

EDITORIAL

E. G. EBERLE, EDITOR

10 West Chase Street, BALTIMORE, MD.

PAPYRI AND PHARMACY.

THE Rosetta Stone¹ has made the reading of the ancient Egyptian papyri² possible, however, there are many difficulties that translators meet with in their efforts to decipher the characters of the ancient writings, and disclose their meaning to present-day minds. The Hieratic was not inscribed on the Rosetta Stone, so it was necessary first to translate the Hieratic of the papyrus. It is readily understood that successful interpreters must study the periods of the inscriptions, knowing that the development of knowledge, the viewpoints of the people, their habits and customs, may give different meanings to the characters—as a result, there is a difference of valuation of authority and opinion, based on comprehensiveness of study.

G. Elliot Smith in commenting on the monograph of Prof. James Henry Breasted³ says: "Professor Breasted's is the most ambitious attempt that has ever been made to interpret an ancient medical treatise, for he has summoned to his aid all the resources of Egyptian philology meaning underlying the cryptic phraseology. He has provided all the material on the Egyptian side so that the way is now ready to institute comparisons with Hebrew and Greek Literature, and, using the technique of Professor Yahouda's method, bring illumination to the writings of these three ancient peoples, to whom in different ways our own civilization is so deeply interested." In Nehemiah there is mention of "Hananiah, the son of the Apothecary;" in Exodus directions are given for an "anointing oil to be compounded after the art of the apothecary." The Egyptians possessed books on drugs and preparations of them in the first half of the fourth millenium, B. C. and, according to Sir E. A. Wallis Budge, Anepu, whom the Greeks called Anubis, may be regarded as the apothecary of the gods of Egypt.

Some of the papyri contain references and parts of much earlier writings; this is especially true of "Ebers Papyrus." The earliest known papyrus of medical interest was discovered at Kahun in 1889 near the pyramid of Illahun. Ebers believed he had discovered No. 40 of the Hermetic Books—The Book of Remedies, but Joachim, eminent authority, denies this; however, he says of Ebers Papyrus: "It surpasses in importance all other medical papyri in the richness of its contents and its completeness and perfection. It is the largest, the most beautifully written and best preserved of all the medical papyri." Other medical papyri are: The Edwin Smith, Hearst, Lesser Berlin, Berlin and London. In these folios are records of drugs and preparations, many of which still find application and use.

¹ The Rosetta Stone was found at the Rosetta mouth of the Nile. It is a piece of basalt and contains part of three equivalent inscriptions—the highest in hieroglyphics, second in demotic characters and third in Greek. The stone was erected in honor of Ptolemy Epiphanes, March 27, 196 B. C. In its present broken condition it is 3 feet, 9 inches high; 2 feet, 4 $\frac{1}{2}$ inches wide; 11 inches thick.

² See address of L. E. Warren in October JOURNAL (October 1931), page 1065.

³ It will interest readers to know that Professor Breasted was a pharmacist in his earlier years and is a graduate of the University of Illinois School of Pharmacy (Chicago College of Pharmacy). Our fellow-member, Sir Henry S. Wellcome, is well and favorably known in archaeological discoveries, searches and promotions.

This comment is prompted by the mention in the January JOURNAL of the "Ebers Papyrus" in connection with the pharmacy exhibit at the Chicago World's Fair—"A Century of Progress." The history of pharmacy is written into that of the Commerce and Industry of every period, and the importance of drugs has a place closely linked with foods. The study of the crude products and their preparations into materia medica have had a part and contributed to the development of literature, the sciences and arts. It is evident that no division of the Exhibits offers greater opportunities for enlisting interest of the visitors and making them acquainted with pharmacy's part in the world's progress, not only of the Century, but of the ages.

THE RESTRICTION OF THE SALE OF MEDICINES TO THOSE QUALIFIED BY EDUCATION AND TRAINING.

EVERY period has problems which must be solved or conformed to the best interests of the public. Times like the present, and probably there have been no experiences like those now prevailing, bring to the fore a realization of conditions which have not heretofore been disturbing factors.

Dr. Walter F. Taylor, writing in the *Scientific Monthly*, said: "The intellectual worker, as well as the public, has a definite responsibility for the condition under which he works." Charles G. Merrell made the following statement: "No organization or business will be of real value to the community interests that it is intended to serve unless there be born into it ideals and purposes that are not only beneficial to the drug trade but to our national life as well."

In order to be helpful, coöperation must come from within the ranks; each division of the drug-trade activities has its peculiar problems, but there are certain efforts in which all the divisions can have a part and be mutually helpful. Indecision and working at cross purposes develop weakness of which other groups take advantage for promoting their own interests. When the paramount thought is service, there is no influence for pharmacy more potent and powerful in the accomplishment of good than that of the business and professional men unselfishly banded together for the purpose of promoting the general welfare of pharmacy, and the shaping of these activities is not only responsive to our energies and ideals, but depends on how we impress the public with our coöperative efforts.

The public has no clear appreciation of the fundamentally important rôle of pharmacy included in the drug-trade activities and, as a consequence, is not as deeply concerned about pharmacy as it should be, feeling that when the individual needs the important service of a pharmacist there is near at hand a pharmacy—but will this protection be afforded him, if he is unwilling to do his part and give support during interims he considers less important? This indifference and attitude come into evidence at times and exhibit lack of thought of the fact that progress in the development of pharmacy is dependent on encouragement by the public to uphold professional ideals which may be more important in the service than conveniences and price.

