PROCEEDINGS OF THE LOCAL BRANCHES

"All papers presented to the Association and Branches shall become the property of the Association with the understanding that they are not to be published in any other publication prior to their publication in those of the Association, except with the consent of the Board of Directors."—Part of Chapter VI, Article VI of the By-Laws.

Article IV of Chapter VII reads: "Each local branch having not less than 50 dues-paid members of the Association, holding not less than six meetings annually with an attendance of not less than 9 members at each meeting, and the proceedings of which shall have been submitted to the JOURNAL for publication, may elect one representative to the House of Delegates."

Reports of the meetings of the Local Branches should be mailed to the Editor on the day following the meeting, if possible. Minutes should be typewritten, with wide spaces between the lines. Care should be taken to give proper names correctly, and manuscript should be signed by the reporter.

CHICAGO.

The 140th meeting of the Chicago Branch of the American Pharmaceutical Association was held at the University of Illinois School of Pharmacy building, Friday evening, Feb. 8, 1924, with President Warren in the Chair.

The topic of the evening was Cascara Sagrada.

BOTANY OF CASCARA.

In discussing the botany of Cascara Sagrada, Prof. Wm. B. Day referred to the exhaustive and excellent papers of Johnson and Hindman in the *American Journal of Pharmacy* (Volume 86, 1914) and E. N. Gathercoal in the JOURNAL OF THE AMERICAN PHARMACEUTICAL ASSOCIATION (Volume 4, 1915). The speaker undertook to present only a summary of the botany of cascara and some of the notable facts concerning its history. He called attention to the early use of the bark by the Indians of the Pacific coast and, following their lead, its employment by the Spanish settlers of California. Its introduction to American medicine came later, but the bark has met with wide demand and increasing appreciation by the medical profession and the public.

The tree was discovered by the first North American trans-continental exploring expedition under Lewis and Clark in what is now Oregon and Washington. Specimens brought back by these explorers were examined by the German botanist Pursh, then residing in Philadelphia. Pursh named the plant *Rhamnus alnifolia*, but it was subsequently found that another plant had been given this name at an earlier date, and de Candolle changed the name of the cascara plant to *Rhamnus purshiana*, in honor of the botanist who first described it.

The cascara trees, once common as far south as central California, have been exterminated in much of their original habitat and the most abundant source of the bark is on the western slope of the Cascade range of mountains in Washington, Oregon and southern British Columbia. The tree is found at sea level and up to an altitude of 2000 ft. It grows to a height of twenty to thirty feet and attains a trunk diameter of six to eight inches, though occasional specimens are met with which are as much as thirty-five to forty feet in height and with a trunk diameter of eighteen to twenty inches. A mild, moist climate is necessary for the abundant growth and large size of the tree. Fortunately it is a prolific seeder and scattered seedlings are fairly abundant in moist forests of its range and afford promise of reforestation. The trees have been gown experimentally in botanical gardens in various parts of the world but little has yet been done toward their cultivation for commercial purposes. The Department of Agriculture has suggested a method of pruning which forces the top of the trees into three or four branches and one of these branches may be cut each year and peeled, thus ensuring a continuous yield of bark. The commercial method of collecting the bark is to fell the trees, leaving a stump six or eight inches in height, and to remove the bark from the felled trunk and larger branches. Under such treatment the stumps will usually sprout and shoots will eventually be available for another supply of bark. The season for peeling and collecting the bark begins in April and closes in September. The bark, which is from one-eighth to three-eighths of an inch in thickness is peeled from the stem and branches with a short broad-bladed knife. It slips from the wood readily and is then roped into bundles and packed to the drying grounds where it is cleaned of moss and spread out in the sun to dry. In two or three days it will shrink to half its weight. After being deprived of moss the bark is spread out on tarpaulins or in racks

in the sun to dry. This takes about four days in direct sunlight. If the season is rainy, the bark is kept under cover during the curing and drying period. Slow drying yields a heavier bark. When dry, the bark is broken into small pieces, usually by means of a feed chopper, then packed into sacks holding from 50 to 100 pounds and stored in a dry place. The dried bark must be carefully kept, otherwise it will absorb moisture and deteriorate.

PHARMACOGNOSY OF CASCARA.

