

fifty dollars, except in cases where the death of a human being results from such violation, when the person offending is guilty of a felony.

Sec. 11. Annual Fees May be Turned Over to State Pharmaceutical Association.—That the state board of pharmacy may each year turn over to the state pharmaceutical association for the advancement of the science and art of pharmacy, out of the annual fees collected by it, such sum, as it may deem advisable, but not to exceed one dollar for each pharmacist and one dollar for each assistant pharmacist, who shall have paid his renewal fee during such year. Said association shall annually report to said board on the condition of pharmacy in the state.

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(To be continued)

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### THE TRADE-MARK EVIL OF MEDICINAL COMPOUNDS.\*

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In this practical age, in which the spirit of mercantilism dominates and absorbs all thought and action, it is not inappropriate for us, in fact it has become a necessity to give our attention to the conditions created by this all absorbing thought of commercialism.

I think it therefore not out of place or time to present to the Association facts which are of such vital importance to ethical pharmacy, facts which have not been looked into as thoroughly as their importance demands, facts which may not be pleasant reading, but that should nevertheless have our undivided and careful attention and consideration.

I refer to the trade-mark evil pertaining not to the definite substances, but to the compound preparations, the mixtures, the ready-made prescriptions, placed on the market under the various trade names.

Much has been written about the so-called patent medicine houses or proprietary houses, but why has there not been more discussion about our ethical pharmaceutical houses?

A careful analysis of the conditions existing will show you clearly that these very ethical pharmaceutical houses are today the greatest offenders in placing on the market compound preparations, mixtures of all kind, ready made prescriptions to be poured from their bottles into your prescription bottles, and this is called the art of dispensing?

Is it any wonder then that we hear the remarks made: "What need for any education in pharmacy? Any one can be a dispenser, no knowledge is required to pour from one bottle into another bottle."

Let us look into these conditions created by these houses and not deny the existence of these evils because their recognition is disagreeable.

In looking over the proceedings of the American Pharmaceutical Association for several years past, we find many articles in regard to dispensing pharmacy.

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\*Read at the 60th Annual Meeting, Denver, 1912.

Vol. 46, page 438. Mr. Beal, then chairman of this section, in his address said:

"It has not been uncommon of late years to learn from various sources that dispensing pharmacy has about reached the end of its existence as a separate calling, and that forces are now at work which must produce its speedy disintegration, and eliminate it from the list of recognized occupations whereby men may gain a livelihood.

"The question which this prediction suggests is one of supreme importance and may well challenge our serious consideration." Furthermore, he says, "That dispensing pharmacy is at present in a very unsettled and unsatisfactory condition we all agree, but as to the causes of these conditions or as to the remedies which should be adopted for its improvement, there is a wide difference of opinion."

Ex-President Oldberg in his address to this Association, Vol. 57, page 426, of the proceedings says "The chief cause of the degradation of the retail drug business is the ruinously excessive number of drug stores," and he might have added that the excessive desire of the manufacturing pharmaceutical houses to monopolize everything pertaining to pharmacy, even dispensing, under the successful system of trade-mark mixtures has been and is today the greatest hindrance of a more liberal use by the physicians of U. S. P. and National Formulary preparations.

In other words, instead of having the proprietary houses only to flood the market with these compounds, we have now in addition also every ethical pharmaceutical house to prescribe for the physician and to dispense for the pharmacist.

Do you wonder that dispensing pharmacy is in an unsettled and unsatisfactory condition? Let us consider for a moment the results of flooding the market with these many compounds.

—What good has been obtained from these trade-mark compounds? Has pharmacy been improved, has there been more scientific knowledge obtained in placing these mixtures on the market?

These are fair questions to ask, but the only benefit derived, as far as I can judge, is by these manufacturers in the shape of dividends at the close of the year.

The disadvantages, however, are many, and of such far reaching consequences, as far as ethical and scientific pharmacy is concerned, that this Association cannot afford to ignore the importance of these unscientific methods.

First, by flooding the market with these various compounds, these ready-made prescriptions, it has caused many physicians to overlook their materia medica and therapeutics, which has not been to the benefit of their patients.

Second, it is, I believe, the direct cause of the physicians doing their own dispensing.

Third, it has encouraged substitution, for the greatest number of these ready-made prescriptions are nothing more or less than substitutions for some popular proprietary remedy.

