

THE DEPARTMENT OF THE AMERICAN ASSOCIATION OF COLLEGES OF PHARMACY

LET US START ANEW FROM WHERE WE ARE.*

BY FREDERICK J. WULLING.¹

INTRODUCTION.

The title of my paper was chosen after some correspondence that followed Mr. Heberd's invitation to me to be your guest-lecturer. The annual meetings represent a pause in our work for the purpose of reviewing and recording work already done and for mapping out programs for things still to be done, for our work is never finished. We start anew from where we left off or paused. Too many live in the past with only little thought of the future, but the future inexorably demands our present attention and requires our best effort at planning and organizing forward-going work. Every annual meeting is a mile-post from which we must proceed to the next. The procession goes on and must. No other way leads to accomplishment and success. My thought therefore is to point out or to emphasize work to be started or to be continued and for that purpose I will start right in to present my remarks in divisions or sections, each under a separate subheading:

THREE-FOLD COÖPERATION.

In most States there are three important pharmaceutical factors: a State Association, a State Board and a College of Pharmacy. Their respective activities vary but their ultimate purposes are identical, namely, the improvement of the calling leading to constantly better pharmaceutical service. For the fullest realization of these purposes the three agencies must work together harmoniously, co-operatively and whole-heartedly. In the degree in which they fail to do so they fall short of what can rightly be expected of them and pharmacy suffers in that measure. The efficiency of an organization depends primarily upon the quality and caliber of the men and women composing it. Capacity and ability, initiative and consistent aggressiveness, and especially administrative qualifications, all intelligently used, are necessary to-day more imperatively than ever before because of the growing complexities of our life and times. The individual is confronted everywhere with more and more competition and responsibilities. He overcomes these or succumbs to them according to his ability or lack of it. What he cannot do individually he must if he is wise, do collectively by working jointly and coöperatively with others. The recognition of this fact long ago led to the banding together of individuals into associations and organizations of many and varied kinds. *But the time has now come when associations must band together to form larger and more powerful units for meeting the needs and requirements and abuses of the day.* As the individual long ago found himself hopelessly infirm to do certain things alone and unaided, so now many associations find themselves unable to cope successfully with increasing problems. They therefore unit their forces and facilities for a common end. Loss of associational identity or merger of identity into larger units are not necessary in most cases, because every association, local, State and national still has primarily its internal and domestic functions to perform and needs to

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affiliate or federate or possibly only coöperate with other associations in matters which affect them commonly. In my A. PH. A. presidential address in 1917 at Indianapolis I advocated strongly what is now being accomplished in part by the proposed erection of a pharmaceutical headquarters building. The headquarters will function more broadly and representatively when a strong and altruistic federation of all important pharmaceutical associations and interests will have been formed. The federation or its equivalent must and will come in due time. The present method of procedure is possibly the right one—time will tell. However, I do not want to discuss national pharmaceutical administration because that subject is too big and involved to treat adequately in an address of this sort, but the subject would be an interesting one for a separate address. I want to discuss briefly my proposal that the State association, the board and the college or colleges in every State coöperate in the fullest degree possible. This coöperation is already well established and effective in some States, but nowhere, as far as I know, is the working together as intimate and unselfish as it could and ought to be. The interrelations of the three factors are: (1) unfriendly or indifferent; (2) friendly but not coöperative; (3) coöperative but not so in the fullest measure possible. A gradual and noticeable improvement in the functioning of each of the three factors within their respective domestic scopes is happily going on. The State associations are growing in their realization of the responsibility growing out of their representation primarily of the functional aspect of pharmacy. This aspect is the most vital because it includes the culmination of all other activities in the direct service to the sick. The boards and colleges give indispensable service also, but in indirect and contributory ways. A pharmaceutical service, of varying degree of efficiency, has been given from time immemorial—certainly before there were boards and colleges. The associations are easily the most important of the three factors and they antedate the other two and brought them into being. It may consistently be said that American pharmacy has always governed as well as restricted itself and this it has done through its organizations. It is a matter of credit, not sufficiently recognized, that all pharmaceutical regulatory and restrictive laws have been initiated by organizations of pharmacists. The organizations produced the boards and in many cases the colleges, because these agencies were needed for the enhancement of pharmaceutical service. The boards were needed for regulatory and disciplinary purposes which the associations could not carry out, and the colleges became essential because the development and demands of pharmacy reached a point where more adequate training and education became necessary. Therefore in a broad sense the associations represent the three aspects of pharmacy: functional, regulatory, educational. In a narrower sense they stand primarily for the functional aspect and the boards and colleges more specifically for the regulatory and educational, respectively.

