of the solution administered, were found in two of the three rats receiving 5 Gm, of the compound per Kg. body weight daily. The pylorus was definitely thickened in all rats receiving the 5 Gm, per kilo dose.

More detailed experiments are in progress and will be reported at a later date.

SUMMARY.

- 1. The preparation of the hexamethylenetetramine salt of mandelic acid has been described.
- 2. The toxicity of the hexamethylenetetramine salt of mandelic acid has been determined in rats.

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PRICE PROBLEM WITH PHYSICIANS—U. S. P. AND N. F. SUGGESTIONS.*

BY EMMET WEAVER.1

I have often wondered whether or not pharmacists who operate stores other than those located in Medical Arts Buildings have the same problems that we do. My store is located in a building where more than three hundred doctors of all kinds have their offices. During the course of the day every one of these doctors passes into my store. Some are easy to contact, while others are very difficult of approach. Some are easily satisfied, while others seem never to be satisfied no matter how hard we try to please them.

Our arrangement is somewhat the same as in most stores, although in some instances we have departed from the orthodox and installed some innovations. The prescription department is located in a balcony, is connected with the main store by means of speaking tubes, and recently we have installed a loud speaker system which may be easily heard in all parts of the store. Three men are on duty in this department at all times and they have nothing before them but prescription problems.

We have on hand a complete stock of pharmaceuticals representing every ethical manufacturer and it is seldom we are without a preparation we should have. The biological department is complete in every respect and is equipped with probably one of the few mechanical refrigeration units in the southwest. This insures that the biologicals will have proper care under very trying conditions. I mention these things in order that you may have a picture of our most important department.

We have the problem of price to the physician. The average doctor will call for a certain preparation ostensibly for his own use. We quote a price of twenty-five per cent under list. Immediately we have the retort it is too high and can be obtained from so and so at such and such a price, which in most cases is way below

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what we can afford to make. Whether or not this is a ruse on the part of the physician concerned to beat our prices down, or can be attributed to the keen competition of other druggists who are striving for this business, is a question. This problem has caused us considerable concern, and we are at sea to meet this demand for a lower price than the one we quote.

Another problem is to have the physician give his patient a prescription and tell him "now this is a very simple remedy and should not cost you more than a certain small sum." As a matter of fact the preparation called for often is a proprietary which cannot possibly be dispensed at the price quoted by the physician. Do we as pharmacists, when we send a patient to the physician, tell that patient, "he will only charge you a dollar," or something of like nature? Would the physician not immediately call the store and ask upon what authority we told the patient his charges would be so much? It seems just as fair for one as the other and no physician should quote a price, especially when he knows nothing whatsoever about the actual cost of the article mentioned.

Then again the physician gives the patient a sample left by some detail man, with the inference that the preparation costs little or nothing and is glad to furnish it as part of his treatment. A little later the patient comes into the store with the empty bottle, and asks for a refill. When presented with the prescription, the patient is astounded to learn that it costs so much. He refuses to take it, saying that he will wait and see the doctor the next day and get another free bottle. In a great many cases, this hurts the ethical business of the pharmacist and lowers him in the estimation of the public. The problem is how best to meet a situation of this sort.

While on the subject of detailing, I have found that if we keep one man constantly calling on the physicians in the building, detailing N. F. and U. S. P. preparations, we gradually bring the fair-minded members of the medical profession back to ethical pharmacy. The many preparations recognized by these authorities enable us, in many instances, to convince the physician that it is possible to dispense at a saving to the patient and at the same time giving the physician a preparation whose action he may absolutely depend upon. How many pharmacists have tried this and would it not be a good idea for the American Pharmaceutical Asso-CIATION to inaugurate a campaign of this sort over the entire United States? The average physician is too prone to listen to the detail men, with the result that the art of prescription writing is fast disappearing. This is particularly true of the younger doctors—they have little or no knowledge of how to write a prescription and naturally take the easiest course. It might be well for this body to bring the matter up for consideration by the American Medical Association in connection with a course of prescription writing to be added to the curricula of the medical schools.

Then there is the dispensing physician. Of course we are in a measure power-less to control this problem. I feel, however, that by means of a campaign of instruction, and instilling a greater degree of confidence among the members of the Medical profession, it will be possible for us to coöperate in such a way that the danger of this practice will be minimized.

There are many other problems in the operation of a Medical Arts store. I trust the questions I have raised will bear some thought, and that effort will be made, generally, to control the problems.