

Wild Cherry has more of them. Its p_{H^-} -ion concentration being 4.1, it is incompatible with carbonates and bicarbonates which produce with it a very slow but definite effervescence. It is also incompatible with acids, such as diluted hydrochloric acid, which on standing produces a precipitate with this Syrup. Needless, to say, it has, in addition to this, all the incompatibilities of tannic acid, which are as is well known, quite numerous.

CONCLUSIONS.

1. Syrup of Cherry is a delicious flavoring vehicle which should largely replace the Syrup of Wild Cherry in prescribing, for the following reasons:

(a) Syrup of Cherry is more palatable.

(b) It has fewer incompatibilities: Iron preparations and acid medicaments being particularly well carried by it.

(c) Acid medication is also sometimes particularly well disguised by means of Syrup of Cherry.

2. Bitter alkaloidal preparations are better disguised by Aromatic Syrup of Eriodictyon: salty medicines, by Syrup of Glycyrrhiza.

3. Alkalinity, even that of a slight degree, is the most important incompatibility.

THE EARLY DAYS OF PHARMACY IN THE WEST.

BY JOHN T. MOORE.*¹

Dr. Moore traces the gradual growth of merchandising in the drug stores of the Middle West in an interesting manner and shows that what is familiarly known as the "drug business" is marked as something different from merchandising in general, and that it is founded on the "Spirit of Service," a fundamental trait in the pharmacist.—L. D. HAVENHILL.

It would be truly difficult to write of the early days of Pharmacy in the West; the less inspired form of narration would take the guise of personal experiences—dreamily egotistic with such marring intrusions unrealized or properly recognized and applied as modifying influences. With the fullest intention of being an assistant historian of a vanished cycle, the easy-going narrator can easily fall by the wayside of yielding to the urge of the untold funny story, the ludicrous detracting from the sober consideration of points more interesting.

The mere writing down of a series of personal trivialities might entertain, being in themselves history in the sense of having occurred. But to be informative it is necessary to deal with events in the mass, banishing the individual at the very start. It may make the performance very drab at the beginning, but can the truth be arrived at without such imposed restrictions?

* Section on Historical Pharmacy, Madison meeting, A. PH. A., 1933. This interesting article fits in with the section of the country in which the ASSOCIATION is holding its Meeting.

¹ *John T. Moore*, who died May 11, 1932, was a pharmacist in Lawrence, Kansas, for nearly 62 years; a member of the AMERICAN PHARMACEUTICAL ASSOCIATION since 1888 and a charter member of the Kansas Pharmaceutical Association. A short obituary appears in the JOURNAL A. PH. A., 21, 625 (1932). The manuscripts from which this article was prepared were given to L. D. Havenhill by Mrs. Moore, and the former presented the paper herewith at the Madison meeting.

To construe one's own activities as a type and apply them as being mere replicas of what occurred at the same time to a small number—scarcely a score or two of similar workers in a new field may be one way of tempering the mass—to snub personal intrusion—perhaps that is the most to be hoped for.

Why was what we know familiarly as the "drug business"—no matter where existing—marked as something different from merchandising in general? It was mildly an evolution of a kind. It seemed unconsciously to extricate itself from common commercial crudities and align itself into a smoother progress. It was an imperceptible growth—not a marked change.

Merchandising in its simplest form was everybody's field of operation for mere monetary gain or the necessity for making a livelihood by making a venture to get what came to the worker for his labors; always an existence and the hope of something over. The gamut of possibilities met corners of all ranks and mentalities, including trade workers, domestic craftsmen, day laborers, potential professional men and everybody.

Undoubtedly there was the small percentage that developed the drug business as others did the more or less intellectual vocations. From whence came the predilection? The rather recluse-like nature of the drug dealer as opposed to the more or less vivacious opportunity-seeking lawyers, surveyors or land sellers? Pharmacy grew around a significant few and thereby hangs a tale, maybe; a tale or guessings of origins.

The starting point for the dealing in drugs—the twilight of Western drug handling as an independent occupation—may perhaps be set down as occurring in the middle 50's. Any present-day narrator will necessarily allude to the period, because corporally he was not himself in it at the start—he was not mature enough to have been a participant, although coming into the field of work soon enough after to learn from those of earlier activities what their experiences had been, through the usual "I recollect that" conversations of the principal with his clerks; this makes the touch complete.

