EDITORIAL

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IMPORTANT CONFERENCES.

THE AMERICAN PHARMACEUTICAL ASSOCIATION has been represented at two recent conferences, referred to below in separate articles, which may have an important bearing, particularly in one case, on the future of the profession. The Chairman of the Committee on the Study of Pharmacy, Dr. Robert P. Fischelis, represented the Association at these meetings. Other officers of the Association are also keeping in close touch and the members of the profession may rest assured that future developments in both movements will be carefully followed.

NATIONAL COUNCIL CONFERENCE.

A BOUT two years ago U. S. Senate Resolution No. 114, "to Investigate the Desirability of Establishing a National Economic Conference" was referred to the Committee on Manufactures, and has been under study since that time. Recently, an Advisory Committee for the proposed Council was appointed, the members of which represent the professions, commerce, sciences and arts.

In opening a meeting of the Advisory Committee with members of the Senate Committee on Manufactures, held in Washington on May 25, 1932, Senator Bulkley said: "Gentlemen, as you know, we have been working for more than two years on a plan for the establishment of what we started to call a 'National Economic Council,' and what we now like better to call a 'National Council,' because we realize that economics can hardly be separated from any other subjects that affect the welfare of the Nation. What we have in mind is a National Council made up of full-time members—perhaps of the number of nine, although no number has been finally and definitely decided upon, to give their entire time to the consideration of every problem that affects the National Government. The Council should be independent, and independent in the full sense, because if the President or the Congress can direct the Council to give its attention to any one thing, the directions may be so multiplied that the Council will not be able to give attention to the things that it thinks are most important. Now of course we propose that this council shall not have any administrative or executive authority, nor any authority to carry into effect its recommendations in any way."

The members of the Advisory Committee were invited to give their criticisms and suggestions, many of which were favorable and some unfavorable. The following quotations are from the statement made for this Association.

"The American Pharmaceutical Association feels, as many do here to-day, that this Council, if set up will be of great help in bringing to the members of the Federal and State Legislatures and to the Bureaus of the Government, the kind of impartial information which is needed as a basis for progressive legislation and administrative action. It recognizes the need of an impartial source of information as a substitute for propaganda and the acceptance of the views of pressure groups."

NATIONAL HEALTH CONFERENCE.

In OCTOBER 1936, and following the passage of the Social Security Act, President Roosevelt issued Executive Order No. 7481, appointing an Interdepartment Committee to Coördinate Health and Welfare Activities with Assistant Secretary of the Treasury, Miss Josephine Roche, as the Chairman and stating that "It shall be the duty of this Committee (1) to continue to sponsor appropriate coöperative working agreements among the various agencies of the Government in the health and welfare field, and to continue the work under agreements already in effect, and (2) to study and make recommendations concerning specific aspects of the health and welfare activities of the Government looking toward a more nearly complete coördination of the activities of the Government in these fields. The Committee will continue to function through the special technical committees it has set up from time to time, and will designate additional committees to deal with new problems."

The Interdepartmental Committee appointed a Technical Committee on Medical Care, which after a general survey submitted a report on The Need for a National Health Program, including definite recommendations. This report was approved by the former committee and filed with the President on February 14, 1938.

The Interdepartmental Committee recently invited about two hundred delegates to consider a National Health Program at a National Health Conference held at the Mayflower Hotel, Washington, D. C., on July 18 to 20, 1938. For three days representatives of all branches of the Medical profession, including Pharmacy; Labor, Agriculture, Industry, Women's Organizations, and Health Organizations, Public Health Officials, Hospital Executives, Social Workers, Journalists and others participated in the Conference.

The report of the Technical Committee was made the basis of the Conference and the program was considered *first*, from the standpoint of national health needs; *secondly*, from the standpoint of expansion of general Public Health Services, such as expansion of Maternal and Child-Health Service; *thirdly*, from the standpoint of Hospital Facilities to provide medical care for the medically needy; and finally, from the standpoint of providing insurance against loss of wages during sickness.

There has been considerable discussion in the public press of the apparent need for and lack of medical care for people in all income groups and the indigent, based on various governmental and private surveys.

The Technical Committee reported that preventive health services for the nation as a whole are grossly insufficient; that hospital and other institutional facilities are inadequate in many places; that one-third of the population, including persons with or without income, is receiving inadequate or no medical care and that an even larger fraction of the population suffers from economic burdens created by illness.

To remedy these conditions five definite recommendations were proposed with approximately one-half of the estimated total annual cost of the first three to be met by the Federal Government. They are briefly stated as follows:

1. Expansion of Public Health and Maternal and Child-Health Services, involving by the tenth year, a total annual expenditure of \$165,000,000.