Having established the boards and colleges for specific but contributory purposes, what is the next upward step for the associations to take? My suggestion is that the associations now endeavor to unite with themselves the boards and colleges for the purpose of accomplishing by united effort and hearty agreement and collective endeavor what the separate factors cannot do individually. State pharmaceutical councils or conferences made up of capable representatives of the three factors, say of the executive committees of the associations, the entire mem-

bership of the boards, and the executive faculties of the colleges, would constitute advisory if not administrative bodies capable of giving most valuable and needed service in matters of common interest. It would be surprising to learn how many matters are of really common interest. While, for example, education is specifically in the hands of the colleges, education is of primary importance to the associations because education is fundamental to what the associations represent. Similarly the regulation of the practice now specifically restricted to the boards, is a function that grew out of the initiative of the associations and needs their continuous support for its affirmative exercise. I am fully aware of the fact that there are too many associations in all walks of life and that many of them are entirely unnecessary, but a council or conference of the kind I suggest would be not only desirable, but is becoming necessary. As I said before associations of councils, conferences and other organized bodies, rather than more associations of individuals, are the need of the day. That even informal and non-binding conferences are not only helpful but are becoming more and more necessary is witnessed by the joint meetings at the annual A. Ph. A. Convention of the national association of the boards and colleges, which meetings are growing in scope and importance every year. In some States the coöperation suggested is already feebly begun. In my own State of Minnesota both the Board and the College present to the Association annual reports of their activities. A standing Association committee on the College is in more or less intimate touch with the College and has frequently been helpful in both advisory and material ways, especially after conferences. The Board and the College have had conferences in the past and the Board conducts its examinations in the College building. The Association Legislative Committee has occasional conferences with the Board and the College.

Time does not permit my developing this suggestion further. I leave it with you and other associations for what it is worth.

THE COMMONWEALTH FUND STUDY OF PHARMACY FROM THE FUNCTIONAL STANDPOINT.

This study is now completed and will be off the press by August, it is expected. Every pharmacist should read it carefully. It represents much work. Dr. Charters, whose very capable direction has made the survey comprehensive and valuable, allows me to quote from the address he gave at the Des Moines meeting of the AMERICAN PHARMACEUTICAL ASSOCIATION:

"No attempt has been made to estimate accurately the length of time it will take to complete a college course in pharmacy, yet if the student is to receive a cultural training and adequate instruction in both commercial and professional pharmacy, the length of time would not fall short of the customary four years."

In the following quotation Dr. Charters states specifically that pharmacy is a profession:

"In a profession it is necessary to know not only the methods of performing the activities of the vocation; the principles and fundamental facts upon which the methods are based must also be mastered. It is necessary to know not only how to perform the activity, but to understand why the methods used operate successfully. If the fundamental principles are not taught, the vocation is not a profession; it is merely a trade."

Dr. Charters' report supports and endorses practically every upward educational step taken by pharmacy recently and it is my judgment standards will rise higher

because of the case the report makes out for better and higher training in pharmacy. Recently two colleges went upon a minimum four-year degree basis.

SELECTION OF ENTRANTS TO PHARMACY.