Many observers at various times have rather wonderingly given out the impression that there was at least a veneer of literary culture clinging to the old-time druggist; not pronounced, but with potential significance; even as the odor of sanctity was said to accompany the goings and comings of the poorer brethren of the church in medieval times. The mere taking up of the calling of course conferred no virtue or ability; why should it invite the accession to its ranks of any already literary person?

A cogitating inquiry—a superficial survey and scarcely that, educed the idea that gained strength as it was dallied with—that those assuming drug duties had played some sort of executive rôles in the states they came from; totally removed from mercantile pursuits but exercising their reflective powers to a greater extent than the rank and file of citizenship indulged in. What would be purposeless imagination in the latter would be purposeful activity in the former. This reflective trait is not of the things that weaken, though it might slumber if not in constant use. An almost proved inference followed up showed that the majority of natural drug men came from the pedagogical classes or from the crusading missionary-inclined people—the emissaries of religious uplift associations, commis-

sioned and sent to serve the later day "Winners of the West," as Roosevelt ably named the active pioneer.

The young man who taught school with perhaps the intention of extending his own intellectual advancement, was, like most of the populace, imbued with the idea of the great future of the Western country—with affluence a possibility. He, of all others, would select some staid occupation, like pharmacy, as being akin to medicine, affording his mentality freer exercise. He would welcome an echo of his old work of the school house in the always recurring botanical Latin of drug titles which lessened the strangeness of the new vocation. Perhaps a trifle like that made the beam of the deciding balance waver and tremblingly descend to a decision. The other order of worker sent West for the good he might be able to do in sympathetically building the waste into dwelling places, met the asperities of pioneering and the commonplaces of existence at once. While seeming proselyting would be unwelcome, real help to needy new settlers would be grasped gladly. The fervor of a possible missionary was replaced by a commonsense healthy activity in helpful affairs and met with appreciated welcome.

The eastern border of Kansas was one of the river "jumping off places"—a margin of the real West. The missionistic urge that impelled the normally moral, fair-minded being to become a helper in a wilderness led also to casual unsectarian discussions, tinged with a faint suggestion of a religious interest; a keeping alive of the decencies the average pioneers brought with them. There were some more active ones of this caste who were possibly subsidized to keep up some church affiliation interests.

It often followed that dependent people became sick people. The first to give help was everybody's friend—the man who went around with a Testament and a bottle of quinine—a preacher. He played the nurse, dictated the concocting and dosing of simple shack-brewed drugs and furnished the highly indispensable doles of ague medicine out of mere compassion. In more serious sicknesses he played nurse—he nearly always had to. In rough and ready surgery he had to improvise and take a doctor's part. By degrees he almost imperceptibly became the doctor in fact of the place—not college taught, but capable and a God-send. His abiding place, shack, cabin or whatever it was, became a dispensary—gradually it grew into a drug store. The rover became more and more a fixture who made some local peregrinations on occasion, but was nevertheless the original druggist of the locality. It would astonish many of us to-day to know how many successful physicians and surgeons of the West never attended a medical college at any time. A few books, observation and common sense supplied what was supposed to be inculcated in training schools. Indeed medical schools were few and at that period were largely associations of practical workers in the healing arts, who welcomed good-sized lecture fees as legitimate additions to their practice income, which in truth they were.

What is here said about the paucity of schools of medicine applied, too, to pharmacy in a much greater degree. Philadelphia, New York, Boston had colleges of Pharmacy and a few of their graduates were lost, or at least concealed, in the West. The aristocrats of the profession were a very few individuals who persisted at the river towns unknown as to attainments. In the late 60's a few of the college-taught druggists essayed to start a school of pharmaceutical training in

much the same way as the older lecturers on medicine had succeeded in doing. The pharmacy effort went through some preliminaries but never got down to business. The first Kansas drug dealers in the near-the-border interior were intellectually competent to establish practical pharmacies—many had had the chemistry, botany and languages that permeate drug studies; their application was absurdly simple then, or seems so now. A few had nibbled at the apprentice drug jobs of distant states and soon the Kansas druggist in the larger communities was a real person; to a certain extent a person conceded to be superior to the butcher and candlestick maker. And it should not be forgotten that the assumption of pharmacy was a sacrifice of a kind. Anyone in the calling could have made much money—nay, may even have become rich with more prosaic trading in a few sunlight hours, while the druggist worked “all the time.” What time he did not devote to his drugs was spent in the work imposed on him in the way of civic duties that called for the exercise of brain tissue. Be it said that he never evaded what he thought was right to be called upon to perform for the community’s good.

