

EDITORIAL

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PUBLIC HEALTH BULLETINS.

THROUGH the coöperation with the Surgeon-General of the Public Health Service, Dr. Hugh S. Cumming, a series of Public Health Bulletins will be prepared one or more to be issued monthly.

Public health matters concern every individual, and it is an opportunity for pharmacists, as well as a privilege, to coöperate with public health agencies in disseminating reliable information concerning public health and the great work which is being done by governmental and other agencies for its protection and promotion. Pharmacists are qualified to render a distinct service because of their strategic position and intimate contact with the public.

It is the aim of this service to bring about a coöperative relationship with the Public Health Service to which the Surgeon-General has given hearty encouragement and it is hoped that members will offer suggestions to the end that these contributions may prove a real service to pharmacy and thereby to the public. The first of these articles is by Surgeon-General Cumming on "The Pharmacist and the Public Health," and the second is contributed by Chairman E. Fullerton Cook, of the Committee on Status of Pharmacists in the Government Service, on "The Pharmacist's Responsibility in Community Health."

Some of the Bulletins to be issued will contain messages to the public which may be used as personal bulletins by pharmacists in their places of business, as messages to their patrons or in newspapers, for promoting a better understanding of the service of pharmacy in their respective localities. With your helpful coöperation we hope that this endeavor will contribute to pharmaceutical progress.

E. G. E.

BI-CENTENARY OF ANTOINE BAUMÉ.

ANTOINE BAUMÉ, best known in connection with the hydrometer bearing his name, ranks high among the French pharmacists of the 18th century, who contributed largely to the chemistry of that period. He was born—February 26, 1728—at Senlis, about twenty-five miles distant from Paris, where his father was an inn-keeper. When thirteen years of age Antoine was apprenticed to a pharmacist of Compiègne, a town in which a royal palace of a previous century was rebuilt during the reign of Louis XV; the statement is incidental; however, his acquaintance in Compiègne may have given Baumé a hearing before the King, referred to hereafter.

In 1745 the young pharmacist came to Paris, where he found employment with Claude Joseph Geoffroy, the last of a lineage of pharmacists who had held this business from 1638 till 1762; the employer of Baumé was then about sixty years of age and highly regarded at home and abroad—he was a member of the Academy of Sciences and a fellow of the Royal Society of London; other members of this family were prominent among the scientists of that period. In the Geoffroy

pharmacy Baumé served for six years, in charge of the laboratory. It was during this period that he made application to be received as a member of the Paris Guild of Apothecaries; objections were raised to his admission on account of deficient education and because he had not passed his apprenticeship in Paris. Baumé appealed to the King and, in 1752, was duly enrolled among the master apothecaries of Paris. It was in this year that Geoffroy died, and Baumé opened a shop in the rue St. Denis, opposite the Church of Saint Leu, having been aided financially by Joseph Macquer, Master of Pharmacy and Doctor of Medicine, known for a number of notable chemical discoveries and as director of the royal porcelain factory at Sevres; potassium arsenate was for a long time known as "Macquer's arsenical salt"—"Sal arsenicale Macquer." In 1763, the business which Baumé had founded was removed to rue Coquilliere where a wholesale as well as retail business was carried on.

In 1762, Macquer had started a course of chemistry lectures with Baumé as the demonstrator. These lectures were continued for about twenty-five years and were attended by hundreds of students many of whom, later, honored their preceptors by carrying on the work in which they had become proficient.

In the same year (1762), Baumé's "Eléments de Pharmacie Theoretique et Pratique" appeared and this classic treatise passed through a number of revisions, both English and French. In 1765 he published his "Manual of Chemistry," and in 1773 "Chemie Experimentale et Raisonnée." During the latter year he was elected member of the Academy of Sciences, in the place of Lavoisier, who had been created an associate.

Baumé disposed of his business interests in 1784, but in later years he suffered financial reverses and reëntered business as a partner of his son-in-law Louis Margueron, a military pharmacist who, in 1800, opened a retail pharmacy, not far from Baumé's first shop; this partnership continued until the death of the latter, October 15, 1804.

During the more active years of his business life Baumé established a factory for the manufacture of sal ammoniac and devised a process of bleaching silk. He is, perhaps, best known, as previously stated, in connection with the areometer which bears his name; however, as pharmacist he deserves an honored place in pharmaceutical history for his successful efforts in removing many of the traditional superstitions which for a period burdened and afflicted the materia medica with polypharmaceutical combinations of disgusting ingredients. Baumé contributed largely to the new nomenclature¹ of chemistry proposed by De Morveau, Lavoisier, Berthollet and Fourcroy. He always searched for truth; this and his industry characterized him. Pharmacy claims Baumé as a pharmacist and joins with other scientific and professional organizations in the celebration of the two hundredth anniversary of his birth.

E. G. E.

THE PHARMACIST AND THE PUBLIC HEALTH.

