

# EDITORIAL

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## SOME OF THE OUTSTANDING VIEWPOINTS OF THE A. PH. A. MEETING.

**T**HIS writer questioned a number of those in attendance at the Miami meeting relative to the activated thoughts that found expression in discussions, resolutions and addresses. In every instance the growing desire was to have pharmacy render a full measure of service as a public health activity; that means should be made effective for a thorough understanding of prescription practice, that everything possible should be done to have the standards serve their purpose and become thoroughly understood by physicians and pharmacists. These thoughts found expression in Resolutions Nos. 4-12 and again in Resolutions 14-20, 25-29; relatively important are those having reference to pharmacy in government and hospital service, Resolutions 21 and 32. A careful perusal of all of the resolutions will bring out the thoughts which formulated them.

A fine coöperative spirit was shown by the divisions of the government services in having representatives at the meeting to confer on important subjects; thus, the resolution on pharmacy corps resulted from a reasonable accord, and the report of the Committee on Pharmacy Corps closed with words that evidenced a belief in one another, and reason that cannot be put aside. "The committee feels that this ASSOCIATION and the Surgeon General should be in accord upon the legislative program if possible . . . Whether the Reece-Copeland bill or the Wainwright bill is endorsed, common sense would seem to demand an agreement of all parties to be effected, if possible, before the real offensive is made to secure passage of the measure."

Relative to the surveys and the progress in N. F. revision, reference is made to the Association Business of this issue, the resolutions and discussions. Dr. J. J. Durrett stated that the Pharmacopœia and National Formulary will assume greater importance in the future. He explained that the department applied the standards, but did not prepare them. It was pointed out that it is more imperative than ever that the legal standards be correct, free from ambiguity and that they be kept abreast of scientific developments. In view of these facts provisions were made for issuing supplements of the National Formulary, should such action become necessary in the interim of revisions.

### ETHICAL RESPONSIBILITIES OF THE PHARMACIST.

In the foregoing the professional services rendered by the pharmacists are readily recognized, but their services have further application and in articles they do not manufacture. The Commission on Proprietary Medicines in its Miami report states that "owing to the peculiar nature of his occupation the pharmacist occupies a position of special trust and responsibility toward the community which he serves." Your careful reading of this report in "Association Business," is invited. The closing paragraph is embodied in this comment:

"It is the opinion of this Commission that the professional obligations of the pharmacist require that he should absolutely refuse to be connected with the

distribution of fraudulent or worthless package remedies, or to lend his name or reputation in aid of the distribution of remedies which are advertised in extravagant or misleading terms, or which are otherwise exploited in a manner inconsistent with the better traditions of pharmacy.”

The succeeding issues of the JOURNAL will carry the message of pharmacy as embodied in the transactions of the Miami meeting.

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### THE SALE AND DISPENSING OF MEDICINES.

IN THE decision handed down in the Pennsylvania Ownership Law the judge said:

“It, therefore, will be seen that without violating laws, *the validity of which is conceded*,<sup>1</sup> the owner of a drug store, whether a registered pharmacist or not, cannot purchase or dispense impure or inferior medicines; he cannot, unless he be a licensed physician, prescribe for the sick; he cannot, unless he be a registered pharmacist, have charge of a drug store or compound a prescription. Thus, it would seem every point at which the public health is likely to be injuriously affected by the act of the owner in buying, compounding or selling drugs and medicines is amply safeguarded.”

On July 16th the New York Ownership Law was upheld in a decision of the Supreme Court: Justice Edmund H. Lewis, pointed out that the skill of the physician may be largely offset by inferiority in drug and prescription service and that “public health means sound health and it may reasonably require carefully regulated pharmacies to preserve it.”

Secretary J. W. Dargavel, of the Minnesota State Board of Pharmacy, reports on a decision rendered July 17th by the Minnesota Supreme Court, relative to the status of milk of magnesia, under the state law.