Prof. E. N. Gathercoal next presented the Pharmacognosy of Cascara Sagrada using many lantern slides in illustration of the structure of this and other Rhamnus barks. He said in part:

"The Rhamnus barks that have been utilized in medicine fall into two groups, the one headed by Frangula, the Buckthorn bark of Europe, and the other group headed by Cascara Sagrada, the bark of *Rhamnus purshiana* native to the Pacific coast of North America. In the first group, in addition to frangula bark we find barks derived from *Rhamnus catharticus*, *R. tinctorius* and *R. croceus*. In the Cascara group are placed the barks of *R. californica*, *R. caroliniana*, and *R. wightii* of India. The barks of the first group are relatively thin fibrous fracture and tough stringy bast bundles and are free from stone cells. The second group of barks are somewhat thicker, are but sligitly fibrous in fracture and possess many stone cells. All eight of the barks mentioned possess some features in common. They all occur in quills and curved pieces and lenticels occur on the younger barks. The color of the inner surface of the bark darkens with age at first being a cream or light brown but attaining in some instances a dark seal-brown or almost black color. In connection with the structure of cascara bark it is of interest to note that in the bark adjacent to the buds large mucilage sacs of schizogenic origin are found. The stone cells of the bark begin to develop in the third or fourth month of growth and the clusters or bunches of these cells are developed from adjacent parenchyma cells. The bundles of bast fibers with the surrounding crystal fibers are developed only from cambium, hence occur only in the inner bark. In the fiber cells that contain the calcium oxalate prisms the initiation and development of partition walls of cellulose which later become lignified can be nicely traced. Likewise long rows of calcium oxalate rosettes are developed from single elongated parenchyma cells in which cross walls form as the crystals begin to take shape.

The absence or presence of stone cells makes it very easy to differentiate between Buckthorn Bark and Cascara Bark, the only two Rhamnus barks which occur to any extent in the American market. Cascara has not been extensively adulterated during its commercial history. At one time a good deal of attention was paid to the presence of *Rhamnus californica* bark in commercial cascara bark and an effort was made to distinguish between the two histologically. The structure of the two barks is very similar in nearly all respects, but in the dried *californica* bark, the cambial end of the medullary rays are shrunken, causing a scalloped appearance of the cambial edge of the bark when viewed in transverse section. In recent years an adulteration of cascara with a wild cherry bark probably from *Prunus padus* of Europe has been noted. Just how it came about that this bark was admixed with cascara has never been made known.

The most interesting problem in connection with the pharmacognosy of cascara bark at the present moment is the differentiation of fresh and "aged" bark. It is perhaps an undecided question as to whether cascara bark really requires aging but as long as the consensus of opinion seems to be that aging is desirable it would be of interest to find some means whereby relatively fresh and properly aged bark could be distinguished from each other.

CHEMISTRY OF CASCARA.

Mr. L. E. Warren in a very able review of the Chemistry of Cascara and other anthraquinone drugs concluded with the statement that while years ago when he first learned of the constituents of this bark his teachers presented the subject with the calm assurance that all was known regarding the matter, but now the subject is so full of interrogation points that no one can to-day assert with assurance a statement of the exact chemical constituents of this drug. Mr. Warren has kindly abstracted his paper and presents it as follows:

Cascara belongs to the drugs known as the "anthracene purgatives," the designation indicating that the active constituents are derivatives of the hydrocarbon, anthracene. This class of drugs includes one or more species of aloe, morinda, rhamnus, rhubarb, rumex, senna, xanthoxylum and perhaps others. Members of this group of plants are found in all lands, mostly in the temperate or semi-tropical