Side-lines in drug stores have been augmented largely because of the fact that "the American citizen wants what he wants and when he wants it." Having brought this about there is in some sections an implied purpose to further place con-

venience above safety by permitting the sale of some drugs and preparations, under certain forms of packaging, in establishments where the salespeople are not qualified by education and training to dispense medicines, and without this knowledge there is not the realization of responsibility which comes with proper pharmaceutical training and education.

The reason for the existence of pharmacy is the service to man and under conditions when he needs protection. As good citizens it becomes the duty of pharmacists and their organizations to strengthen a rational understanding in the minds of the people of the full meaning of not only the preparation but handling of medicines and the knowledge which is essential for those so engaged. Coöperation must come from within the ranks.

In concluding this comment liberty is taken in quoting from a timely message by Robert L. Swain:

"They (pharmacists) should be made vividly aware of their importance in the proper development of the profession. They should consider themselves the visible representation of the hopes and aspirations of the calling. They should be made to see that the future value and security of the profession depend, in a very great degree, upon that public attitude which they themselves fashion and control. This does not mean, and is not meant to mean, that pharmacists should divorce themselves from the commercial activities of the drug store. A sound conception of the purpose of pharmacy would at once mark such a suggestion as destructive to the best interests of the profession and that public which it serves. These thoughts do mean, however, that every drug store should be first of all a drug store; and devoted to the fundamental and essential service which pharmacy renders, and this should be the dominant consideration. This simply means that the profession must be firmly committed to the policy that the truly pharmaceutical phase of the store should be kept uppermost. The public must be made to see, through the instrumentality of the pharmacist himself, that the drug store rests upon a dignified professional foundation. Furthermore, the public should be made to appreciate that from this professional background springs the essential and responsible service which is called upon to attain and maintain in a large measure the public health of the state."

PHARMACY AS A CAREER.*

LEAFLET No. 14—"Pharmacy as a Career"¹ is one of a series devoted to a discussion of the professions as a career. It covers the following subjects: Definition and brief history of pharmacy, standards, functions, qualifications, opportunities, women in pharmacy, salaries, census, state requirements, registration, state board examinations, the schools and colleges, degrees, student expenses, closing with a table of schools and colleges showing for each the total expense, enrollment and degrees awarded in 1932. The leaflet is written in a somewhat popular style and by one who knows from experience what the student, the student

* From A. P. H. A. *Bulletin*, January 20, 1933.

¹ The Office of Education of the U. S. Department of the Interior has recently issued a revision of the above leaflet based on the four-year course in pharmacy and it may be obtained from the Superintendent of Documents, Washington, D. C., at 5 cents per copy with a reduction of 25% in quantities.

adviser and others wish to know about pharmacy as a career. It is serviceable in making legislators and laymen acquainted with pharmacy, that medicines should not be handled as merchandise and that those engaged in the practice should be qualified by education and training.

The inclusion of a leaflet on our profession in this Career Series by the Office of Education is a further recognition of pharmacy by the Government, and the following quotations taken from it are both encouraging and significant:

"As the educational requirements for entering the profession of pharmacy have increased there has been a corresponding recognition on the part of the Government of the professional qualifications of pharmacists."

"To-day pharmacy is recognized as a public-health profession in every civilized nation of the world, and its practice in each is regulated by law. Its development as a public-health profession in this country includes advances in pharmaceutical education and training; in the legal registration and licensing of pharmacists by the States; in legislation (1) for limiting the practice of pharmacy to those licensed, (2) for regulating the distribution of poisons, narcotics and alcoholic liquors, and (3) for controlling the quality and purity of drugs and medicines; in the establishment of national and state agencies for the enforcement of such legislation for the protection of the public; and in the stimulation of research to develop new drugs and to improve standards."

COST OF MEDICAL CARE.

BY RAY LYMAN WILBUR.
Secretary of Interior.

The great problem of the cost of medical care brings more and more into focus the question of the Federal Government's relationship to medicine. One of the first suggestions brought forward is that the Federal Government should provide medical care to all citizens.

In many parts of the world this is the answer that has been given. In this country the extension of Government medical service to veterans and their families and the care of nonservice-connected disabilities has been a recent and a serious phenomenon.

Nevertheless in spite of the vast concentrations of power and authority now in Washington and the growing and dangerous tendency of the people to turn to the Capitol for all necessary reforms, we have retained in America a healthy local responsibility and control over two important functions—education and medical service. In so far as these functions are supported by taxes, the funds are assessed, collected and disbursed locally.

With no central authority attempting to enforce uniformity of action upon all parts of the country, we can try out a great variety of plans. If State action is necessary, we have 48 laboratories in which to find out what

action is most effective; if city or county action is called for, we have several thousand experiment stations.

We have no tradition that impels us to consider personal health matters as a Federal concern. We have no need of ever tying ourselves hard and fast to any one type of proposal.

In health, as in education, we should keep sharply in focus the primary function of the Federal Government as one of research and the dissemination of information. Its function here is not administration—Through *U. S. Daily*.

DRUGGIST LEGIONNAIRES.

Chicago Retail Druggists' Post No. 575, American Legion, whose membership is composed exclusively of pharmacists, and most of them members of the Chicago Retail Druggists' Association, solicits and invites correspondence with other similar Posts, if there be such. Or, Posts whose membership is largely composed of pharmacists and members of any related professions.

We would like to interchange ideas and welfare practices, to the end that we may function more usefully in our respective communities.

Our headquarters are the same as that of the C. R. D. A., Room 820, 32 W. Randolph St., Chicago, Illinois.

(Signed) MAURICE SICKEL, *Commander.*