Fourth, and last but not least, I believe is the most serious result and the one cause which should have our careful attention, for in this case neither the pharmacist nor the public at large is getting a square deal.

Think of the multiple compounds each manufacturer controls through this system of trade-mark compounds, a similar product to replace that of his many competitors.

Look on your shelves today—a dozen one-pint bottles of the so-called ethical cough mixtures from as many different ethical pharmaceutical houses all practically the same, and which could for all practical purposes be done away with or replaced by our National Formulary preparation of Syrup White Pine Compound.

Every one of these cough mixtures have as their most active constituent either morphine, codeine or heroin, the only important difference being the name: Syr. Tolu and Heroin Co.; Expectorozone; Elixir Pinus Co.; Elixir Pinus Co. with Morphine; Elixir Pinus Co. with Codeine; Elixir Pinus Co. with Heroin; Sedatole; Pruno Codeine; Creo Terpin Co.; Red Spruce Codeine Expectorant; Cerose; Heroterpine; Codeine Cough Sedative; Glycerole Heroine Co.; Syr. Cocillana Co.; Anodyne Pine Expectorant; Anodyne Pine Expectorant with Heroin, and many others of a similar nature.

And this pertains only to the cough mixtures; other compounds, too many to mention, are found in every drug store to be dispensed as called for.

Now the important question arises, what condition are these compounds or complex mixtures in after standing on your shelves for an indefinite time through the various changes of temperature, especially in our warm climates?

Does it seem reasonable to expect that these complex mixtures will remain unaltered under these changeable conditions?

Some of these manufacturers admit themselves that changes are liable to occur, for on the bill head of a certain firm may be found the following notice in red ink:

*"We cannot undertake to accept for credit or exchange broken or open packages where stoppers (caps or corks) have been removed or seals broken, but will exchange any of our preparations, in original or unbroken packages, which may have undergone changes from causes impairing their efficacy."*

I ask you in all candor is the public getting freshly prepared medicine when we positively know that these compounds which are prescribed have been standing on our shelves for in many cases one or two years, as is the case in many of our small pharmacies, under various conditions of climate.

Again, do the physicians know these conditions? I fear not, for I am sure if they did, they would not trust themselves in prescribing these complex mixtures so freely.

Can we wonder that so often the physician does not get the results which he might reasonably expect had such mixture been recently dispensed (by dispensing I mean the several ingredients of which the mixture was composed) mixed when it was prescribed.

At the last meeting of the American Medical Association the house of delegates adopted the following revised principles of medical ethics relating specifically to the practice of pharmacy which reads:

Section 4. By legitimate patronage, physicians should recognize and promote the profession of pharmacy; but any pharmacist unless he be qualified as a physician, who assumes to prescribe for the sick, should be denied such countenance and support.

Moreover, whenever a druggist or pharmacist dispenses deteriorated or adulterated drugs, or substitutes one remedy for another designated in a prescription, he thereby forfeits all claims to the favorable consideration of the public and physicians.

A curious fact which I could not help but notice while looking up some data

as regards these trade-mark compounds was that no reference was made in any of the numerous articles in regards to the possibility of deterioration of these compound mixtures before being prescribed and dispensed.

The only mention I did find was in a pamphlet published by the Council of Pharmacy and Chemistry of the American Medical Association. It is a booklet of about a hundred pages, and is too long to read at this time, but with your permission I want to read a few lines pertaining to our subject.

"The physician is not supposed to be a pharmacist, and if he were, he has neither time nor inclination to examine all the products he is asked to prescribe, or to inquire into the standing of those who exploit them.

"The number has become so great that the attempt to separate the good from the bad is bewildering, and no one individual is courageous enough even to try. The result of it all is that the educated, thinking physician who is honest with himself and with his patient refuses to prescribe any proprietary mixture; he classifies them all as secret nostrums and lets it go at that.

"Ready-made combinations of remedies may be valuable in many cases, *but to say that such combinations of drugs in fixed proportions fit any large share of the cases for which they are specially recommended by their makers is to say that the services of the physician are to a great extent superfluous.*

"*Machine prescribing is quite incompatible with high ethical standards and professional attainment in medicine.*

"Prescribers should know the virtue of each individual drug they use. They cannot attain that knowledge from the effects produced by mixtures.