climates. Although these drugs have been subjected to a vast amount of research by some of the most skilful plant chemists their chemistry is still obscure. It appears to be accepted that the active constituents of this group of drugs for the most part are derivatives of hydroxymethyl anthraquinone. More work has been done on rhubarb and aloe than on the other members of the group. Consequently our knowledge of the anthraquinone purgatives has been mostly obtained from these drugs rather than from cascara. The chief constituents isolated from cascara are compounds containing emodin, 1–4–6 trihydroxy 8-methyl anthraquinone, chrysophanol, 1–4 dihydroxy 8-methyl anthraquinone and emodin monomethyl ether, 1–4 dihydroxy 6-methoxy 8-methyl anthraquinone. The position of the methyl group is not known with certainty. Its presence appears to have but little pharmacologic significance. Emodin and its compounds are present in much greater proportions in cascara than are the other anthraquinones. Most of the emodin is combined. Free emodin is a relatively weak laxative. Numerous synthethic isomers and derivatives of emodin have been prepared but they have not been very successful as remedies. In the blood stream they act as renal irritants and do not produce catharsis. The exact composition of the anthraquinone complexes is not known but they are believed to be glucosides and pentasides since, on hydrolysis with mineral acids, they yield glucose or pentose and anthraquinone compounds. They are believed to produce catharsis by the slow hydrolysis of the anthraquinone complex through the action of a ferment in the lower bowel. It is believed by some that this ferment is activated by the presence of mineral salts such as calcium acid phosphate. It is known that the action of emodin bearing drugs is enhanced if they are administered with certain ferments, such as emulsin. It has recently been found by Casparis and Godelin (*Schweiz. Ap. Ztg.*, 61, 389, 1923) that rhubarb extracts if prepared in a vacuum apparatus are nearly four times as effective when tested on white mice as similar extracts prepared in the usual way. This would suggest that the action of a ferment is necessary in the pharmacologic action of the anthraquinone purgatives, such a ferment being preserved by the low temperature of the vacuum, but killed or inactivated by the high temperature of ordinary evaporations. It is admitted that no chemical assay of the anthraquinone drugs is entirely successful. The most satisfactory method is that perfected by Daels (*Bull. acad. roy. med. Belg.* (4), 27, 350, 1913). It consists in extracting the anthraquinones from the drug with chloroform both before and after acid hydrolysis. The total anthraquinones are weighed and the results calculated as "free" and "combined" anthraquinones. In the case of rhubarb the Daels values have been found to parallel the physiologic assay moderately well if the physiologic test be made on extracts prepared by the vacuum method.

THERAPEUTICS OF CASCARA.

The concluding address in this symposium on Cascara Sagrada was made by Dr. Bernard Fantus on the Therapeutics of the drug:

Though it was not until 1878 that this drug was introduced to the medical profession, it has gained so rapidly in fame and favor that it is now official in all the Pharmacopœias excepting the Finnish and the Portuguese, and that it is one of the most generally used in the entire drug market. A substance with such a history must have intrinsic merit. This no doubt lies in its comparative mildness of action; though, when used in the wrong case, or when not needed at all, it may produce considerable griping. McGuigan[1] found, by experiments on himself and medical students, that 1 cc. has a laxative effect and 2 to 4 cc. cause excessive evacuation with painful griping and some nausea. This does not mean that this same effect would be obtained in patients suffering from constipation. Some of these are so tolerant of cascara as to take 1 or 2 teaspoonfuls without any effect, while there are other sufferers from constipation who experience considerable griping from 1 cc. with or without obtaining bowel evacuation. The explanation for these differences is to be found in the difference in conditions responsible for constipation in various cases.

Röntgen examination of quite a number of patients suffering from gastro-intestinal painful conditions has convinced me of the fact that in the constipation accompanied by abdominal pain we generally have to deal with a condition of excessive peristalsis of the large intestine. Give such a patient cascara sagrada and he will be made still more uncomfortable, for this agent acts like a whip to the colon. It is perhaps not sufficiently well recognized that excessive and irregular peristalsis causes constipation, the bowel contracting upon its contents without pushing them onward. Ob-

[1] *Jour. A. M. A.*, February 19, 1921.

viously in those cases cascara should not be used in any dose.

It is more especially in cases of atonic constipation, in which there is a deficiency in peristaltic activity, that this drug is one of the remedies of choice, partly by reason of the relative mildness of its action and partly because it seems to increase the irritability of the bowel as an after-effect, so that it is less habit-producing than are most other cathartics. Indeed, when accompanied by proper regulation of diet and habits, cascara is probably one of the best drugs for a curative treatment of constipation. The patient is given just that dose which will produce one evacuation a day and this is continued for a week or two. Then the dose is halved, and this dose continued for another week or two, when it is again cut in half, and so on until the dose has become trifling or until the patient finds that the dose becomes insufficient. The latter class of cases requires further careful study including a Röntgenologic examination so as to fit them with a more appropriate treatment. It may incidentally be pointed out that pharmacists do not really get an insight into the treatment doctors employ. They merely see one item of it, the prescription, and are altogether too prone to think that this constitutes the doctor's cure for a certain condition, when as a matter of fact the medicine was merely an adjuvant to the really efficient treatment. Even in those cases of chronic constipation in which the dose can be progressively reduced it is not so much the cascara as the change in diet with or without change in habits that is the really important ingredient in the cure and which must be continued indefinitely in order to prevent relapse. For a person who cannot have bowel evacuation without the use of a cathartic, cascara is not as well suited as is aloe, because the latter being given in pill form is so much more convenient to use.