It must be understood that in these early days and in times very much later, an exclusive drug business was impracticable. Some reasonably non-conflicting merchandise, collateral things, had to be sold to assist in making three meals a day and shelter a surety. Stock of varied kinds that played a double part was available; for instance, linseed oil was decidedly a drug—it made green soap, caron oil and liniments; linseed oil, too, was a painter’s necessity; the painter’s litharge and red lead made some of the ointments. A mixed stock accumulated gradually and in this way the drug store became the paint store—there was no other source of paint of public accessibility. Be it said at the start that the drug store stole no lines of goods from others. The side-lines it accrued came as a matter of growth and necessity.

Perhaps a lesson in nomenclature arises at this point. In later years there was a coming in of inexpert, or at least less versed drug store men, who were prone to use the terms official and officinal as being interchangeable—a coating of obstinacy pervaded their warm assertions to that effect. Their views were authoritatively scotched later. Adapting a Latin dignity of title might reasonably restrict *materies officiales* to furnishing the articles required for pharmacopœial and hospital formulas use while *materies officinales* could take in the side issues of stock and things less related in a more correctly descriptive way. Why may not the differentiating words applying to official preparations apply to the classification of the drug stocks furnishing the materials that go into the making of them?

The beginning of pharmacy or its equivalent was in all likelihood the same with every race or people or country. The practice of pharmacy was a compulsory duty called into being by the needs of sick people. Outside of provision places, at the van of all Western gains of territory was the practical pharmacy place of that era. It was the pioneer mercantile business. “’Twas mightiest in the mightiest.” It carried culture with it unbeknowingly. It was culture by contact in Western America not necessarily of college origin. The pure school of drugs had hardly an existence. A hiring constituted an apprenticeship. Few that started in the rut ever got out of it. It became a life’s work with most of those who took hold.

The early days of pharmacy in the Middle West and beyond cannot be por-

trayed by a single writer. The experiences of many enter into their showing. As a whole the finished account should lack the taint of a task—it should have an aroma of free inspiration.

There was a time, within the recollection of people still living, when between the Missouri River and the Pacific Ocean there was no place where one could find medicines. Pharmacy was probably known and practiced at a fringe of places on the coast line of Western America; but in between, nothing. The redskin may have had emergency trifles tucked away in his belt or trappings, but he found his remedies on the spot when he wanted them. There were remedies everywhere; a fine field of botanic *materia medica* was ready for the aborigine or observing seeker.

We will suppose that the place of drug handling—the view centre of our observations has opened up and is past the embryonic stage. Four walls of logs, maybe, or adobe, earth-fashioned with a protecting roof. Light entered through small panes of glass, then 8 x 10 was a luxury while 7 x 9 was the size in every-day use—some with glass blower's "crowns" were not rejected; waves and undulations didn't count, things inside did. The doctor's saddle bags carried practical things that made them weighty. The drug store had to replenish them and the doctor welcomed the druggist and his help in the way of commissariat and judgment.

Beside its neighborhood patronage it called trade from widely upbuilding circles, farms and ranches. Perhaps only trifles were wanted but they had been planned by the squatter or settler long before the opportunity to get them came. Each trifle gave a profit and sufficient to pass in Shakespearean phrase as "a ripe and good one." The ample profit was expected and tolerated while the desired chance to acquire it was appreciated.

These stores were not places of business where customers were awaited with the modern avidity akin to spider and web. There was always something doing—the druggist was always busy getting ready for business. His supplies were always in the crude; they had to be made up; ground, enhanced in condition and variously compounded. The drug business could always be, and was, run as an all-day job, while the work, because of interest evoked, seemed less burdensome than the energy expended in other callings. It varied; it was never twice alike. Each new task was really a work of research to the operator. It became an enjoyable widening of the remedial horizon. The work was readily appreciable as being in the category of the "beginnings of pharmacy." Nearly a quarter of a century later a book was issued by R. Rother with that title for the instruction of apprentice minds; it did not find the apprentices, of course, but it went into the tasks and conducting operations of real drug stores very thoroughly and intelligently. Factory pharmacy was barely started then—that form of usurpation of many galenical operations that should, for the good of pharmacy, have been left to the pharmacists.

