

MacNeal, W. J.

Tetrachrome blood stain*Proc. New York Path. Soc.*, 22 (1922), 43;through *J. A. Med. Assoc.*, 79 (1923), 664

Rona, P., and Kleinmann, H.

Nephelometric determination of small amounts of proteins*Biochem. Ztschr.*, 140 (1923), 461; through*J. Soc. Chem. Ind.*, 42 (1923), 1092A

AMERICAN PHARMACY OVERLOOKING THE PSYCHOLOGICAL MOMENT.*

BY FRANK H. FREERICKS.

In the general advance and progress of medicine and pharmacy and of the country as a whole, the time has come when the physician should cease to be a drug dispenser, and when the retail pharmacist should come into his own. The higher, constantly increasing requirements governing the practice of pharmacy and the constantly decreasing demand for retail pharmaceutical skill are rapidly creating a condition at once unfortunate and unwarranted, unbelievable almost for a people who abhor wasteful effort.

It is not possible to reconcile the present-day requirements for engaging in retail pharmacy with conditions under which in thousands of substantial towns the there located pharmacists are never called upon to fill prescriptions. In many of the pharmacies of the larger cities the prescription department is looked upon as an unprofitable but necessary evil.

The time has come to advocate a change. The public, the physician and the pharmacist are ready for it. They may not have it legislatively, but there is every hope that it can be secured by a systematically planned campaign of education. In such a campaign of education, it is the duty and the place of the American Pharmaceutical Association to take a leading part. It cannot devote its energies to a better, more ideal task. The American retail pharmacist needs an opportunity to practice pharmacy and that opportunity must be provided, primarily, by the American Pharmaceutical Association.

Of course, there are many obstacles, some appear to be insurmountable. The task is not to be accomplished within a day, nor in a year, but with a careful analysis of preventing difficulties; with an honest effort to meet and overcome them; with a broad vision and proper determination, the time is ripe. Let us reflect for a moment upon the greatest difficulties and principal obstacles. In their relative importance I believe them to be:

- 1st.—Disinclination and inability of many physicians to write prescriptions.
- 2nd.—Incorrect method of prescription pricing.
- 3rd.—Lack of confidence on the part of the physician in the pharmacists of his vicinity.
- 4th.—The physician's desire for secrecy regarding remedies successfully used.
- 5th.—The indiscriminate refilling and copying of prescriptions.
- 6th.—Frequently, a limited knowledge of therapeutic agents on the part of the physician.

There may be other and even more important causes for the existing condition, but they do not come to my mind. None of those stated will fail to respond

* Read before Section on Commercial Interests, A. Ph. A., Asheville meeting, 1923.

to proper treatment. For the moment it is unnecessary to elaborate upon details. With a sufficiently wide conviction that a change ought to be, and can be, secured, the methods will readily be devised. There is but one thing upon which I would touch as being a condition precedent to any successful effort and upon which such successful effort is bound to be based. There must be sought and secured the coöperation of the American Medical Association, and of the State and local medical societies. There must be a complete understanding as to what shall constitute the legitimate practice of retail pharmacy. Those who would approach the medical societies, in order to have their coöperation, must evidence first of all a complete desire to remedy conditions in retail pharmacy of which the physician complains to-day. They must ask that the medical societies collaborate in working out to them a satisfactory set of voluntary regulations which are to govern the retail pharmacist in his relationship with the physician, in order that he may reasonably expect and have the physician's support. In a study of the problem, I do not by any means minimize the shortcomings of medicine, but believe that since retail pharmacy is primarily concerned, it should be willing to first discuss its own retarding influences with a view first to their removal. There is no more worthy task to which the American Pharmaceutical Association can at this time give a large share of its energy; of necessity the work must be planned along national lines, because it is of nation-wide importance, and among the pharmaceutical organizations of the country there are none which may hope to succeed in it as may the American Pharmaceutical Association.

ABSTRACT OF DISCUSSION.

Leon Monell expressed his appreciation of the paper and moved that it be referred to the Section on Education and Legislation, A. Ph. A. for further consideration. The motion was carried.

D. F. Jones was pleased with the movement to bring the retail pharmacists into closer relation with the American Pharmaceutical Association. Efforts should be made to induce more prescription writing by physicians.

F. E. Mortenson contended that the paper had a place in this Section. In Pueblo the relation between physicians and pharmacists has brought about a return to prescription writing. Confidence and coöperation are influential factors in establishing conditions which insure best service for the sick, and associations of professional men are helpful in bringing about a better understanding between them.

UNCHARTERED COMMERCIAL OUTLETS.*

BY F. W. E. STEDEM.

An unsuccessful attempt on the part of a friend of mine to purchase an old-fashioned warming plaster spread on leather resulted in his appealing to me for the article.

His comments on the retail druggists and their stock and methods of doing business were rather caustic and uncharitable. His bantering tone led me to accept his challenge and make a voyage into the domain of the retailer of drugs. Of course, nothing that we saw was really new to me for the reason that I had gone over the grounds repeatedly and was well aware of methods and conditions.

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