Let me quote President Johnson of the Minnesota State Pharmaceutical Association:

"One of the essentials for the more rapid rehabilitation of the profession of pharmacy is the selection of the right sort of recruits. The heretofore free and easy access to the calling of pharmacy has resulted in the influx of a greater number of commercially-minded than professionally-minded recruits and it is undeniable that the commercially-minded in pharmacy are in all too many cases at least indifferent to the general as well as to the specific obligations to render professional pharmaceutical service in return for the privileges and protection inherent in licensure. The people, through their legislatures, have given the pharmacists the exclusive privilege of practicing pharmacy and have protected the pharmacists against all others who may desire to carry on pharmacy. For this exclusive privilege the people or the public have a right to the kind of service the state intended the pharmacists should render. Many pharmacists are not meeting this expectation. The question whether their not doing so is not justifiable, can be raised in many cases but not in most. It may be that some time one of the phases of the present transition will assume the form of legislative compulsion of this expectation. In cases where pharmacists do not meet the expectation, there seems to me to be no excuse for license or the special privileges which they enjoy. Most of the colleges, state boards and state associations have these matters in mind and evidence is multiplying that efforts are increasing to improve the quality and standard of student material. Some colleges are now requiring certificates of good moral character from their matriculants and from a number of communications I have recently received, I learn that some state boards are now requiring similar certificates. It may be that before very long the state boards will exercise their power, which I believe is an inherent and implied power, to require all prospective students or others who desire to enter pharmacy to subject themselves, before being admitted to the practice of pharmacy, to adequate tests to determine their fitness for and their affirmative value to pharmacy. What these tests ought to be in detail, could easily be worked out but they should primarily reach to the intellectual capacity, moral character and attitude toward professional service of the applicant. Many undesirables could be headed off thus early. This would be an act of justice not only to pharmacy but to the respective individual. The present custom of waiting until the applicant is ready to take his examination for license, should be supplanted by a better and more equitable procedure such as the one suggested, which begins at the beginning."

The quality of service a profession can render and its standards and ideals and the recognition accorded it by the public depend primarily upon the quality and integrity of its practitioners. If public recognition and esteem were based solely upon responsibility involved in the practice, pharmacy would share more adequately the esteem in which medicine and its specialties are held. Pharmacy has not maintained standards, as medicine has, commensurate with the responsibilities involved in its practice. Pharmacy has fallen short in the past in not having been sufficiently selective and discriminating with regard to the caliber and quality of its entrants. The various associations of pharmacists represent pharmacy at large. In that capacity they have done fairly well in securing helpful legislation and regulation but these have not sufficiently safeguarded the calling from the influx of persons lacking in integrity and in devotion to the high aims and purposes requisite of every devotee of pharmacy. Too many pharmacists still deny any obligation to their profession as a social group. They measure everything in terms of self-interest and advantage and refuse or fail to contribute anything to the common welfare of the group. In this respect, too, conditions have become some-

what better but the process is too slow. A pharmacist is either an asset or a liability to his profession. Everyone should be an asset and it is now more than ever necessary to consider and judge every applicant for admission to pharmacy in the light of the question: Will he become and remain loyal to the highest ideals and standards of the profession? Every reasonable precaution should be taken at the time the applicant approaches the portals of pharmacy. When he has entered, it is too late. It is the business and duty of pharmacy to make known in definite and understandable ways just what it rightfully expects of recruits and what its terms of admission are. At present the only requirement is the passing of the State examinations. This test does not include any inquiry into the suitability of the applicant to the practice, nor into his moral and character qualifications, nor into his general attitude toward life and especially toward pharmacy. The intellectual test involved in the technical board examinations is an almost elementary one. The boards and the colleges could well unite with the State associations toward more inclusive admission requirements. If a consistent and fair selection, such as I again advocate and recommend had been employed years ago, pharmacy would be much better off now, and I believe many of its vexing and difficult problems of to-day would have been avoided. Here is another point from which to go forward. Such selection would be justifiable especially in the interests of those who need pharmaceutical service.

STATE ASSOCIATION SECTIONS.

Many national associations conduct portions of their proceedings through sections. The only State association doing similarly, as far as I know, is the Minnesota association which established, upon my recommendation over twenty years ago, a Scientific and Practical Section. This Section has done notable work and has placed the Minnesota Convention into the highest association rank, according to claims by others than Minnesotans. The Section occupies a full third of the convention time. Most of the talent on its programs is furnished by association members, and usually it presents a leading, nationally known pharmacist. It furnishes an open forum for the discussion and ventilation of pharmaceutical problems, appeals to all members, not only to the purely professionally-minded and is always well attended.

HISTORICAL SECTIONS OR COMMITTEES.

