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AN OPPORTUNITY.*

BY ROBERT P. FISCHELIS.

The retail drug business is changing. There is no question about that. Men who years ago entered the practice of pharmacy as apprentices to the old time English, French or German apothecaries are apt to sneer at what we call the practice of pharmacy to-day. We are told that only 10% of the work of the modern retail drug store requires a knowledge of the art and science of pharmacy. When we enter such a drug store and watch its operations we realize very quickly that the foregoing statement is only too true.

However, when we carefully analyze this situation we find that it is not, of itself, as detrimental to the progress of professional pharmacy as some calamity howlers would have us believe. The many non-pharmaceutical side lines are easily explained. The American citizen wants what he wants when he wants it. Originally the only things he wanted from a drug store were drugs, medicines and sick room supplies. One store could supply a very large community with all of these for, happily, most people are not sick during much of their lifetime. But in these days of concentration of populations with the resulting enormous apartment houses and hotels that frequently are able to accommodate the entire population of a small town and many times the number of inhabitants of some that are called towns, the problem is different. These people want to be served quickly, and in order that they may have the pharmaceutical service of the drug store when they want it, the druggist must be conveniently at hand all the time. This requires numerous stores in locations where rents are not low and other expenses are greater than the income from strictly pharmaceutical activities will warrant. Hence the expansion into related and unrelated merchandising fields.

The fact that drug stores must be kept open more hours of the day than perhaps any other retail establishment tends naturally to increase the non-pharmaceutical business. The original reason for keeping open far into the night was to

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take care of the prescriptions brought in by the evening patients of physicians and to take care of emergency demands. To-day these are minor reasons. The public has been educated to expect drug stores to be open late and now looks to them as a source of supply for anything they have forgotten to buy at the grocery, hardware shop or stationery store during the day.

The object of this paper, however, is not to discuss this phase of the situation or to attempt either to justify or condemn it. It is mentioned merely as an introduction to a note of warning against complete obliteration of pharmacy in the drug store and to a practical suggestion for increasing pharmaceutical work along the lines of a recent development in the practice of medicine.

First, the note of warning!

Dr. James H. Beal, one of the clearest thinkers in American Pharmacy to-day, read a paper entitled "Holding the Franchise" before the Ohio State Pharmaceutical Association some time ago from which the following is quoted:

"A railroad once built an expensive cut-off shortening the length of its main track by many miles, over which cut-off its regular freight and passenger traffic was thereafter carried but, nevertheless, continued to send an engine and caboose daily each way over the old track with all its heavy grades, tunnels and dangerous curves.

"On inquiring the reason for sending an empty train every day over the old track, it was explained that it was to hold the franchise, that when the road was originally constructed the company assumed the obligation of running at least one train each way daily, and that it feared to discontinue the trains over this now useless track for fear that such abandonment might impair its franchise over the remainder of its right of way.

"Pharmacy also holds a valuable franchise—the public belief that the compounding of prescriptions and the dispensing of drugs, medicines and poisons are functions demanding special education and the technical skill to be gained only through practical experience. It is upon this theory solely that legal restrictions upon the practice of pharmacy can be defended. It is always in order, therefore, to inquire whether pharmacists are doing all that is reasonably necessary to retain a legal hold upon their professional franchise."

That briefly calls attention to the danger. More specifically let it be said that some pharmacists in their enthusiasm for the merchandising phase of their business seem to forget all about the phase which to a large extent makes the merchandising possible.

Building up a prescription business based on the confidence of physicians and public, keeping abreast of the new developments in pharmacy and the sciences related to pharmacy, and being prepared to supply all that is needed for the healing of the sick, promptly, when required, is admittedly harder work than buying and selling merchandise of one kind or another, but if "more than a merchant" is to mean anything at all, more of us must do some of this harder work.

Lastly, a suggestion for increasing the professional work of the pharmacy and at the same time serving both the medical profession and the public!

Modern medicine has turned its activities most emphatically in the direction of disease prevention. The old proverb "A stitch in time saves nine" can nowhere be applied with greater logic than in the protection of the health of individuals and communities. The practical eradication of many contagious diseases bears eloquent testimony to the efficiency that has been reached in the field of prevention.

The average span of human life has been lengthened considerably in recent decades and if the same degree of intelligence is exercised in the care of the human

body that we bestow upon our automobiles and other machinery it will doubtless be lengthened still further.