The bitterness of the drug is one of its chief disadvantages as well as the fact that its active principles are so delicate as to render the extract, which might be given in pill form, quite inferior in activity. The best method of overcoming the bitterness is to have the patient fill his dose into capsules just before taking it. The aromatic fluidextract of cascara is a pharmaceutic masterpiece in disguising. Unfortunately it has only $^1/_3$ or $^1/_4$ the activity of the bitter extract. Nevertheless for women and children it is the preparation of choice.

These addresses brought out much discussion in which many of the members present took part and which may be summarized as follows:

Dr. Fantus:—How did the Indians prepare cascara bark?

Prof. Gathercoal: It is understood that they made a decoction of a handful of the drug to a pot of water, the whole to be taken at one dose.

Mr. Warren: It has also been stated that the berries were used as a cathartic, especially for the children.

Mr. Becker: Regarding the dosage of cascara, 20 cc. of the aromatic fluidextract was taken recently by a person troubled with constipation and the dose was practically without effect. Two weeks later the same party under my advice took 30 to 40 minims of the same aromatic fluidextract and found that a fine cascara effect was produced. What is the reason for this?

Dr. Fantus: The drug is a tonic laxative as already stated. This particular patient may have had a spastic condition of the lower bowel present at the one time which would counteract the cathartic powers of the drug and at a later period this condition might not have been present.

Prof. Miner: Is the bitter principle destroyed by the debitterizing process with magnesium of calcium?

Mr. Warren: This is not known. The late Prof. W. M. Searby of San Francisco, and former President of the American Pharmaceutical Association, was the first one to introduce a cascara debitterized with magnesium. Possibly the treatment removes the free emodin. In addition to the process of debitterizing by the use of 2 or 3 per cent. of magnesium oxide or the use of 6 or 7 per cent. of lime a rather recent process involves the use of zinc oxide which is said to give a very satisfactory product.

In regard to the question as to whether the bitterness of the normal fluidextract had anything to do with its therapeutic value, Dr. Fantus replied that pharmacologic investigations seem to indicate that tonic properties were almost entirely absent from bitters. Possibly the therapeutic action of bitters is largely a psychological one. Does not the mental factors really do the work usually ascribed to bitters? Furthermore, most bitters are given in connection with alcohol. It is well known that alcohol benumbs fatigue, anger and sorrow which inhibit digestion. Cascara has no action in the stomach, else it would be an emetic. Its activity is largely confined to the

region of the lower bowel and here the activity appears to be due to an effort on the part of the bowel to throw off the anthraquinone poisons.

E. N. GATHERCOAL, *Secretary.*

CINCINNATI.

The February meeting of the Cincinnati Branch of the American Pharmaceutical Association was devoted to a discussion of "Medicine and Pharmacy in Ancient Egypt," by Dr. Caswell A. Mayo. The lecture was illustrated by a large number of books, manuscripts and photographs, bearing on the subject, included among which were reproductions of the Ebers Papyrus, the Berlin Medical Papyrus, the Hearst Papyrus, the London Papyrus, the Kahun Gynecological Papyrus, and the Book of the Dead, giving lithographic reproductions in color of some of the most beautiful of these papyri.

Sumerian tablets of burned clay were also shown which are over four thousand years old. Each of these was dated so that the precise age could be figured out. These tablets are very fine specimens of Sumerian cuneiform. The speaker explained the methods by which the Egyptian hieroglyphics had been deciphered, beginning with the Rosetta Stone. He gave a list of the drugs and medicines which were named in the papyrus and gave a detailed description of the Edwin Smith Medical Papyrus which is devoted to surgery and external medicine and which is said by Prof. James H. Breasted of the University of Chicago to contain the largest amount of valuable scientific data regarding the status and practice of medicine in Egypt yet discovered. A photograph of one page of it was shown. The original is in possession of the New York Historical Society and has not yet been translated in full, though Professor Breasted is now engaged in this work. The books and manuscripts shown included loans from the Surgeon General's Library in Washington, the John Crerar Library in Chicago, the Lloyd Library, the Merrell Library, the Library of the Cincinnati General Hospital, the Cincinnati Public Library and the private library of Baron Von Oefele of New York, who is the highest living authority on medical Egyptology.

The Secretary of the Branch was instructed to convey to the family of the late Louis Werner the sympathy of the members in his loss.

BERTHA OTT, *Secretary.*

DETROIT.

The speaker of the December meeting of Detroit Branch, A. Ph. A., was President F. O. Taylor of the Detroit Section of American Chemical Society. The subject related to the possibilities of discoveries in chemistry; he encouraged more thorough follow-up methods.