Those who do library research and others, find a paucity of accurate pharmaceutical historical material. The recording of exact facts and dates relating to the pharmaceutical development or history of our States and nation could well be done by State associations in their respective localities through committee or section work. Under proper organization and direction the recording of historical facts is an easy matter. The assistance of historical societies everywhere, could no doubt be had by pharmacists for the asking. A very few associations already have historical committees. All should have them. The A. PH. A. Historical Section established several years ago is doing creditable work.

HOSPITAL PHARMACY.

Hospital pharmacy and hospital pharmacists are without sufficient recognition. That they are entitled to more attention was recognized by the Minn. State Pharm.

Assoc. when at its last meeting it created a Committee on Hospital Pharmacy and placed a well-known young woman in charge. All State associations should have similar committees. There is much work for them to do. A good paper on the subject was recently written by Miss Frances Greenwalt and was published in the JOURNAL OF THE A. PH. A. (May 1926, p. 394). The paper will appear in the forthcoming 1926 Proceedings of the M. S. P. A. Every pharmacist should read the paper and then lend his help to carry out some of the suggestions made.

BUILDING UP A PHARMACEUTICAL BUSINESS ON SCIENTIFIC LINES WHERE COMPETITION
WILL FIND IT DIFFICULT TO FOLLOW.

A paper bearing above title and written by Mr. David F. Jones of Watertown, S. D., and published in the JOURNAL OF THE A. PH. A. (May 1925, p. 424) and in the Proceedings of the M. S. P. A. for 1925, is one of the most helpful to be found in the recent pharmaceutical press. Mr. Jones starts out by saying, "there are not enough people passing the average drug store in the Northwest to tempt any thoroughly prepared and thoughtful person to spend the major part of his or her time in merchandising." He then makes out a complete and convincing case for the professional pharmacist. I highly recommend the reading of this paper.

SO-CALLED COMMERCIAL PHARMACY.

There is really no commercial pharmacy. Pharmacy is a major medical specialty and has been recognized as such for centuries. The fact that a pharmacist engages in trade does not make out of the practice of professional pharmacy, in which he may engage only part of his time, a commercial activity. A person called a pharmacist may devote a portion of his time to professional practice and another portion to commerce. The two activities are separate and distinct even if they are practiced by one person. Professional practice by a person adequately trained professionally does not become commercialized if the practitioner engages in trade any more than trade becomes professionalized if carried on by a Registered Pharmacist or by any other professional practitioner. Conduct of commerce and the practice of professions are separate activities or vocations and ought to be carried on respectively by persons who are willing to devote their entire time to the one or to the other. The one is as respectable and as necessary to society as the other. There is therefore no commercial pharmacy any more than there is a commercial medicine.

The dual activities of the average present-day pharmacist are excusable in many cases and commendable in some. But the over-commercialization of the many drug stores of to-day does not have the approval of the medical profession nor of a very respectable number of pharmacists. In many cases what is euphoniously termed an economic development is really a commercial exploitation of pharmacy and is based largely on the ease with which pharmacy has allowed itself to be invaded and utilized. This exploitation is entirely devoid of any of the altruistic and idealistic aspects that characterized the profession of pharmacy and medicine, and on that account tends in a very marked degree to depreciate the standing of the average pharmacist in the esteem of the public and in no less degree has a distinctly negative effect upon the pharmacists themselves. This fact has been recog-

nized by the thinkers and serious-minded in pharmacy for some time. In the long run no one can successfully serve two masters, and the person who wants to be a professional practitioner and a merchant at the same time will sooner or later have to give his undivided time and loyalty to the one or to the other. Many are doing that very thing now. Some pharmacists have entirely abandoned their professional practice and are devoting their entire time to commerce. Some of these have called their stores drugless drug stores, but have been enjoined by law from the use of that designation. Others are giving up trade and devoting their full time and energy to professional practice. Pharmacies, in the thorough sense of the word, are growing in numbers and in dignity and are hailed with delight by the sick as evidenced by the increasing business of most of them. This transition, which got fairly started only recently, will gain momentum from now on for obvious reasons, the first one being the growing demand from the public for more specialized and respectable and undiluted professional service. The wise and careful pharmacist will take this fact into consideration henceforth, more seriously than he has done in the past. There are many more drug stores than are necessary to give the needed pharmaceutical service. According to a recent estimate, professional service that could be given by 100 pharmacists devoting their entire time to professional practice, is now given by between 500 and 1000 pharmacists. All must make a living and a profit, and the living and profit of all beyond the necessary 100 is made through trade. If this trade were separated from professional practice, it would be carried on in some way by others and the public would have as good or better service than it has now with respect to the commerce value of this illustration, and certainly the public would be much better off if its pharmaceutical services were restricted to the 100 pharmaceutical specialists.

