Society became a company limited by guarantee, issuing a Memorandum and Articles of Association. The Articles of Association have been modified from time to time since then, the last in 1998. Clearly big changes were afoot as the Society became a bigger and bigger institution. Both the Society's Journals had done rather well and generated profits that accrued to the Society. Careful investment by a succession of Treasurers had made the Society not exactly wealthy, but certainly well-heeled. It was also at this time that the Society first became an employer and appointed an Executive Secretary, Sarah-Jane Stagg, in 1993, to deal with the running of the Society from its Head Office. The latter was situated initially in space within the William Harvey Institute, but in 1994 the Society purchased a long lease on a building in City Road in London, as offices and meeting rooms for the Society. This was a major change in the way the Society operated. No longer would the hub of Society activity rotate around the departments in universities where the General Secretary resided, also the Society's officers would need to travel to London for meetings. However, this disadvantage was far outweighed by the advantage of having a central secretariat that could field enquiries coming into the Society in the most efficient way. There was sufficient space in the City Road office that the Editorial Office of the *BJP* is also housed there.

Discussions in the years 1994–1998 about the governance of the Society culminated in major changes in the way in which the Society was to be run in the future. Essentially, the Society's business is managed by a Council, which in turn receives advice from a number of subcommittees such as those for finance, membership, prizes and awards, bursaries, meetings etc. The title of General Secretary was abolished and replaced by President. This puts the BPS on a par with most other pharmacological societies world-wide who never quite understood that British pharmacology was represented by either the General Secretary or Committee Chairman. Council consists of the honorary officers plus eight nonofficer members, elected by the membership, plus a number of *ex-officio* members, such as the chairs of the two Editorial Boards for the Society's Journals. There are now about 200 persons who in one way or another serve on a committee or editorial board and give freely of their time to the benefit of the Society, plus a small group of dedicated staff at the London office who make it run smoothly.

Relations with outside bodies

The IUPHAR gained separate existence from the International Union of Physiological Sciences in 1965, but it was not until 1972 that independent membership of the International Council of Scientific Unions was achieved. Currently, there are 54 national societies affiliated to IUPHAR. The 9th IUPHAR Congress was hosted by the BPS and held at the Barbican Centre in London from 29th July to 3rd August 1984. The conference was attended by 4369 delegates from 68 countries, accompanied 360 social members. The scientific programme was large with 21 Special Lectures, 30 Symposia,

660 Short Communications, 2073 Poster presentations and four Debates.

The Federation of European Pharmacological Societies (EPHAR) was founded at the 11th IUPHAR Congress in 1990 in Amsterdam, by a steering committee led by B. Uvnas. He explained that the gestation of EPHAR had been a long one, he suggested because the big national societies felt self-sufficient and did not share the smaller societies' need for international contact. This was certainly the attitude of the BPS in the 1970s (Cuthbert, 2005). The BPS Committee were still discussing this in 1982; a Committee minute of 13th December records 'that joint meetings with European Societies as practised by the BPS was fine. There was concern that regional meetings would be too large for domestic servicing. J.R. Vane (then Foreign Secretary) was asked to adopt a neutral stance on behalf of the Committee in regard to the European Federation'. R. Paoletti, from Italy, had been a major proponent of the European idea for many years and it was on his initiative that representatives of 18 European pharmacological societies met in Milan in 1988, culminating in the formation of EPHAR in 1990. The BPS will host the fifth EPHAR Congress in Manchester in 2008.

The BPS has representatives on a number of other organisations, including the Research Defence Society, European Association for Clinical Pharmacology and Therapeutics and the Biosciences Federation.

On the lighter side

A succession of Secretaries and Meetings Secretaries over the years have been responsible for keeping records not only of what happened in committee meetings but also in the scientific sessions themselves. However, with published programmes and printed abstracts, there was little to report of the scientific proceedings. Some early Secretaries took it upon themselves to increase the content of personal comment and observation in their minutes. These minutes became known as the Social Minutes of the Society and are read out at the official dinner of the following meeting of the Society. The trend was started by W.L.M. Perry and continued by J.D.P. Graham, J.R. Vane and J.F. Mitchell by which time it had become *de rigeur* to

write amusing social minutes for the next Society dinner. When Walter Perry gave up his position of Secretary in 1961, he said "our greatest strength is in the friendliness and informality of our meetings and in a refusal to take ourselves too seriously". A.R. Green who became Secretary in 1986 published excerpts from the BPS Social Minutes (1959–1991) to celebrate the 150th BPS meeting (Green, 1992). They are well worth a read. Two of my favourite anecdotes from BPS meetings not included in the Green catalogue are given here to provide the flavour.

J.H. Gaddum had given a paper on the detection and assay of substance P. In response to a query from the floor as to the specificity of his assay, Gaddum replied his assay measured "the P, the whole P and nothing but the P", leaving the questioner to work it out for himself. On another occasion W.D.M. Paton introduced the concept of the rate theory of drug action where interaction with the receptor released a quantum of pharmacological response, like striking a piano key. He contrasted this to the occupation theory where the pharmacological effect continued as long as the receptor was occupied, as with an organ key. After a vigorous discussion, J.R. Vane asked the speaker if henceforth we should be using piano baths rather than organ baths.

A final remark

In the last few years, several departments of pharmacology in the U.K. have disappeared, at least in name, to become a part of large biosciences faculties (see also Vallance & Smart, this issue). At the same time, bioscientists who would not regard themselves as pharmacologists have research programmes directed at discovering new chemical entities that may be useful in some or another disease state. However, these discoveries are not new drugs but merely possible candidates. The whole panoply of pharmacological know-how will need to be applied to these before their potential usefulness is known. How will this change the organisation of pharmacology both in the U.K. and world-wide? Some deep thinking and careful planning within the BPS Council will be needed before our Centennial celebrations are reached.

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