The case was filed against F. W. Woolworth Co. and others, and the appeal was that of the defendant mentioned. A purpose of bringing an action was to determine whether the position of the Board of Pharmacy was correct and also to bring out more clearly how far the Board could go in the restriction of the sales of drugs, medicines and poisons. Milk of magnesia being a more-or-less harmless medicine, but a U. S. P. product, it was thought by the Board that a favorable decision would place it in a position to know what sales of medicines could be restricted to pharmacy, and the case was brought up in the municipality of Minneapolis before Judge Clyde R. White. The Board was granted a favorable decision in the lower court and the defendants appealed. A syllabus of the decision is laid down in the following:

“1. Milk of magnesia, manufactured, distributed and sold in the manner shown by the evidence stated in the opinion, was not a proprietary medicine.

“2. The pharmacy law, 5814, G. S. 1923, applies to sales of medicines, prepared, sold and used solely, or principally for medicinal purposes, which are not patent or proprietary medicines. The facts that such a medicine, properly prepared, is harmless, and that it is sold in the original package of the manufacturer, do not except its sale from the restriction placed thereon by that section.

“3. The pharmacy law is held constitutional as against the objections that, as applied to the sale of a medicine, sold in the original package of the manufacturer, which medicine, when

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<sup>1</sup> Italics ours.

properly prepared, is harmless and in general use as a household remedy, the law is arbitrary, unwarranted, and without any benefit to public health or welfare, and is an unlawful and unreasonable discrimination and restraint on the sale of an article of merchandise."

Defendant thought that milk of magnesia was a proprietary medicine or should be so considered.

A number of references were cited and the conclusion of the court was that the milk of magnesia in question was not a proprietary medicine.

Another question which required consideration was whether a harmless household remedy with a proprietary medicine be held excepted from the pharmacy law.

A number of decisions are cited, including the Donaldson case, and the Court, after reviewing the decisions, states "we find no good reason for departing from the Donaldson case and hold that a harmless household remedy not a patent or proprietary medicine sold and used solely or principally as a medicine comes within the pharmacy law restricting the sale of drugs, medicines and poisons."

The constitutionality of the Minnesota Pharmacy Law was brought into the question and here also the court decides in line with other decisions and states that the interpretation of the court of the Donaldson and Zotalis cases that they hold where a preparation is a medicine prepared, sold and used solely or principally as medicine and is not a patent or proprietary medicine, then its sale comes within the law and is restricted to sales by or under the supervision of a licensed pharmacist; the fact that it is a harmless household medicine does not except it from the law and that as so appealed these cases held the law valid. The judgment of the lower court was affirmed.

Secretary Dargavel comments, "That the state of Minnesota is now in a position to clearly interpret the pharmacy law." Its constitutionality has been upheld and he points with a degree of satisfaction to the fact that Minnesota was the first state to obtain the aspirin ruling and now has clarified the meaning of its laws by carrying a case to the Supreme Court that involved the question of a so-called harmless medicine. The Board is now in position to restrict the sale of drugs used for medicinal purposes, to registered pharmacists. Another case of violation which Boards have more or less difficulty in prosecuting is represented by Kentucky decisions and these also indicate that courts recognize the service of pharmacy as essential in public health service.

#### THE RIGHT OF INJUNCTION.

We are indebted to secretaries J. W. Gayle and George Wilhelmi for a copy of the decision rendered in an appeal of a case that had been adversely decided in the lower court. Secretary Gayle is quoted in the following:

"For the last two years, the Kentucky Board, realizing the inadequacy of the penalties provided in the pharmacy law for the violation of that section of the law requiring all drug stores to be constantly in charge of a registered pharmacist, the method of asking the courts for an injunction restraining those persons who were found violating this section of the law was adopted. The result has been that perhaps more than a dozen injunction suits have been filed by the Board, each resulting in a decision in favor of the Board's contention and granting the

injunction. Only one case, and that is the appeal referred to, was decided adversely to the Board. The Board took an appeal resulting in a complete victory.