THE NEW REVISION OF THE PHARMACOPŒIA SHOULD BE BROUGHT TO THE ATTENTION
OF PHYSICIANS.

Those who will make inquiry will find that many physicians are without the Pharmacopœia and hence are not using it as a basis for their prescriptions to the extent that could be expected. Because of the recent appearance of the new revision the present time is a good one for pharmacists to try to interest physicians more in the one work with which they should become more familiar and upon which they should rely and realize more fully than they do. I know of pharmacists who presented copies of the new edition to their physicians with mutually profitable results. Pharmacists could point out and emphasize more fully the safe-guard the pharmacopœia is to the physician and his patient. The greater skill, and the greater accuracy, which the new revision demands of the pharmacists should be brought to the attention of physicians, who could find in a study of the improvement in the many tests and assays, including the biological, evidence that pharmacists are really the efficient and logical allies of physicians in their responsible work of helping and restoring the sick. I believe physicians could be made to realize that they really cannot afford not to utilize in a more measurable degree the help and coöperation of the pharmacists and to employ the many advantages a good knowledge of the Pharmacopœia affords. The Pharmacopœia is not a guide exclusively for pharmacists, but for physicians as well, as is evidenced by the important part physicians take in its revision.

FELLOWSHIPS AND SCHOLARSHIPS.

As a member of the Administrative Committee of a large University I am in a position to know that other fields of learning and professions are much more richly endowed with fellowships and scholarships than pharmacy is. Other professions realize more than pharmacy does that all fields of learning need more peaks, that is, a larger number of much more highly and specially trained men than the average; leaders to whom the calling could look in the future for guidance and direction. Many worthy and exceptionally capable young men, and lately also young women, would go onward with their training if their means permitted. The calling becomes the beneficiary of the intellectual and practical contribution of every highly trained member. To increase the number of the latter is the part of wisdom. Heretofore a limited number of ambitious and forward-looking students have developed their capacities to a high degree on their own resources. But there are not enough of these. A few more, worthy but not sufficiently well-to-do, are encouraged by appointments to very limited numbers of scholarships or fellowships. In the establishment or endowment of a much larger number of the latter, opportunity is offered to those who can afford it to give a valuable service to pharmacy and also to the recipients. Possibly the time will come when pharmacy will look upon this matter in a business way and will deliberately create funds for the furtherance in every college of research and graduate work. That time is not yet at hand, but the ranks of pharmacy surely contain many generous and sufficiently wealthy to hasten the time.

DISTRICT AND SECTIONAL MEETINGS.

Get-togethers, conferences, talks across the table, all, if carried out in the right spirit, are conducive to understanding and good fellowship, and in a large measure are the best solvents of our problems. They are the methods that characterize and embody the brotherly and democratic spirit which actuates our people and our glorious nation. District Meetings must, therefore, commend themselves to all of us. I notice that your program includes a discussion of the District Meeting idea by Mr. Treadwell who has made a practical and successful test of them. No one whom I know can better present and explain the idea, so I will say no more on the matter than to advocate its sympathetic study by you.

REGIONAL MEETINGS.

If the District Meetings are found to be useful and fruitful within a State, the sectional or regional meetings representing contiguous or related States should also prove of value. Some such meetings have already been held with good success and a further study of them is advisable.

THE ALCOHOL AND RELATED QUESTIONS.

I have been asked to say something on this question. You can best understand my attitude toward it when I say that I am not convinced that liquors are indispensable medicinal agents. Their inclusion in our materia medica has caused so much trouble and confusion and has reacted so negatively upon the esteem in which pharmacy is held by the general public that I cannot see a corresponding advantage in their retention. I would not go as far, however, as those go who ad-

vocate getting along entirely without alcohol. There is as yet no reliable substitute for alcohol in the manufacture of certain valuable medicinal preparations of undoubted therapeutic merit, even though some flavors and perfumes formerly made with alcohol are now made without it.