The rear of a drug store, usually partitioned off, was a drug kitchen of a sort; by degrees it grew into a laboratory. The race origin of the proprietor often determined the trend of usefulness of its operations; the witch's cauldron glowed again and uncertainties were a normal thing—its smoke making perpetual rings of question marks. The tendency to German influence was a noticeable thing.

As foreign elements of population filtered into the mass of active pioneers and no movement of any kind long remained unmixedly purely American, the mingling resulted in strength and variety. The effect of the racial amalgamations was to

cause addition-changes in the items entering into stock. Some of the simples of foreign pharmacopœias became influences in the popular demands for medicaments.

The getting of stock to manufacture and sell was a different problem then and a difficult one. Stores were usually a long way from the sources of supplies. To express conditions in a bald way everything had to come from places east of the Mississippi. Complete working material could hardly come from any one supplying city. For instance, New York, Philadelphia, Baltimore, each contributed to an assembling of necessary things. Each was a first-hand market for some things in which it excelled. Some of the interior mid-continent towns did slowly acquire distributing importance for original warehouse accumulations—resting places at the ends of transportation trails—where the railroad ended or the canal boat had to unload, or the river boat lacked depth of water to cope with bars. These places became potential replenishing points from which commodities were hauled *via* covered wagon trails to the final resting points.

When drugs were bought it was directly advantageous to buy a lasting quantity of non-perishable things if transportation conditions were favorable. Dry goods merchants and clothiers and dealers in volume making shipments of changeable stock dependent on fashion's whims made their principal purchases about twice a year. Even so the druggist, although for very different reasons, timed a spring or autumn purchasing period. Those with a patronage that caused the use of lots of goods took advantage of the lower freight rates that the general merchandise shippers were often able to get. There was rivalry in railroad freight rates in those days. A freight rate fight was a merchant's opportunity, when a special price on mixed merchandise in carload lots was the temptation. The pharmaceutical buyer was interested, too, especially when he could count on supplying lesser drug confreres on the edges of his territory with some of his excess purchases as a relief later on. It may be amusing to the modern druggist to know that a cask of hundreds of pounds of English rock chalk in chunks of 8 or 10 pounds would be an item in an early drug store. "Rock Chalk, Jayhawk" was an unknown slogan, then, although it is a fact that the first use of that slogan was voiced by a young assistant professor who had entered college life *via* drug store surroundings. The chalk went into stock for conversion into putty; most every dealer in window glass had to make his own putty. The chalk was cheap at seaports for it came from overseas as ballast in ships, but it was necessary to buy it when there was a war in freight rates in order to get it as an item in a manufacturing stock. Sulphur was purchased by the several barrels; sal soda, fish oils, Spanish olive oil in barrels of manufacturing quality, pure but hardly edible; bay rum, the real thing, from St. Thomas in small barrels; Glauber's Salt, soda ash, epsom salt, camphor and borax—anything to make up a minimum weight mixed carload. Merchandise that was easiest on the bank account was schemed for as bulk makers for carloads. Here it may be observed that California's borax and olive oil had never been dreamed of at that time. Also the handler of daintily packaged Asafetida (or as it was spelled then—assafœtida) is advised that it counted largely in carload purchases for stocks of early days; a whole case of perhaps two hundred pounds was the chunk of the delectable drug which the handler cut up with a hatchet and served out in tin cans, as wanted. The arrival of such aggregations of stock was antici-

pated keenly by the younger rustling workers of the drug emporium, who were sometimes at a loss to know where they would house it when it came.

The back-of-the-shop laboratory soon amounted to something. Operations were larger than many would suppose—especially in the early started stores that were compelled at first by courtesy and afterward because of satisfactory profits to divide manufactured stock with others.