Notes on the Appeal follow:

1. Evidence—Proof of existence at particular time of fact of continuous nature gives rise to inference within logical limits that it exists at subsequent time.

2. Evidence—Where druggist was violating statute on certain date, presumption was same condition existed ten days later (Ky. Stats., secs. 2619–2635a).

3. Nuisance—Where evidence showed druggist was filling prescriptions without certificate on certain date, burden shifted to him to show there had been change in conditions before filing of petition for injunction ten days later (Ky. Stats., secs. 2619–2635a).

Nuisance—Druggists abandonment of conduct in violation of statute between time of filing petition for injunction and rendition of judgment did not render question moot (Ky. Stats., secs., 2618–2635a).

Secretary Gayle comments that a careful reading of the opinion will show that the court grants the petition of the Board particularly upon two points—First, in defense of the allegation made by the defendant that an injunction could not be maintained under Kentucky law against the commission of a crime. The court held that the violation of the pharmacy law, as set out in the Board's petition, was more than an ordinary crime and consequently the Board had the right to enjoin.

The second point was in support of the pleadings of the Board in effect, that the penalties set out in the pharmacy law were wholly inadequate to secure its enforcement and for this reason the Board, having no other remedy under the law, was entitled to an injunction adequately supported by the facts.

Aside from the importance of these decisions comment is made because they stress the professional and public health service of the pharmacist. In recent years the courts have emphasized the importance of this and, indirectly, that the regulations applying to drug stores are founded on their pharmaceutical practice.

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## SURVEYS.

REFERENCE has been made to various surveys, and comments thereon have heretofore appeared in these columns. The purpose of determining merchandising and other business factors is to improve methods and conduct, and make profits a more definite result. Good work along these lines has been done for a number of years by the Druggists' Research Bureau, under the direction of Dr. E. L. Newcomb; more recently, the Bureau of Commerce has undertaken to conduct a survey in St. Louis, and is now well under way. Surveys which are directed for studying the prescription service have been instituted and promoted; a purpose is to aid in revision work on the U. S. Pharmacopœia and the National Formulary, incidentally, to learn the extent of the prescribing of narcotics; a major object is to reach decisions on the introduction and retention of certain materia medica in the standards; another purpose is to learn, if possible, how prescription service can be made more profitable; the extent of prescription practice and how it can be improved.

Reports bearing on these phases were made at the Miami meeting and will be published in later issues of the JOURNAL, hence, no extended comment is made

at this time. Following the Pharmacopœial Convention of 1910 a survey of prescriptions was made under the direction of C. S. N. Hallberg and Clyde M. Snow; the main effort of this census was to study the extent of use of drugs, chemicals, and galenical for a guide to admissions and deletions of the Standards under revision. A number of studies have been made since the last Pharmacopœial Convention; at the Baltimore meeting Prof. Leon Monell reported on the prescription business in Buffalo, and this year in coöperation with Prof. Clarence N. Brown a report on the prices of prescriptions in Buffalo and Columbus was submitted. The report of Chairman E. N. Gathercoal on "Extent of Use of N. F. Galenicals" will be found in the February JOURNAL of this year; the valuable work is being systematized and continued. A very complete study has been made under the direction of Dr. Robert L. Swain of the prescriptions compounded in Maryland; the results are striking in the fact that with very few exceptions all druggists aided by rendering reports; another study is being made of the components of prescriptions. It is indicated that the results obtained in Maryland will be serviceable in arriving at figures for the entire country, *i. e.*, as a unit for deductions with surveys made in different sections of the country.

These surveys of pharmaceutical activities indicate an awakening and growing interest in pharmacy.

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#### POST—CONVENTION TRIP TO HAVANA.

**A**PPROXIMATELY 60 members of the AMERICAN PHARMACEUTICAL ASSOCIATION and members of their families went to Havana from Miami on Saturday, August 1st, and spent three very interesting days there.