PHARMACEUTICAL BULLETIN BOARDS.

The Boards and Bulletins gotten out and distributed to pharmacists by the Northwestern Pharmaceutical Bureau are to be commended. Every drug store would be giving a better service and would increase its business by securing the Bulletins and displaying them prominently upon the Board.

SHOULD THE PRACTICAL DRUG STORE EXPERIENCE REQUIREMENT BE ABOLISHED?

At the February 1926 meeting of the Minnesota State Pharmaceutical Association, President Johnson in his address, expressed so well my own feeling in the matter that I cannot do better than to quote him:

"If I am not mistaken President Crosby last year included a reference to this matter in his presidential address. There is no decided and organized effort as yet to abolish the requirement, but the question is receiving more and more attention. The practical experience requirement was quite necessary under the preceptorial system, but as there are no longer preceptors and apprentices and since the burden of training incoming pharmacists is being placed more and more fully upon the colleges, the question no doubt will receive increased attention as time goes on. It is my conviction, however, that the time has not yet come for abolishing the requirement. This is an age of canned goods, ready-made things, button-pushing and a general demand for more comfort and less responsibility. The pharmacists who share this spirit are becoming more and more unwilling to bother with even a minimum of advice or instruction to the young recruits to pharmacy but are expecting the colleges to hand over to them fully trained and experienced graduates. Dean Wulling was telling me of a case of a pharmacist who buys everything he sells and who wrote on one of his printed order blanks and sent on to the Dean the following order: 'When your class graduates next June send me one fully qualified man who is willing to begin at a low salary but who can take charge of my store while I make a ten-weeks' trip to Europe leaving July 1st.' In other words this pharmacist ordered from the College of Pharmacy an article necessary in the conduct of his business just as he sends orders to the jobbers for required commodities. While this seems like a joke, the pharmacist was serious and I mention the instance only because it is illustrative.

"Now, to my old fashioned way of thinking, certain experience necessary for the right conduct of even the average modern drug store can be acquired only in the drug store itself. This is said with no disparagement to the colleges."

FOUR-YEAR MINIMUM COURSES FOR DEGREES IN PHARMACY.

I have written and said so much in advocacy of such courses, that I must not weary you with repetition, but I should bring to the attention of pharmacists everywhere that not only certain faculties, but many practicing pharmacists favor such courses. In Minnesota, the pharmacists through their State association joined the faculty in asking the University as long ago as 1919 to make the optional four-year course the obligatory one. The University Regents granted the request two months ago at their April meeting. The University of Ohio went on a minimum four-year course basis last fall and other universities are working toward the same end.

RESEARCH IN PHARMACY.

Retail pharmacists do very little research. They could do more, but they let "George do it," with the result that many possible contributions are lost to phar-

macy. I should urge all who have not already done so to read a recent address on "Pharmaceutical Research," by Dr. H. V. Arny, Chairman of the National Conference on Pharmaceutical Research, and published in the current pharmaceutical journals. The address is comprehensive and inspiring and will convert any reader to the necessity of contributions on their part to research.

INCREASING THE COLLEGE PREREQUISITE TO THREE YEARS.

The two-year prerequisites on the statute books of many States were placed there to correspond to the two-year courses of the Conference Colleges. Now the Colleges, with the support of the National Association of Boards of Pharmacy, have gone to a three-year basis and logically the prerequisite States, and all others it is to be hoped, will now amend their laws accordingly. It is interesting to know that the Minnesota State Pharmaceutical Association has already instructed its Legislative Committee to seek such an amendment at the next legislative session early in 1927.

PROFESSIONAL STANDARDS.

I have already referred to professional standards in other divisions and I need say further only that associations could do much to uphold standards by creating standing committees to whom could be entrusted the maintenance and up-building of professional ideals and practice and the observance of professional dignity commensurate with the responsibility and high service aims of the calling. Such committees could well stimulate greater adherence to such codes of ethics as that of the AMERICAN PHARMACEUTICAL ASSOCIATION and which I warmly commend to all pharmacists.