L. W. Rowe spoke on physiological assay methods at the January meeting of the Branch. The lecture was illustrated by slides and made most interesting by demonstrations. The tests related to cannabis, ergot and digitalis and the effects of insulin were shown on white mice.

The fifth regular meeting of the Detroit Branch of the American Pharmaceutical Association was held February 8, 1924, at the Wayne County Medical Society. The usual excellent dinner preceded the meeting which was called to order by President Crandall.

The minutes were read and approved.

Mr. Hall read the resolution drawn up by him to be spread on the minutes, paying tribute to the late Dr. John M. Francis. The resolution is appended to this report.

The speaker of the evening was Mr. A. L. VanAmeringen, of New York City, who gave a very interesting talk on the creation of perfumes from a technical and artistic point of view. He outlined the historical development of perfumes, the use of synthetic chemicals in the creation of modern odors, and the blending of same. The subject was freely discussed by members and Mr. VanAmerigen answered questions propounded on various phases of the industry.

The illness of Chairman Jones, of the program committee, was reported.

Mr. Ingram announced the program for the March and April meetings.

The speaker of the March meeting, as previously announced, will be Dr. Frederick G. Novy, Professor of Bacteriology and Director of the Hygienic Laboratories of the University of Michigan. Dr. Novy's subject will be Pasteur's Work.

The April meeting will be held at Ann Arbor, where the members of the Branch will be guests of the Prescott Club.

Dean Kraus, of the Pharmacy Department at the U. of M., will give an illustrated lecture.

Mr. Ingram on behalf of the program committee suggested a vote of thanks to Mr. Stout, Dean of the Detroit College of Pharmacy, who has so gladly donated the services

of his multigraphing department in getting out the announcements of the Branch meetings. The vote was given Dean Stout and President Crandall thanked him for his assistance in making the meetings successful.

BERNARD A. BIALK, *Secretary.*

DR. JOHN M. FRANCIS,
1867–1924.

Resolutions passed by the Detroit Branch of The American Pharmaceutical Association, January 11, 1924.

Our friend has passed on and we have lost one of our most brilliant and valuable members —considered from many angles as a man; an educated pharmacist and chemist; a member in high esteem of the Presbyterian Church; a trusted, trained, thoroughly efficient practical official of Parke, Davis & Company for over twenty years, a member of that organization for 32 years and of our Association for 18 years. While a quiet worker, as ordinarily viewed, he was a dynamo in strength and resourcefulness when in action, alert in debate, true in judgment, broad in vision, and standing firmly for what he believed to be right.

He was easy to approach, considerate of the opinions of his colleagues and peers; he was twice honored with membership on the Committee of Revision of the U. S. P., 1910 and 1920. While possessing these educational and executive qualifications, we believe his real strength and power to achieve came from that silent magnetism which made friends—the man to man contact, emphasizing not the critical, but the human side of our natures.

We grieve at the passing of our friend in the full plenitude of his powers and extend our sincere sympathy to his bereaved wife and children with the prayer that The Great Comforter may be their solace in this dark hour of their affliction.

NEW YORK.

The February meeting of the New York Branch of the American Pharmaceutical Association was called to order in the Lecture Hall of the New York College of Pharmacy Bldg., 115 West 68th St., New York City, on Monday evening, February 11, 1924; President Smith in the chair. Forty-five members and friends were present. The minutes of the preceding meeting were read and approved.

Treasurer Gerstner brought in the report of the standing of the finances of the Branch. It was received.

Fraternal Relations.—Chairman Lehman reported that he was making arrangements for a joint meeting of the local associations for the purpose of discussing "Price Maintenance."

Education and Legislation.—Mr. Eddy brought in a report upon various legislative matters now pending.

New Members.—An application for membership in the Parent Organization was received from Mr. Harold E. Becker, 23 Vine St., Brooklyn, N. Y.

Audit Committee.—Dr. Diner reported that the treasurer's books were found to be correct.

Mr. Eddy reported upon the deplorable conditions of children in Germany. It was then moved by Mr. Eddy that the Branch contribute $25.00 towards the relief fund for destitute children in Germany. The motion was seconded by Hugo Kantrowitz.

Dr. P. M. Giesy, of E. R. Squibb & Co., read a very interesting paper on "Hydrogen Ion Measurements and Their Use in Pharmacy." Discussion followed, and a vote of thanks was extended the speaker.

HUGO H. SCHAEFER, *Secretary.*

PITTSBURGH.