The key to the situation is what has come to be known as the Periodic Health Examination. Briefly, this is a movement to interest people who are ostensibly in good health to submit to a medical examination once a year. The idea is not entirely new but its general application has only been advocated recently.

Most people never consult a physician until they are quite ill. Very often the illness is due to some organic defect which has been developing for some time and which might have been prevented if proper advice had been sought in its early stages.

The pharmacist will immediately think of many powerful arguments in favor of such examinations but he may doubt the possibility of encouraging the average citizen to spend his money in that way, especially if he is thinking of high-priced specialists as the examiners. The pharmacist who has had little contact with physicians will also probably wonder where he fits into this picture, either professionally or commercially.

This movement for periodic health examinations is just now a burning topic of discussion in medical associations all over the United States and the concensus of opinion is that the examinations should be conducted by the family physician rather than by the specialist. Literature is being distributed to members of the medical associations giving complete instructions as to the extent and manner of examination and standardized blank forms are available for recording the information on which diagnoses are based. In other words the general practitioner is being educated in the proper methods of conducting periodic health examinations so that there will be some uniformity in the service rendered and no lack of detail in arriving at the exact physical condition of the individual examined. The fees suggested for these examinations are very reasonable and within the reach of all.

One of the difficulties that is confronting the medical profession in connection with these Periodic Health Examinations is the question of giving proper publicity to their value. If the individual physician appears to lay too much emphasis on this matter he may be accused of a selfish interest. The Code of Ethics of the profession of medicine does not permit advertising in the usual sense of that word; consequently, there is apt to be a delay in properly acquainting the rank and file of laymen with the importance of such examinations, unless steps are taken to do so outside of the medical profession. It appears to the author of this paper that this situation has reached a point where the pharmacist can be of great service. In the first place he is in constant contact with the public and is often considered a source of information on health matters. It is therefore a simple thing for him to recommend to his customers, when the opportunity presents itself, that they submit to a periodic health examination in their own interests. He can even suggest this in his professional advertising. He can keep on file a list of the physicians in his immediate vicinity who are qualified to make such examinations and lists of specialists who may be consulted in case the individual has ascertained from the general examination that a particular body function needs attention or repair.

This would be considered as giving valuable service in the health field and it would not be entirely altruistic either for it would certainly tend to bring about better relations between physicians and pharmacists. Furthermore, the drug

store is to-day the source of just as many things used in the prevention of disease as for their cure. The chances are that the results of the examinations of the average run of citizens by competent physicians will reveal something or other which either requires treatment or which should be guarded against by proper prophylaxis of one kind or another.

In the author's estimation, no better opportunity for rendering a professional service to the public, to the medical profession, and to himself has been offered the pharmacist in a long time.

THE PHARMACIST AND PUBLIC HEALTH ACTIVITIES.

BY ANTOINE E. GREENE.*

As a member of the medical trinity, comprising medicine, dentistry and pharmacy, the pharmacist should take his proper place beside his professional confreres in the new movement for public health and preventive medicine. That pharmacy has not taken a larger part in the new program for the prolongation of life and the prevention of disease is due in a large measure to a lack of appreciation and understanding of what public health is, and what it means to the pharmacist. The busy pharmacist must be won over to public health by discovering that public health does pay in the long run. Physicians are just beginning to develop the "Health Consciousness" which is essential to success in this new program. The pharmacist and physician have concerned themselves chiefly with the treatment and removal of pathological conditions in the sick, paying but little attention, if any, to those who are not confined to bed as patients.

Public health concerns itself not only with the care of the sick, but also takes as its field of activity the well members of the community. Thin partitions divide the realms of health and disease, and the well person of to-day often is the sick man of to-morrow. To throw the protective mantle of preventive and salutary medicine over the well is the aim of public health, to which task it has called the professions of medicine, teaching, engineering and sanitary science. Public health concerns itself with the health of the people. The health of the people comprehends their physical and mental well-being.

The busy practitioner of pharmacy will first ask what can be done in the line of public health, what his share in the work will be, and how satisfactory a program can be worked out to fit in with his daily schedule of activities, broad and varied as it is.

The present status of public health, preventive medicine and popular health education owes much to the discussions and organization activity coming as a result of the surveys of health conditions in this country by national, independent and industrial health agencies. These surveys and studies were partly occasioned by the reports of the draft during the World War. The large number of exemptions from military duty, due to physical and mental defects, pointed to a dangerously low condition of national health.

One notices the present trend of health activity by such public observances as "Health Week," "First Aid Week," "No Accident Week," "Clean City Week,"

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