The variety of the demands for simple drugs and prepared hand-out formulas in bulk, progressively increased in early-day pharmacy as the overflow of the immigration melting pot added trade volume. Every foreign country has its folk-traditional domestic remedies for everyday ailments. Some came through the scions of the old settled foreign element of the Eastern states and many from more recent immigration. France, Germany, Italy, Russia, contributed many types of excellent-to-use formulas which gradually met the approval of all communities. In this way the items from foreign pharmacopœias and recipe books not only went to make a markedly accented Western pharmacy list of preparations, but compelled the acquiring of a pharmaceutical compounding facility, which in itself invested the calling with a certain expert dignity which would hardly have been evoked by the satisfaction of purely American needs and demands. In other ways the American druggist was being educated into dosage and the nursing art without being aware of it, while old time remedies from European sources were being added to the newer botanic drugs and preparations known to the American pioneer. Occasionally a person with drug manipulative experiences in the East or at some time or other in Europe, filtered in and took a hand in the game of Western Pharmacy. Full soon a foreign-born proprietor was helping in molding a calling of advantage to medicine and the people.

Crude drugs were received in bulk paper packages—it was before the day of ready-make paper bags. The usual packaging consisted of the shaping and binding of loose material and an outside wrapper. The making of a package by a supplying wholesaler in those days was a fine art. The completed unit from an Eastern supplier was often a bit of handsome mass shaping with the sides level and the ends and corners square. The irregularities of a three or four-pound package of lump benzoin were made to subside into a more or less quadrilateral mass by jolting and suasion and patting and squeezing in a rather large sheet of brownly white paper; in fact, a flat, wooden paddle assisted in the shaping process and a ligature of stout hemp twine held the recalcitrant irregularities in leash. A rough faint pencil memorandum mark was made on the paper and a heavier lighter colored wrapper was daintily and tightly applied by firm folding. The best parcel marker of the concern then added the finishing touch of bold titling—often in an artistic manner.

There were many grades of benzoin; marbled benzoin was most esteemed. The choicest, mostly used as a perfume element, was the Siam which came in “tears”—tears of regret, maybe, for it was a scarce article indeed, with rich vanilla-like tang.

A ten-pound package of senna leaves, Tinnevely or Alexandria, was more easily packed, but reminded one of the filling of a cushion tick with goose feathers. It took more string and a tricky application of pressure to shape that bundle. If anyone wishes to experience the necessary skill involved in the

art of making a presentable retail package in the days when paper sacks were not, let him try to wrap up half a pound of whole flax seed for "cough tea" in a flat sheet of paper making a tight rectangular package of it.

As a note by the way, it may be set down that the little labor-saving paper sack tended to a benumbing of the skill in pharmaceutical neat package dispensing. A two- or three-ounce package of flowers of sulphur or four ounces of bicarbonate of soda used to be rapidly furnished at the common sale counter in neat tapering flat-sided oblong packages with wedge-shaped ends, which showed care, suggested safety and invited confidence. Of course, as now-a-days, many of the often-called-for things were kept packaged ahead. Besides saving time it afforded a lazy druggist a chance to see that the spare minutes devoted to parcel making would also result in producing seductive packages in appearance. A decade or so after the paper sack had come into use in nearly all businesses, in sizes from four ounces to a score of pounds or so, its inroads in supplanting drug daintiness were marked. The newer drug clerk would throw a few sticks of kitchen cinnamon higgledy-piggledy into a much too large ready-made sack, scribble a pencilled something on the delivered item, and let it go at that, with much too many fluttering twine ends to emphasize its awkwardness. In the years before, the clerk would assemble the scrolls of bark in fairly equal lengths on a sheet of white drug paper and shape them into an acceptable package without protruding pieces—he would then have applied a sticking label, ink-written and legible. The earlier druggist during the succeeding years when he saw the "tie up and throw out" packages that went to the public over the counter, simply winced, so uninviting were they and unrecognizable as having emanated from the hands of a skilled person of any kind. It was a loss to Pharmacy to cease to make the anticipated neat drug bundle. It helped to pave the way for inviting cartons of the chain pirates who apparently can "get away" with anything if the package is nice.

With every drug store owner necessarily a manufacturer, the quantity of a preparation made up in the back room was dictated by experience learned of his trade necessities. "Batches" of things varied with shops and localities. Somewhere in each establishment some messy job in course of making would be placed in a retired corner and worked to a finish by labor at odd moments which challenged no attention but "got there all the same." Mercurial ointment, for instance, was one of these. Much of this ointment was used in early-day trade. The veterinarians perhaps kept the earthen container a vessel to be watched for, seemingly every salve recipe of theirs contained some of it. It was no uncommon way for the thing to be made in a large, white, enameled iron evaporating dish, with a large Wedgwood pestle as an incorporator. It was understood to be everybody's job to give the fatty base and the mercury a forceful twist when he passed the dish, replacing its extemporized cover at each attack. A small quantity of an old lot of mercurial ointment with a suggestion of rancidity was always saved as a sort of catalyzer to mechanically hasten extinction of the live quicksilver. It was a rarity to find the laboratory with any large utensil not in use. By large it may be said that the evaporating dish here called to mind as having been used, was of a capacity of three gallons. A mixing motion attack in a case like this was often familiarly alluded to as a "swipe." All the plaster mixtures were necessarily home made. The only purchasable plaster mass was, if memory serves, that of cantharides which used