The visitors were met at the pier by a delegation of Cuban pharmacists headed by Dr. José P. Alacan and escorted to the National Pharmaceutical Association Building. Addresses of welcome were made by the Mayor of Havana, Dr. A. P. André, Dr. José P. Alacan, President M. F. Garrido and Secretary J. Capoté Diaz of the National Pharmaceutical Association of Cuba, and responses were made by President Walter D. Adams and Chairman E. Fullerton Cook, of the U. S. P. Revision Committee. The hospitalities of Miami pharmacists and their families by no means ended with the close of the convention; only fear of omitting one or more of the good friends prevents naming the delegation who accompanied the pharmaceutical visitors to Havana; the joyful welcome of Havana pharmacists added to the delight of the visitors. On Tuesday night a meeting of members of the AMERICAN PHARMACEUTICAL ASSOCIATION was held, at which time the Cuban pharmacists heard reports of the Miami meeting and discussed the 5-year pharmacy course to be made effective in Cuba. A young lady, engaged in the Spanish translation of the U. S. P. XI, acquainted the visitors with what was spoken in the several addresses.

Visits were made to points of interest—Columbus Cathedral, the beautiful new Capitol, the Centro Asturiano Hospital, one of the most complete hospitals of the Western Hemisphere. The point of greatest interest, perhaps, was Morro Castle. Botanical and tropical gardens were visited and a whole day was devoted to a country trip—Matanzas, Yumuri Valley, Bellamar Caves. At Matanzas a typical Cuban luncheon was served.

The visit passed too quickly, for nearly everything was novel and much quite wonderful; Havana was declared not only a beautiful city but clean, due to the absence of smoke. The visitors were enthusiastic relative to their reception and the entertainments provided for them.

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THE NATIONAL FORMULARY EXHIBIT AT THE AMERICAN MEDICAL ASSOCIATION CONVENTION.\*

**P**HARMACISTS, who have recognized the recent trend throughout the country toward the development of a better and more effective understanding between pharmacists and physicians, will be interested in the results of the National Formulary exhibit at the recent A. M. A. Convention in Philadelphia.

One hears a great deal about what is the matter with pharmacy, that physicians are not writing prescriptions as formerly or they are writing only for "proprietarys" or "patents," consequently giving pharmacists nothing to do. Undoubtedly, some of these statements are true; they may be all true, but one wonders at times if pharmacists have done their share to prevent the very thing so strongly decried, or whether they have stood by with arms complacently folded, expecting conditions to remain the same for ever and ever. Have they failed to realize that times must change and that if they are to keep abreast of the times they must get in line and follow the new order of things as developed? Have they realized that competition no longer simply asserts itself in the form of a neighborhood pharmacist, but is daily found in many other forms? Have they been waiting for George to do something, not realizing that they could be helpful by a contributory study of confronting problems? The results of the National Formulary exhibit have given proof of conditions that may be improved by coördinated coöperation.

The present N. F. Committee realized when it accepted its task a year ago, that the National Formulary is not used to the extent it should be by the medical profession. Criticism has been made that this standard contains too many preparations that are seldom used; therefore, one of the first things which the Committee did, was to consider the scope of the book and, as a result, the principle of "Admission by use only" was definitely established as a basic principle upon which all admissions were to be considered. At the recent meeting of the Committee this principle was very rigidly followed, so that this particular criticism can no longer obtain in the forthcoming revision. A second criticism to the effect that certain of the preparations are therapeutically valueless has no weight whatever, as the N. F. has never made any claims for therapeutic values for any of its preparations, the idea of the Committee being only to supply formulas and standards for those preparations more or less extensively used by physicians, rightfully allowing the physicians to be their own judges as to whether or not they obtain the desired action from the preparations they prescribe. This policy is in marked contrast to that of the U. S. P. which accepts its items on a basis of proved therapeutic usefulness only.

All of the foregoing helps to explain why those interested in the National Formulary were glad to have the opportunity to prepare an N. F. exhibit at the

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\* Philadelphia, June 8-12, 1931.

