

EDITORIAL NOTES

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DRUG NAME PRESCRIPTION REVISED BY U. S. BUREAU.

A revised list of disease names, which medicine manufacturers may not place on their labels unless the preparations have therapeutic effects which current medical opinion considers warrants the claims, has been issued by the Food and Drug Administration.

The new list differs from that of June 24, 1931, in the addition of typhoid fever, mental disturbances, jaundice, toxemia, wasting diseases, debility and "unqualified claims for use in parasitic, bacterial and fungous infestions." The list bears the revision date of November 23, 1932, but has just been distributed to the drug trade.

The revised notice follows:

It is the purpose of the Food and Drug Administration to continue vigorously its program of action under the Federal Food and Drugs Act against medicinal preparations falsely and fraudulently represented by label or circular accompanying the package as preventives or treatments for disease conditions. In determining whether therapeutic or curative claims are true or false, the administration is guided by the consensus of current medical and dental opinion as to the effectiveness of the ingredients of the product.

Extensive surveys have shown that there are still on the market many products bearing label claims which their compositions do not justify. The unwarranted claims noted have included:

Arthritis, rheumatism, gout, sciatica, joint

disorders. Appendicitis, cholera morbus, cholera infantum, dysentery. Kidney and bladder disorders, albuminuria, dropsy, cystitis, nephritis, pyelitis, uremia, Bright's disease, prostrate disorders, high blood pressure. Angina pectoris, heart disease. Bone diseases. Blood poison, cancer, carbuncles, ulcers, erysipelas, scrofula, varicose veins, eczema, psoriasis. Chicken pox, mumps, measles, smallpox, meningitis, scarlet fever, typhoid fever. Chorea, St. Vitus dance, convulsions, epilepsy, hysteria, melancholia, neuralgia, nervous disorders, mental disturbances. Tonsillitis, quinsy, sore throat, diphtheria, bronchitis, laryngitis, catarrh, asthma, hay fever. Female remedies, amenorrhoea, ovarian and uterine diseases, menstrual disorders, vaginal diseases, leucorrhoea, venereal diseases (male or female). Influenza, la grippe, pleurisy, pneumonia, sinus affections, tuberculosis. Gallstones, liver disorders, stomach ulcers, gastritis, gastro-enteritis, acidosis, jaundice, toxemia. Diabetes, wasting diseases. Goiter. Hernia. Anemia, pernicious anemia, debility, male and female rejuvenators. Pellagra. Malaria. Pyorrhoea, trench mouth. Unqualified claims for use in parasitic, bacterial and fungous infections.

The responsibility under the law for compliance with its provisions rests squarely upon the manufacturer or shipper. Manufacturers whose products bear label representations for these disease conditions or for other serious maladies should carefully consider whether or not their claims are justified in the light of present scientific knowledge.

BRITISH PHARMACOPŒIAS.*

Much of the material for the pioneer pharmacopœias was derived from collections of approved or favorite prescriptions, or from manuals or recipes compiled expressly for apothecaries. The first London Pharmacopœia (1618) did not differ materially from the worst Continental models, which it had almost servilely copied. The first Edinburgh Pharmacopœia (1699) enumerated 900 simples, and included many monstrosities, of which it was gradually purged, so that in its final issue the number of efficacious drugs was reduced to 300.

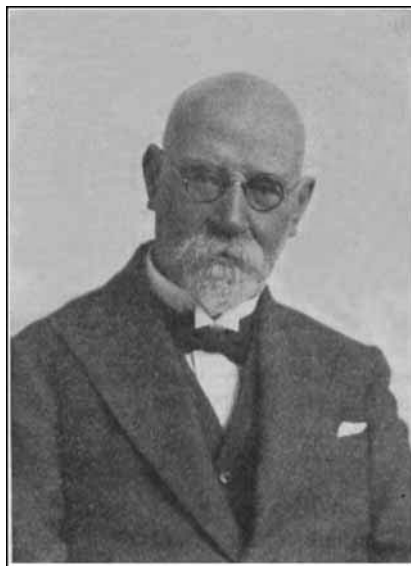
The first Dublin Pharmacopœia did not appear until 1807, and in pursuance of the Medical Act of 1858 the first British Pharmacopœia, which superseded the three National Pharmacopœias, was published in 1864. Licentiates of the Society of Apothecaries had some share in the production of each National Pharmacopœia and of the first British Pharmacopœia, but chemists and druggists or the Pharmaceutical Society, if consulted at all, were referred to only to help the medical compilers out of difficulties or as an act of condescension. Nevertheless, there were already present the seminal elements of recent developments in which pharmacy has received more adequate and equitable recognition and treatment in the work of Pharmacopœial revision.

PERSONAL AND NEWS ITEMS.

Editor James P. Gilmour has retired from the editorship of the *Pharmaceutical Journal and Pharmacist*, London, the official organ of the Pharmaceutical Society of Great Britain, in his 72nd year. During a long and active career, fruitful of achievement for the advancement of his calling, Mr. Gilmour has maintained an unceasing flow of papers, lectures and reviews, no fewer than 64 standing to his credit in the last thirty years. This quite apart from his editorial work, which he has maintained at a high standard for eighteen years and not including numerous contributions on political, economic, sociological, literary and scientific subjects to various periodicals and organs of advanced thought. During those years of service and sacrifice, first in his career as a hospital dispenser—1895 to 1903—and subsequently in a

pharmacy of his own in Glasgow, Mr. Gilmour maintained an active connection with his local associations, ultimately becoming chairman of the Pharmaceutical Society's executive at Edinburgh and finally a member of the Council of the Society in London, prior to his appointment as editor. The inception and putting into operation of the National Health Insurance Act of 1912 involved a vast amount of work in the interests of those chemists who undertook the work of filling prescriptions under the State.

We have enjoyed a large measure of reciprocity with the *Journal and Pharmacist*; in his issue of February 18th, Editor Gilmour



J. P. GILMOUR.

published a full account of The American Institute of Pharmacy, written by Secretary E. F. Kelly. Mr. Gilmour carries with him into his well-earned retirement, happily in the best of health, the good wishes of many friends and admirers, known and unknown. Apart from his hobby of foreign travel he has many interests, among others the historiography of British pharmacy: he has advocated that a historical section should be instituted at the British Pharmaceutical Conference (which meets this year in London) corresponding to that which has been so long maintained by the AMERICAN PHARMACEUTICAL ASSOCIATION.—*Courtesy of William Mair.*

On February 3rd, Columbia University awarded medals to a group of distinguished

* From "The Origins of British Pharmacy," by J. P. Gilmour.