sometimes to accompany chemical shipments from Eastern manufacturers. Plaster spreading was a frequent prescription activity.

If the use of the word "laboratory" in connection with the early-day drug store seems presuming and stealthily injected to invest the place with unearned dignity, let it be taken with its least dignified significance—a *labor*-atory which in truth it was in those days of clumsy chemical knowledge, and when all work was research, perforce, to an operator who had never made the finished chemical preparation before.

Customers' wants and demands were entirely different from what the modern pharmacist would vision to be possible, so the home manufacturing and multivari-ous all-day compoundings were enforced activities. The simplest needs of a customer were seldom "hand outs;" what he demanded called for some work, involving measuring, weighing, mortar and pestle mixing, milling, sieving to all degrees of coarseness and fineness—the sieve of brass, iron or bolting cloth, the latter perhaps begged of the local flour miller—the using of varied applications and intensities of heat; all these were normal functions in the practice of pharmacy. Almost entirely the proprietary ready-made remedy was an unknown thing. A few quack nostrums of archaic origin, like Haarlem oil, were to be found in the world's commerce and few knew from what place or country or firm or family a certain supply emanated. Perhaps a dozen of so-called patent medicines as nostrums for prevailing ailments covered the category of known prepared medicaments and these were for constipations or choleras, agues, parasitic disorders—really for desperation camp emergencies in general. In the Eastern states there were probably a greater variety of such offerings, but as retail units of many things were gargantuan and difficult of commercial transportation, most of these were made for local sale in well-populated centers and came not West. The big sized packages of bitters and blood panaceas were possible because of the almost unbelievable cheapness of alcohol which made a quart size of blood tipple current and possible. In those days when a gallon of whiskey could be bought for "a quarter," the bottles of stuff purporting to be tonics had to be ostentatiously liberal in size to tempt the dollars of the imaginary sick people.

It may be held forth that even in the new West a form of proprietary medicine was nevertheless regionally popular in the sense that many of the stores in the larger communities put up ready-to-dispense sizes of medicines for prevailing sicknesses; when every third or fourth customer was himself a suffering malarial victim and his family in general were "down with the chills," speeding up the delivery of remedial agents was appreciated service. The favored compounds became more or less famed and the smaller stores in near-by places bought them for resale. Many, indeed, of these early-day conveniences became, without planned intention, proprietaries—sufficiently so that in the years succeeding they gained reputation sufficient to branch off into a separate business undertaking of their own; offering instances of once active necessities becoming perpetuated conveniences of proved value. Many well-known ready-made preparations of to-day were born in that way.

It was rare for a new settler to come to the West without his recipe (or as he called it "receipt") book of emergency things. Some pharmaceutically atrocious mixtures met with daily dispensings, and played the part of equivalent prescriptions

which would result from the rounds of doctor's daily visits, if there had been enough medicos to go around. These recipe books offered a solution for every trouble that perplexed the farmer or squatter or dweller from town centers. It was hard to find a drug store without a "file" of these volumes of cyclopædic knowledge. The pages devoted to dyeing were hard worked and bore visible evidence of it. There were no dyes of manufactured organic chemical origin—no package dyes. Crude woods, barks, roots, fungi, insects and chemicals, such as copperas, chromates and ferrocyanides, furnished the hues and colors. The drug man who could impart the most practical instructions was the idol of the farmer's wife. The color-craft of the American Indian supplemented the art of the white man and, as with everything else, scarcely any act of the druggist but what was an act of service. Truly, drug practice was always a profession apart from mere merchandising from its earliest days. And because the drug man's art demanded the pure medicinal aromatic drugs as components of his galenicals, a side-stepping departure from first quality would have been obvious in a finished preparation and perhaps would have made it inferior.

