

Four applicants were accepted by reciprocity: Carl H. Ackermann, of Minnesota; R. Baline Bramble, Washington; K. G. Cruickshank, Washington and Allen J. Sheppard, Nebraska. The Board adopted the following rules affecting registration by reciprocity at the meeting:

1. Applicants must have had at least one year's practical experience in the State from which they wish to reciprocate.
2. Reciprocity registration will not be granted an applicant who has been unsuccessful in passing an examination before the Oregon Board.

The Board of Pharmacy recently met at Corvallis with twenty Oregon druggists and the faculty of the School of Pharmacy of the Oregon State Agricultural College and assisted in outlining a practical course of instruction in the model drug store at the school.

Pennsylvania.—Secretary Kramer reports that eighty-five of the 152 candidates successfully passed the Pharmacist examination and forty-one the Assistant examination, both of which were held during October.

Rhode Island.—An examination meeting of the Board was held at the State House, Providence, on December 6, 1927. Report of the number taking and passing the examination was not ready at the time this item went to press.

Texas.—John A. Weeks, of Ballinger, President of the Texas Board of Pharmacy, recently opened a beautiful new drug store in the Hilton Hotel at Abilene.

Virginia.—The Board of Pharmacy conducted examinations at the Medical College of Virginia, Tuesday and Wednesday, November 15 and 16, 1927. There were six applicants for the registered pharmacist certificate and four were successful in passing. Eighteen wrote the assistant paper and three of this number passed. This was the smallest class to come before the Board in years.

The following reciprocal applicants were granted registration: C. V. Davis, Harry W. Walker and Fitz L. Furr, all of North Carolina; H. L. Day and Jack E. Pearlove, both from the District of Columbia; Richard T. Sanner, of Maryland; and William T. Utsey, of Mississippi. The next examination will be held in June 1928.

MODERN-DAY MERCHANDIZING.*

BY A. L. I. WINNE.

Times have changed during the past decade or so, and the retail merchant, be he drug merchant or other, who has failed to note this fact would do well to place the blame for his failure to do so where it rightly belongs—on himself. Asking questions such as "what is the matter with pharmacy?" and telling the world that "The Druggist Is More Than a Merchant," do not make a ripple in the economic mill-pond. To meet modern-day conditions any merchant has got to dust about and find out what is going on in the world, get a line on the whys and wherefores of these newer activities, and put some of them into practice.

Making money in the drug business to-day is not as easy as it used to be. It is almost impossible to make money on the basis of business as conducted twenty years ago, and fortunate indeed is the merchant who does not keep step with the times and yet escapes the red flag of foreclosure.

I am not going to attempt to discuss how some stores make a go of their businesses, nor to touch upon the many factors which contribute to the failure of others. The literature of pharmacy is full of such information, and the live wires in pharmacy read it and profit by it. What I want to touch upon briefly here bears from another angle.

I have reference to "cut-price" selling and chain-store competition. The most

* Section on Commercial Interests, A. Ph. A., St. Louis meeting, 1927.

of what has been said on these two subjects, which might conveniently be considered as one interrelated subject, has had a tendency to lead the rank and file into a false position of great expectation of conditions which I do not believe will ever materialize. The average retailer has been fed on propaganda of price standardization, led to believe that if we could secure a law allowing the manufacturer of identified merchandise to control the resale price, price cutting would be a relic of the past, and that chain stores would be cornered up where we could make them stay put, and that all would be smooth sailing ever after. Too many retailers are pinning hope on such an eventuality, and are not giving thought to how best to make the most out of their opportunities. We are not doing them a kindness in telling them that all their worries will be over if we can ever secure the enactment of such a measure as the Fair Trade Act, which has sprouted from the Capper-Kelly Bill, and which is the last word in price-control legislation.

Such a law would be of the greatest assistance to the average retailer, and we should all work early and late for the passage of some such legislation; but we should at the same time try to drive home the information that such a bill would only be a crutch for sick business to lean upon, and would not be an eight-cylinder speedster guaranteed to carry any retail drug business over all bumps and through all ruts and land it safely in the promised land of Success.