JANUARY AND FEBRUARY MEETINGS.

The meetings of the Pittsburgh Branch, A. Ph. A., are proving intensely interesting and instructive. The speaker of the January meeting was Prof. Louis Saalbach; his subject was "Some Prescription Difficulties."

The election of officers for the ensuing year resulted as follows: *President,* Charles E. Willetts; *Secretary,* B. E. Pritchard.

The speaker of the February meeting was Dr. Louis Emanuel; the subject of his address was "The Pharmacopœia and a First-Class Drug Store." A general discussion followed the presentation of the paper.

B. E. PRITCHARD, *Secretary.*

UNIVERSITY OF NORTH CAROLINA.

The fourth monthly meeting of the University of North Carolina Branch of the American Pharmaceutical Association for the year 1923–24 was held Friday evening, January 18, in Phillips Hall. Between 125 and 150 were present.

Charles W. Brown, Chief of the Department of Education, of the H. K. Mulford Co., Philadelphia, presented a most interesting and instructive lecture on the "Preparation and Physiological Action of Biological Medicines," including the recent work of Dr. F. M. Huntoon on "Antibody Solutions."

Mr. Brown prefaced his lecture with a chronological sketch of the history of the development of biological research. He stated that the Chinese knew of and used autogenous vaccines over 4000 years ago. The present expansion in the use of biological products began, however, in 1789 when Dr. Edward Jenner discovered and presented to the world the fact that cowpox would protect against smallpox, and therefore by inoculating a human being with cowpox the body would be stimulated to produce immunity against smallpox. He also recounted the work of Behring, who in 1892 discovered the serum for diphtheria, and the subsequent work of Pasteur and Lister to whom he attributed the greatest advancement in our present knowledge of bacteriology.

Mr. Brown then gave a detailed account of the preparation of smallpox vaccine, diphtheria and tetanus antitoxins, antimeningitis serum, and tuberculins. He described the process of manufacture, the methods of standardization, and the conditions under which biological preparations should be kept and dispensed.

According to Mr. Brown the development of the pneumococcus serum as prepared by Dr. F. M. Huntoon of Cornell University held the hope of greatly reducing the death rate from pneumonia. He declared that while clinical data so far were not conclusive, the use of pneumococcus serum had proven very successful in those cases where it had been administered. Mr. Brown pointed out that ten per cent. of the people die from pneumonia, and that unless some specific is discovered 10,000,000 people would die from this cause in the United States.

The lecture was profusely illustrated with lantern slides and thoroughly enjoyed by those who attended.

The Branch wishes to express its appreciation to the H. K. Mulford Co. and Mr. Brown for the opportunity of having presented to its members such an interesting and educational lecture.

C. R. WHITEHEAD, *Secretary.*

PHARMACY IN ARGENTINA.

A qualification granted by a recognized university is an essential requirement to practice pharmacy in the Argentine Republic. A business may be owned by a non-pharmacist if established before the passage of the law, provided a pharmacist has supervision. Only one pharmacy can be owned by an individual. The pharmacist is responsible for the medicines he dispenses.

All narcotics coming under the law, if imported, must come through the port of Buenos Aires. Account is kept of narcotics somewhat like this country; official prescription forms for narcotics must be numbered and stamped by the National Health Department.

The president of the National Health Department is a member of the Pharmacopœia Commission, on which are representatives of all the medical and pharmaceutical divisions. It is proposed to have decennial revisions of the Pharmacopœia.

THE VETERANS' BUREAU SCANDAL.

The *New York Times*, in commenting on the open hearings of the Senate Committee on the Veterans' Bureau, says that what has been brought out may now be regarded in view of what General O'Ryan has declared, "as little more than an indication of the plundering of the Government. The trail of corruption was over many enterprises intended for the relief of ex-service men. The politicians were accomplices, or allowed themselves to be used by rogues. It is an old story that the politicians filled the bureaus with their creatures. Congress had a great deal to say about the conduct of the bureau and was much deferred to. Members of Congress were in part responsible for its incompetent management, and there is no doubt that Congress was, in part, to blame for delaying for two years an investigation of the bureau."

GEORGE M. BERINGER, REMINGTON HONOR MEDALIST FOR 1924.

George Mahlon Beringer, of Camden, N. J., has been voted the Remington Honor Medal for 1924. The announcement was made at the New York Branch A. Ph. A. meeting, March 10. Mr. Beringer was president of the American Pharmaceutical Association, 1913–1914; he is a member of the present revision committees of the U. S. Pharmacopœia and National Formulary.