A. M. A. convention. The scientific exhibits of the convention are very strictly and rigidly conducted by the A. M. A. committee in charge. This, of course, is as it should be, for the purpose of these exhibits is to present to the physicians the scientific facts and data which are the result of clinical evidence and research, so that the physicians may be better able to meet their daily problems.

#### NATIONAL FORMULARY VEHICLES.

Thus, when the opportunity was offered to the N. F. Committee, the question immediately arose—"what would be of the greatest value and the most help to the physicians in meeting their daily needs?" With this in mind, it was finally decided to present some of the elixir and syrup vehicles of the N. F., preparations which have no therapeutic value whatever, pleasant vehicles or flavoring agents for some of the more disagreeable substances prescribed in prescriptions. It was deemed that this was a very important group of preparations as far as physicians are concerned, for it is desirable that preparations should, if possible, be palatable. These preparations concern pharmacists, for the art of the pharmacist includes the making or preparing elegant preparations for the physicians' use, and these elixirs and syrups well exemplify this art.

Eight elixirs and six syrups were finally selected for the display. One quart—glass labeled—bottles were filled with freshly made material. Then an attempt was made to select a salt, the normal disagreeable taste of which would be covered or masked by the elixir or syrup in question. In several cases, with a given salt, a particular syrup or elixir proved to be practically a specific for vehicle purposes. In other cases, however, the vehicle had no specific value over another in this respect; in these instances sodium bromide was duplicated, as it represented one of the "saltiest" of salts and gave an opportunity to see just what the selected elixir could be expected to do. Four-ounce bottles of these type-prescriptions were prepared and placed beside the corresponding vehicle.

The booth, as supplied by the A. M. A., measured 7 by 10 feet, with a compo board background. A one-foot shelf two and one-half feet above the floor extended around the three sides of the booth. As this shelf was too low for our purpose, a six-inch shelf was raised about nine inches above it and the vehicles and prescriptions were placed on this second shelf, where they could readily be examined.

Fastened to the wall above each vehicle was a neatly lettered card, 11 by 28, which carried the official Latin title of the vehicle, followed by the alcoholic content. Beneath this was a list of the ingredients entering into the preparation, then a brief statement of the characteristics and particular value or use of the vehicle. Finally, neatly blocked off, was a copy of the prescription mentioned above. Running across the top of the booth on each side was a large strip sign, carrying a short message, easy to read, and thus drawing attention to the exhibit. The one at the rear carried the information:

"National Formulary."—Elixirs, Vehicles, Syrups.—A selection of flavors—colors—odors and solvents. For use in Prescriptions.

Other signs on each side read: N. F. scope.—Preparations used by physicians in prescriptions.

Prescribe N. F. Preparations.—Known formulas, uniform, reliable, ethical.

A neat library table occupied a position in the center of the booth. Upon

this was placed an open copy of the National Formulary and card, 14 by 22, carrying a message covering the scope and use of the Standard, as follows:

The National Formulary.—“...designed to supply definite formulas for preparations that are sufficiently used in medical practice, for which formulas are not included in the Pharmacopœia of the United States, and to provide standards and tests for identity, quality and purity of the essential ingredients used in these formulas for which standards are not provided in the U. S. P.—so that uniformity in the physical properties and therapeutic action of the constituents and of the preparations will be assured.”

While the National Formulary makes no claims regarding remedial action of any drug or preparation, its standards for quality and purity are legally recognized by the Federal Food and Drugs Act.

Use by the medical profession governs admissions.

As an additional drawing card, and at the same time giving the physician some tangible message to carry away with him, the high spots of the vehicles on display were outlined in a neatly printed four-page folder; the title page of this folder read as follows:

Notes for the Physician from the National Formulary. Published by the AMERICAN PHARMACEUTICAL ASSOCIATION, Baltimore, Maryland.