Cut-price selling is here to stay, and chain stores are but in their infancy. We may just as well get those two facts straight, and govern our future activities accordingly. Price standardization laws will, if enacted, control but a small fraction of the merchandise sold through drug stores, and the custom will not become taboo until the public knows the system for what it is and then decides that it wants no more of it. That day is a long way off, first, because the public is dull and indifferent, and will be a long time getting on to all the curves of the predatory cut rater, and the cut rater who is not predatory, and the cut rater who cuts to meet competition and the cut rater who does not know why he is cutting but cuts just the same, just because everybody else is doing it. When human nature changes to the extent that the average individual isn't on the lookout for something for nothing, then cut-price selling will stand a chance of being relegated to limbo. That change will probably not come about during the lifetime of the present generation, so we may as well set our sails as best we can to meet the situation as it is.

Chain stores have been with us for but a few years, comparatively speaking, and the public seems to like them. We are fooling ourselves when we complacently say that we have it all over the chain stores, we can give service that they cannot hope to give, we have personality and they have no way of meeting us on that score. We must admit that they can beat us on prices in many instances, but we can make up for that by offsetting virtues of many kinds. We are kidding ourselves; chain stores have grown out of experience based on sound economic facts, and organized capital knows that they can be successfully operated under competent management. They are no longer experimental, and we shall see them grow and expand and spread out into the suburbs and into the smaller towns, in the drug line, just as they have in the grocery line. They may not give the professional service which the competent pharmacist is able to render, but they can skim the cream off the drug business and make it mighty uncomfortable for the independent pharmacist if he is not wide awake to the situation and smart enough to hold his own.

I invite you to consider for but a minute the situation in the grocery line. You see small chain-grocery stores located in almost every community large enough to support any kind of business. These stores are usually run as one-man stores. This man is usually styled the manager, and he may have a boy or two to help out during rush hours, but in the main he does his own work. He is on a small salary, and must earn the bulk of his pay in commissions on the goods he sells; he must build up volume. He usually does it so well that he puts the little neighborhood grocer out of business. How does he do it? Prices go a long way to help him, but isn't he usually—think of those with whom you have come in contact—a rather pleasant fellow? Hasn't he personality? Of course he has, and he builds his business on it just as surely as the independent grocer tries to build his. He makes friends in the neighborhood in which he settles down, and he sells them the goods. If he doesn't then another manager is put in there who can do so. You know that this is true. Why then say that the chain-store druggist cannot have personality? Aren't we trying to persuade ourselves that a thing cannot be so, when we know that in most instances it is so?

The fact that a great many independent druggists are highly successful merchants shows that the live, wide awake man can make a go of the retail drug business to-day, just as he always can of whatever he undertakes. We want to train the young pharmacist carefully in present-day economics, and teach him to keep his eyes open to the opportunities that are his, and to give attention to the methods used successfully by his competitors instead of ignoring them and condemning them because he does not understand them. Tell him that cut-price selling is here to stay, and that if he feels the need of engaging in the practice in his own business to do his cutting as intelligently as do the chain stores, and not blindly and without reason. Tell him that chain-store competition is likely to be with him for a long time and to study how they do business and try to copy as much of their system as is useful and to improve on their methods if he can. With his training in pharmacy and the freedom to conduct his own business as he thinks best he should be able to cope with the chains, but he cannot afford to ignore them. Study them—fight the Devil with fire.

POISON CONTROL MEASURES IN VICTORIA, AUSTRALIA.

Approval has been given by the Victorian State Ministry to a measure amending the Poisons Act, to provide among other things, for better control of potassium cyanide and methylated spirits, and for the more efficient labeling of poisons. The Minister for Health, in discussing these proposed amendments, stated that, without hampering in any way the mining industry which uses potassium cyanide for the treatment of refractory ores, the provisions relating to the control of that poison would be made more drastic. No undue restrictions would be placed on the sale

of methylated spirits for manufacturing or domestic purposes, but it would be made an offense to drink such spirits. The sale of narcotic drugs would be better regulated. The Victorian dangerous drugs law would be brought into line with the British Act of 1925. One clause would require the labels to show the name of the antidote to the poison contained in the bottle. To minimize the danger of poison being taken in mistake, the bill would forbid the use of poison bottles for other purposes. It is also proposed to compel all persons responsible for the custody of poison or poisonous substances to label them "Poison." (Trade Commissioner Elmer G. Pauly, Melbourne.)