For this reason, select and pure spices were attainable at the drug store only. The capable housewife hardly ever bought her flavoring items outside of a drug establishment. Unbelievably crude adulterations and substitutions made commercial spices anathema and the average cook was ignorant of the cause of unevenness in her kitchen products. It was a boon to the people, totally unrealized by them then, when the Pure Food and Drug Law compelled purity of wares in packages or a statement in what respect it differed, on the labels, though it was rather hard on the druggist, because it took a great deal of the trade in spices to the groceries. It must be recorded here that the sale of spices was originally a part of the American drug business. The modern grocery man complains of the drug man's stealing his wares—spices—a wholly imaginary supposition, for the grocery, to a great extent, at least, took the spice trade away from the druggist. The housewife gradually became aware of the improving quality of grocery spices and ordered ready-to-send packages of them with her other telephoned-for supplies saving her a trip to the drug shop down town for them. Compulsory purity handling by otherwise unversed competitors has caused the druggist to lose much of an esteemed part of his business; a queer conceit—equal purity being enforced on others causes always conforming pharmacists to lose business!

It was most unfortunate that pharmacy was saddled with an unsought contact with whiskey. At no time was it a part of drug handling proper; it was a tool of manufacturing and a necessary, hardly considered item, in a drug stock. It was cheap—could be and was sold by any individual in trade who desired to make it an article of commerce. In the early settlements of fair size there were reputable places which sold it aside from drinking bars: *viz.*, wine and liquor stores. The drinking places proper progressively degraded and nurtured the odious type of saloon keeper, bringing into public and political existence a set of more or less undesirable people. The stores (wineries) had small patronage and dwindled; men almost alone did the purchasing there until the drinking bars competed with the better repositories of strong liquors in supplying the supposedly necessary household wants. Men, as has been indicated, did the buying and at that period did not consider it at all improper or debasing to purchase needed things at bar rooms. Pre-

sumably, by degrees, mostly unwillingly, some weakling druggists may have yielded to pleas of people wishing to avoid the rougher contact with saloons, and supplied intimate customers with small perfectly legitimate quantities of spirits. Especially in cases where a store had been established on a not unusual plan of furnished experience in lieu of furnished capital—the unprofessional partner might have been awake to the reaping of easier dollars, and as a helper at the counter fail to discountenance sales of that character.

This settling down of drug store progress has been tinged with a sympathetic desire to record the fact that the primal druggists never intentionally embarked in business with the idea of being liquor handlers in any way, and that for many decades the majority repulsed trade to that end, while many declined such business at all and for all time.

A LIMITED ENROLMENT SELECTIVE PLAN.*¹

BY A. RICHARD BLISS, JR.²

It has been stated that "mass production" was one of the major factors responsible for the economic conditions which face struggling humanity to-day. Business and industry have been thoroughly berated for the parts they are alleged to have played in toppling down man's "house of cards." Mass production in education, based upon such fallacies as "a college education for every boy and girl," "all men are born free and equal," etc., is undoubtedly one of the chief factors in education's present plight. In some quarters it appears that the standing and the success of an institution have been measured by the size of its student body, the number of alumni and athletic prowess. "By their fruits ye shall know them" has been disregarded.

In the wild scramble for students during the decades gone by, many professional schools have been possibly as "guilty" as the liberal arts colleges as a whole. Individual fitness and characteristics essential to success in a field of special endeavor have been rather generally ignored, and "entrance credits" have constituted the sole criterion for admission—not to mention, of course, financial ability to pay tuition fees.

A number of years ago a small liberal arts college in the State of Vermont, Bennington College, decided to abandon the traditional plan of demanding all freshmen to follow a fixed and regular prescribed course of study, and introduced in its stead a "tailor-made" plan, whereby each individual freshman's course was specially arranged to fit his needs, interests and temperament, and to bring out his special talents. At the same time, the student body was limited to a few hundred so as to insure personal contact of a profitable character and individual attention.

Right here in Portland, Oregon, Reed College recently announced the adoption of a similar plan for its new freshman class which enters this fall. It is encouraging to see another institution added to the "tailor-made curricula" list. Our institu-

* Section on Education and Legislation, A. PH. A., Portland meeting, 1935.

¹ Contribution from the School of Pharmacy of Howard College of Birmingham, Alabama.

² Dean of the School of Pharmacy and Professor of Pharmacology, Howard College of Birmingham, Alabama.