"Whenever a physician specifies in the prescription a certain make of preparation, he takes upon himself the responsibility for that preparation. Any reputable pharmacist will, of course, dispense precisely what is ordered, but he cannot be held responsible for a product the composition and character of which are not fully known.

"Only the manufacturer knows what materials were used, the proportions employed, and the method of preparation. Manufacturers have their own formulas and processes, which are not known to the dispenser. The date *when the preparation was made and the manner in which it may have been kept since that date can not be known.* The preparations ordered by prescribers to be those made by some specified discoverer or manufacturer are almost all of the class known as proprietary specialties, those for which special superiority is claimed without any tangible evidence in support of that claim. Such preparations are, wholly or partially, secret nostrums subject to no verification or control, and when dispensed, may be right or wrong, old or new.

"*They usually pass through several hands before they reach the dispensing pharmacist who must accept them unless they bear unmistakable external evidence of being in bad order.*

"Pharmacists freely admit that there are many medical products which can be more successfully made in manufacturing laboratories having facilities which the dispensing pharmacist cannot have; but the claims so often put forward by the manufacturers that only a few medicinal preparations can be as well made with the facilities generally found in reputable retail pharmacies is as grossly exaggerated and ridiculous as the claim of the maker of any proprietary preparation that he possesses some valuable secret by which he alone is enabled to produce the remedy in proper condition.

"*Medicines are most reliable when fresh. The most active and important generally deteriorate more rapidly than others.*

"*Any preparation, therefore, that can be made by any competent pharmacist should clearly be made by the dispenser in order that he may be able to dispense a fresh product.*

"*Then only can he with justice be held responsible for it.*

"*Any preparation about which the maker fails to tell the whole truth should not only be suspected; it should never be used.*

"In view of the widespread acclaim with which the movement, generally referred to as the propaganda in favor of U. S. P. and National Formulary preparations, has been received, it is of vital importance that it shall not be misdirected or misunderstood.

"Properly interpreted it means the application of correct ethical principals to the prescribing and dispensing of medicines, and proper and mutual relations between physician and pharmacist.

"So far as it concerns the physician it means that he will permit neither self-interests, nor the love of ease, nor the plausible tongue of the detail man of the manufacturer of medicine to lure him away a hair's breadth from the path of duty to himself, his profession, and his patients.

"To the pharmacist it means that he must do all in his power to render effective service, and respect to the fullest extent the rights of the physician and the sick.

"Will the pharmacist meet these demands upon him in the right spirit? Will he do his

full duty because he sees it to be right, or will he support the reform movement solely in consideration of assurances of an increased prescription business?

"But pharmacists have the right to expect equally honorable treatment from the medical profession. They have the right to expect that physicians shall not deprive the pharmacist of his legitimate and honorable occupation and his means of livelihood.

"Physicians cannot keep such a complete stock of medicine in their office that they do not find it necessary to write occasional prescriptions. Pharmacists who can and do keep a complete supply, who are able to judge of the quality of drugs and medicines, who renew their stock frequently enough to have all remedies fresh and reliable, and who have all the necessary facilities for accurate dispensing, cannot live on the meager profits of such occasional prescription."

From this it is plain that the American Medical Association, through the Council of Pharmacy and Chemistry, realize the possibility of inactive, deteriorated, or stale mixtures being dispensed. It is also plain that the greater majority of the medical profession has not and does not realize this danger, and it is also a fact, I believe, that if they did realize or understand the possibility of getting stale, deteriorated, or less active drugs when prescribing these compounds, these ready-made prescriptions, that they would not so freely prescribe them, at least not without first obtaining some information in regards the age of these particular compounds.

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#### A WORKMAN'S PARADISE.

According to the *Literary Digest*, William D. Hawood pictures the working quarters of the mill hand, after the Industrial Workers of the World shall have gained control of the machinery of government, as follows:

"There will be a wonderful dining-room where you will enjoy the best food that can be purchased; your digestion will be aided by sweet music, which will be wafted to your ears by an unexcelled orchestra. There will be a gymnasium and a great swimming-pool and private bathrooms of marble. One floor of this plant will be devoted to masterpieces of art, and you will have a collection even superior to that displayed in the Metropolitan Museum in New York. A first-class library will occupy another floor.

"The roof will be converted into a garden. There beautiful flowers will fill your eyes and their sweet perfume your nostrils. The workrooms will be superior to any ever conceived. Your work chairs will be morris chairs, so that when you become fatigued you may relax in comfort."