BY HUGH S. CUMMING, SURGEON-GENERAL, U. S. PUBLIC HEALTH SERVICE.

THE usually strategic position and the familiar association of the drug store with medical matters in the popular mind places pharmacists in a position to

¹ JOUR. A. PH. A. (July 1926), 596.

render a material service to the community in connection with public health activities. It is the privilege, as well as the duty, of a pharmacist to cooperate with public health agencies in the dissemination of reliable information concerning the public health, and to assist the constituted public health authorities especially as relates to communicable diseases and the protection of biologic products. It is, therefore, evident that a pharmacist should possess information of wider scope on matters pertaining to the public health than is possessed by the average layman.

Health officers generally have recognized that health education is an important means for promoting public and personal health. Broadly speaking, public health in a given community depends upon the personal health of each individual. To give information on any subject to everyone in a community is a tremendous task, and one that can never be finished. It has no end because new facts are being constantly developed through research and new people are being added to each community through new arrivals and the growth of children to the teachable age. Those who are trying to promote health education for the public have, therefore, the task of imparting an ever-increasing mass of information to an ever-changing population.

The magnitude of such a task, instead of being a cause for pessimism, should be a challenge to persons interested in the public health to develop a plan whereby each community may feel a sense of responsibility for the important task of health education. Members of the profession of pharmacy can play an important part in the matter of health education.

The facts for health education are developed by the laboratory workers, those engaged in scientific research of all kinds, the field workers in epidemiology, the vital statisticians, who keep the record of progress, and those clinicians who are close observers of their patients.

Every person should have a working knowledge of what he should expect in the way of health education from his physician, dentist, pharmacist and nurse, and from the local health organization. In addition to this, he should know what an intelligent and well-organized state department of health may do for the promotion of the health of the citizens of the state, and what may be expected from the Federal Government in the way of health conservation. In order that the pharmacist may measure up to his responsibilities in the matter of the demands for health information, he must, of course, be properly informed with regard to such matters.

The Editors of the JOURNAL OF THE AMERICAN PHARMACEUTICAL ASSOCIATION and of the Journal of the National Association of Retail Druggists have kindly offered space in their columns in which public health information may be furnished to members of the profession of pharmacy throughout the country. It is possible that other publications reaching pharmacists will also utilize such information.¹ The Public Health Service is glad to have the opportunity of bringing to the members of the profession of pharmacy, from time to time, matters pertaining to the public health that are of importance or of current interest.

When health information has become more general, we should be near to the dawn of a new era in health education; when the citizen develops a sense of re-

¹ A number have signified their willingness, and speaking from past experience, all of them may be relied upon for their invariable, most helpful cooperation.

sponsibility for his own health he will be in a position to demand competent and adequate service from all health authorities. He will also be in a position to be critical of the kind of service he receives and demand that such service should approximate in efficiency the result which it is possible to achieve with weapons against disease which science has placed in our hands. Then the value of right living and personal hygiene will be understood and appreciated as well as the true benefits conferred by safe water supplies, safe milk, proper disposal of sewage and excreta, the value of birth registration and disease reporting, the control of communicable diseases, and the health promotion value of school hygiene, industrial hygiene and scientific research.

The public, generally, is rapidly awakening to the possibilities of preventive medicine due to the tremendous volume of publicity on health matters that has developed within the past few years. It will be well, however, to remember that the circulation of misinformation by individuals and unrecognized organizations must be avoided. With the development of general interest in public health matters there has sprung up, in certain quarters, an effort on the part of individuals and organizations, for selfish reasons, to disseminate quasi-scientific information that is incorrect, misleading and harmful.

It is, therefore, of great importance that health information and education come from recognized authoritative sources as medical societies, County, State and Federal health agencies, life insurance companies and unofficial specialized health groups.

Through health education each individual will be made to realize the fundamental importance of national health to national happiness and prosperity. He must not only feel that keeping himself in a health condition enables him more than anything else to live a successful, useful and happy life, but that in doing so he is fulfilling one of the essentials of good citizenship.

THE PHARMACIST'S RESPONSIBILITY IN COMMUNITY HEALTH.

BY E. FULLERTON COOK.

CHAIRMAN OF COMMITTEE ON STATUS OF PHARMACISTS IN GOVERNMENT SERVICE,
A. PH. A.

INTELLIGENT civilization thinks in terms of "better health" when planning for comfort, happiness and even prosperity.

The number of agencies, public and private, directly coöperating in the maintenance or restoration of health, is startling, and the percentage of expenditures for this purpose, is a large proportion of the cost of living.

Within the memory of many living men and for the past 4000 years, the physician and the pharmacist stood almost alone, shoulder to shoulder, in their struggle against disease.

To-day their efforts are supplemented by a vast number of national, state and local organizations including, in Washington alone, more than one hundred Government Bureaus with substations in every important centre in the United States and its territories and possessions. In addition there are State and City

Health Boards, Food and Drug Administration Bureaus, the Red Cross, Public Health, Nurses' Stations, Tuberculosis Clinics, Baby Clinics, Physical Development Institutions and thousands of splendidly equipped hospitals and sanitariums.