BUSINESS STANDARDS.

Most druggists of to-day are not good business men. For their professional practice they have had a training represented in its minimum degree by the Board Examinations, and while improvement in that respect is still necessary, the public is fairly well protected against professional incompetency. But in the commercial aspect of the average druggists' activities special training has not been thought necessary and as a result druggists find it difficult, as a rule, to compete successfully with business based upon a special training. Self-interest would indicate the desirability and even the necessity of a preparation on part of the druggists for the most advantageous conduct of the commercial end of their activities. Druggists trained in modern and approved and tested business methods have found that the time and money expended in such training has been a most profitable investment.

PHARMACISTS AND PUBLIC HEALTH.

Pharmacists with physicians have always contributed much to public health through a service helping to restore the sick to health. Public health aims to keep the well from becoming sick by prevention methods. Much of the service given by pharmacists is concerned with prevention so the service is now to the well and the sick. The drug store can become more of a health agency than it already is and pharmacists, by virtue of their training, can efficiently help public health in many ways, which time does not permit to enumerate, but which will suggest themselves to all who give the matter thought and attention.

CONCLUSIONS.

Now to summarize: We could start to do the following things:

- Encourage the cooperation and team work of the associations, colleges and boards;
- Study thoroughly the Charters' Study of Pharmacy from the functional standpoint and create therefrom a program for the rapid rehabilitation of professional pharmacy;
- Select more carefully those who are to be admitted to pharmacy;
- Create sections in associations to organize and accomplish more effective work within the associations;
- Pay more attention to the classification and recording of pharmaceutical history;
- Give hospital pharmacists their merited recognition, standardize their ranks and admit them to the councils of pharmacy;
- Build up pharmaceutical business on scientific lines where competition will find it difficult to follow;
- Enlist the interest of physicians in the new revision of the Pharmacopœia;
- Promote the establishment of a greater number of fellowships and scholarships;
- Try out the district meeting idea;
- Try out the regional meeting plan;
- Display the Northwestern Pharmaceutical Bureau Publicity Bulletins;
- Study the Drug-store Experience requirement in the light of the present day;
- Encourage higher training in pharmacy;
- Do more research;
- Increase the college prerequisite to three years;
- Establish effective standing committees on professional standards;
- Encourage business training for the druggists who devote themselves primarily to trade;
- Take greater part in public health activities.

COMMITTEE REPORTS

REPORT OF THE COMMITTEE ON PATENTS AND TRADEMARKS.*

BY F. E. STEWART, CHAIRMAN.

Your committee, in previous reports, has presented the following incontrovertible facts—incontrovertible because supported by the Constitution of the United States; also by the copyright and patent laws founded thereon; also by the decisions of the Supreme Court:

"Any article of manufacture, unless it be protected by a patent, may be made and sold by any person. (Report of Commission appointed under Act of Congress approved June 4, 1898, to Revise the statutes of the U. S. relating to patents and trademarks, trade names, etc., Senate Document No. 20.)"

"An inventor has no right to his invention at common law. He has no right of property in it originally. The right which he derives by patent is a creature of the statute and of grant, and is subject to certain conditions incorporated in the statutes and in the grants. (A. M. H. & L. S. & D. Mach. Co. vs. Am. Tool & Mach. Co., 4 Fisher's Pat. Cases, 294)."

The patent law requires that "the invention shall be *new* and *useful*; that the device, manufacturing formula, method or design for which he seeks protection is not known or used by persons other than the inventor; has not been patented in any country before, and is not in public use or on sale or has not been two years prior to the application for patent."

The statute enacts, that, "Before any inventor or discoverer shall receive a patent for his invention or discovery, he shall make application therefor, in writing, to the Commissioner, and shall file in the Patent Office a written description of the same, and of the manner of making, constructing, compounding, and using it, in such full, clear, concise, and exact terms, as to enable any person skilled in the art or science to which it appertains, or with which it is most closely connected, to make, construct, compound, and use the same; and in case of a machine he shall explain the principle thereof, and the best mode in which he has contemplated applying that

* Des Moines meeting, 1925.