- 2. Expansion of Hospital Facilities including construction and maintenance for general and specialized care and involving an average annual cost over a tenyear period of \$146,050,000.
- 3. Grants-in-aid to the states from the Federal Government to implement the provision of public medical care (1) to those for whom local, state or Federal governments, jointly or singly, have already accepted some responsibility through the public assistance provisions of the Social Security Act, through work-relief programs, or through provisions of general relief; (2) to those who, though able to obtain food, shelter and clothing from their own resources, are unable to procure necessary medical care. It is estimated that \$400,000,000 would eventually be required annually to provide minimum care to the medically needy.
- 4. A comprehensive program designed to increase and improve medical services for the entire population directed toward closing the gaps in a health program of national scope, left in the provisions of the first three recommendations. General taxation or special assessments alone, or in combination with specific insurance contributions from the potential beneficiaries of an insurance system, were recommended as the method of financing. The rôle of the Federal Government in this program is to be principally that of giving financial and technical aid to the states in their development of sound programs through procedures largely of their own choice.
 - 5. Insurance against loss of wages during sickness.

The estimated annual cost of the program, without recommendations four and five, at the full level of operation within a ten-year period is \$850,000,000.

The proposed program was received by members of the Conference with a variety of reactions. Social workers, health officers and others who are students of the health and welfare conditions of the people of the United States as a whole, reacted favorably. Some representatives of the medical profession and of private hospitals and institutions were inclined to question the necessity for embarking on a program of such great magnitude. Representatives of labor and agriculture and women's organizations strongly favored the Government proposals, and a substantial body of medical opinion likewise expressed a favorable reaction to extending medical services by some method other than that of private practice.

On the whole, those who whole-heartedly favored the proposals were in the majority. Those disposed to disapprove did not burn their bridges but contented themselves with questioning the emphasis placed upon the national need for medical care as compared with the need for food, fuel, clothing, shelter and jobs. Representatives of industry expressed themselves as not too greatly worried about the cost of the program as compared with the expected reduction in needless loss of life and suffering and increasing prospects of longer years of productive, self-supporting life.

No definite action was taken by the Conference on the proposals although it is expected by all participants that the groundwork for a national health program has been laid and that discussions from now on will center around the proposals advanced. That the revision of existing methods of providing medical care is actually under way has been apparent to anyone who has watched the recent venereal disease and pneumonia programs. The National Health Conference served as a means of crystallizing thought on immediate needs and future action.

As pharmacists we shall have an important part in whatever methods of action may be developed. The following quotations are taken from a statement made for the Association.

"The production and distribution of drugs and medicines constitute an important factor in any program of medical care. Thus far it has received little or no attention in the deliberations of this Conference, nor has it been specifically alluded to in the proposed National Health Program.

"The public's expenditure for drugs and medicines in 1929 was estimated at \$715,000,000. It probably dropped considerably during the depression, but it is climbing again. It has been amply demonstrated that the business in drugs and medicines although affected to some degree by the incidence of illness, actually rises and falls with general business conditions. The implications in this statement seem worthy of consideration.

"The magnitude of the normal expenditure for drugs is not far below the estimated cost of the entire National Health Program submitted to this Conference...... The limitation of the sale of drugs to pharmacies and pharmacists offers the best measure of control and reduction in public expense for drugs now available.

"The proposed programs for the control of venereal disease, pneumonia and other diseases have had the whole-hearted support of the pharmacists of the Nation, even though they have seen the distribution of vast amounts of drugs taken out of their hands and transferred directly to health departments.

"Pharmaceutical education and licensure is to-day on a high plane and the products of our colleges of pharmacy, although far fewer in number than ten years ago, are much better prepared to join in maintaining any acceptable national health program.

"The experience with Health Insurance in Great Britain has demonstrated that drug costs can be substantially lowered by limiting prescribing to official and approved drugs. The increase in available medical care and consequent increase in prescription writing has served to increase the professional activity of pharmacists and has reduced self-medication.

"It can be definitely stated that the pharmacists of the United States are well prepared to supply all necessary services in this field no matter what system or program of health care may emerge from this Conference."—E. F. K.

Dr. F. A. Gilfillan, who has been Professor of Pharmacy, in the School of Pharmacy, State College of Oregon, Corvallis, since 1927, has recently been appointed as Acting Dean of the School of Science of the College which comprises the Departments of Bacteriology, Botany, Chemistry, Entymology, General Science, Geology, Mathematics, Nursing Education, Zoölogy and premedical work. This school will have eighty persons on its staff.

After graduating from the School of Pharmacy in 1918, Dr. Gilfillan enlisted in the Chemical Warfare Service and was stationed at Yale University. Later, he completed the requirements for the M.S. and Ph.D. degrees in the University. From 1921 to 1925, he was a member of the staff of the School of Pharmacy, State College of Oregon and from 1925 to 1927, of the School of Pharmacy, University of Florida. He is a member of Sigma XI, Rho Chi, Phi Beta Phi, a number of several honorary scientific societies and of the American Pharmaceutical Association.