Even the large life insurance companies are urging and freely supplying regular physical examinations for the detection of incipient disease and the popular literature of the news-stand advises and inspires more sane living for better health.

In this gigantic program to advance the health of the nation, what part is being taken by the two original factors in public health promotion? It is time that pharmacy should frankly face this question and adjust its plans, if necessary, to work in full harmony with the scientific, modern forces guiding these most vital activities.

Those controlling the profession of medicine within the field of hygiene, diagnosis, surgery, research into functional and causative forces in normal and diseased tissue and also in applied, organized medicine may be commended for intense activity and notable advance.

In pharmaceutical manufacture, in the establishment of standardized therapeutic agents, in the production of biological products, and in the synthesis of new organic drugs, the pharmacist is progressive and scientific and may be proud of the accomplishments.

Now in this modern program which is not a theory but actually here, what shall be the policy and service which the trained community pharmacist should supply?

Through the working of natural economic laws the pharmacist must find his right place in this development and render a needed service, or automatically he will be eliminated.

First, he must collect, manufacture and standardize in convenient and dependable form those products which have stood the test of clinical and laboratory trial and are known to be valuable therapeutic agents; then he must be trained, equipped and strategically located so that the physician and the public may obtain the prompt dispensing of these medicinals.

Sometimes this service is best rendered in the hospital dispensary, but more often in the pharmacy, privately owned and controlled.

He must also be prepared to supplement the treatment of the physician in the homes of his community by supplying, in addition to prescriptions, those other requisites to modern treatment—sterile solutions, the more simple clinical tests, sick-room supplies, biologicals, etc.

His service to the public directly must also be in harmony with the professional status he assumes when coöperating fully with his physician friends. To maintain this position every one admits the need for excellent judgment and a well-formulated policy, for the temptation to step outside of the legitimate field of pharmacy into that of medicine is constantly presented.

But here is where pharmacy finds its big opportunity to become an important factor in the national public health program. There are more than 50,000 retail pharmacies in the United States; they are strategically located so as to easily reach those who need help. The traditions of the community are such that the first place to go for advice and help in time of trouble is the drug store. Perhaps this is primarily so because it is free, but it would not continue from generation to genera-

tion and become traditional if the type of men in pharmacy during the past had not proved their worth and met the need.

To the pharmacy to-day the people go for help in sickness and in trouble; the potential possibilities for helping and serving are tremendous and pharmacy must not now fail in meeting this confidence with wise and trained advice.

The Charters' report which scientifically studied the demands made upon the practicing pharmacist of to-day, found that everywhere the public go to the drug store for information—it is how to destroy insects, how to disinfect clothing or an out-building, how to pasteurize milk and a thousand questions that have to do with the problems of living. The real pharmacist is the adviser on questions domestic, political, mechanical, postal and hygienic and yes, often, therapeutic.

Here is the real problem! Pharmacy and medicine must ultimately reach the answer to this question.

The pharmacist is not qualified or authorized to recommend medicines for specific diseases. He properly sells simple home remedies, the use of which is common knowledge but there his function in this field ends.

But neither is the physician authorized nor qualified to dispense his own medicines; the best thought in medicine acknowledges that the physician who hands out ready-made pills and tablets in his own office cripples his medical service. Here again there are legitimate exceptions, for the country doctor miles from a pharmacy must of necessity carry his medicines.

Why should not pharmacy and medicine face these issues honestly, study the problem and adopt and promote a code of practice which will insure a program and teaching for the best interest of the public health and that in the long run will surely work for the prosperity and growth of a legitimate and virile practice of medicine and pharmacy?

The proposed coöperation of pharmacy and the Public Health Service, through the combined efforts and publications to be issued jointly by the Surgeon-General and Editor E. G. Eberle, will be a forward step in this direction.

SMUGGLING OF NARCOTICS AND NARCOTIC ADDICTION.

Colonel L. G. Nutt, Deputy Commissioner of Prohibition, in testifying before the House Appropriations Committee, said there was very little diversion of narcotics in legitimate channels, but there is considerable smuggling by ships' crews and through the borderland. He further testified relative to three surveys which had been made in recent years and the estimated number of addicts was about 100,000, but he was convinced there were not that many; "propagandists tell us," he said, "how terrible the menace is and number the addicts anywhere from a half million to four million."

In some instances the desire to get into the lime-light seems to compete with the spirit of helpfulness. The seriousness of the situation is to be deplored and everything should be done to eradicate the evil, but exaggeration, no matter what the purpose, does not help as much as knowing the facts. Narcotics for unlawful supply of addicts are smuggled into the country and handled by unscrupulous individuals, who have no connection whatever with medical practitioners nor with the drug trade. Measures for the regulation of dispensing of narcotics had their inception in the AMERICAN PHARMACEUTICAL ASSOCIATION.