The two inside pages were devoted to the vehicle data as follows:

*Vehicles of the National Formulary.*—Among the many preparations offered to the prescribing physician by the National Formulary, the flavoring agents or vehicles present many possibilities of interest. They offer variations in taste and color. Some are alcoholic, others aqueous. Thus the thoughtful physician is able to prescribe intelligently and also to vary his prescription, as he desires, from time to time. A few of the more interesting vehicles were presented, giving characteristics and the medicines for which these were best adapted.

Fifty N. F. preparations, extensively used, were listed with the statement that they were the fifty most popular National Formulary preparations named in the prescription survey of the “Charters’ Report,” a nation-wide survey of the profession of Pharmacy sponsored by the Commonwealth Foundation.

#### ENCOURAGING RESULTS.

The results were most encouraging; some one was in constant charge of the booth and there was hardly a quiet moment during the day. The striking thing emphasized over and over during the entire week, was the response of the physician to what was being shown. His eagerness to receive the very information being presented and his enthusiasm over the possibilities of these elixirs and syrups in his own practice was freely evidenced. The greater number of the physicians were unaware that such a group of vehicles were available for their use, and time after time one could hear the exclamation, “Say, these are great! Why haven’t you shown us these preparations before? Why can’t I get information like this?” Or, a physician would approach the booth, reading the large card as he did so, then stop and slowly take in the entire lay-out, the complete story, as he read the smaller cards. Several of them said: “If I want to give prolonged medication I can change from one of these to another each week and make my prescriptions much more pleasant to take.” They examined each preparation, noting the odor and taste of the product, using the small paper spoons provided for that purpose.

As a result there were many expressions of appreciation because of the varying applications. The possibilities were freely explained, how the vehicles could be selected for color and flavor.

Not once during the week was a derogatory comment heard against the National Formulary or any of its preparations. On the other hand, the information which was handed out was received and accepted with thanks. While the prescriptions shown were only prepared to give a general idea and to bring out the use of the vehicles, still each and every title was carefully noted. This was particularly true with the younger men, those just finishing their college training. They were more than eager to get ideas for prescriptions and methods of prescribing, and became aware of the fact that the medical schools to-day teach very little therapeutics. Thus a real opportunity is presented in this one field for some "detailing" on official products.

The matter of "detailing" was roundly scored time after time, and those in charge of the booth were asked why products of the N. F. type could not be brought to the attention of the physicians, who would only too gladly swing into prescribing official products if they knew half as much about them as they did of the articles now being detailed.

While it has been mentioned that the N. F. itself was not criticized, on several occasions physicians called attention to the fact that when they did prescribe N. F. products, they had difficulty in obtaining them. Comment on this is hardly necessary. Any pharmacist interested in pharmacy at all will surely make up, or obtain in some way, official products called for on a prescription.

Before the week was over, an opportunity was found to discuss the results of the N. F. booth with those in charge of the exhibit, and assurance was given that space in future exhibits would gladly be granted the National Formulary, providing there were preparations of the same high calibre as those shown this year. Those who are familiar with the N. F. know that it contains many products which merit consideration and it is hoped that the A. M. A. Convention each year will find the National Formulary on exhibit, bringing professional pharmacy and pharmacists into closer touch with the medical profession throughout the country.—ADLEY B. NICHOLS.

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**CABLE NOTIFICATION AND RESPONSE OF HONORARY PRESIDENT, HENRY S. WELLCOME.**

Baltimore, August 8, 1931.

Henry S. Wellcome,  
London, England.

Am pleased to advise your election as Honorary President of AMERICAN PHARMACEUTICAL ASSOCIATION. Congratulations.

(Signed) E. F. KELLY (Secretary, A. Ph. A.).

London, August 11, 1931.

E. F. Kelly, Secretary, A. Ph. A.,

Deeply appreciate the honor conferred upon me by the AMERICAN PHARMACEUTICAL ASSOCIATION. My hearty greetings and best wishes for continued success in raising standard of scientific ethical pharmacy.

(Signed) HENRY S. WELLCOME.