

"THE PHARMACOPŒIA: ITS LIMITATIONS."*

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That the present outlook for the drug business is a serious one, is not denied by even the most optimistic, and the great decrease in prescription work, as well as general drug sales, has been laid to everything, from the tariff down to the dispensing doctor and the patent medicine man, but as the condition has gradually grown worse, and looks as if it was receiving sufficient nourishment from somewhere to make possible its continued decline, it is only fair to assume that as yet the crux of the situation has not been reached, or at least some of the causes for which pharmacy itself is directly responsible would be corrected and a few of the errors removed.

In holding others guilty in even a measure, for pharmacy as it exists today (and exists is used advisedly), has pharmacy placed the blame where it really belongs? To me it appears that it has not. It seems that none who could aid in the regulation has had the courage of his convictions in placing a few responsibilities where reformation is sorely needed, or the U. S. P. would not be ten years behind the times, and the N. F. a book of poor duplicates of proprietary preparations, instead of each being a living testimonial to the professions both of pharmacy and of medicine.

The dispensing doctor is responsible in a large degree for the decrease in prescription work, and until the medical schools wake up, and really teach their men that drugs intelligently used do give results today as well as years ago, just so long shall we have the 20-drug doctor, who does not even write prescriptions for these but is a most ardent follower of the label and literature supplied by the detail-man, and while we feel that the doctor who allows the detail-man to prescribe for his patient is not entitled to respect, still he is no worse than the pharmacist who buys rather than makes his own pharmaceuticals.

That we know such conditions exist in both professions is substantiated by the fact that a certain large manufacturing house finds it profitable to run a post-graduate course for its employees in order to keep them abreast with the newest in medicaments, and equally alive to the best methods of employing the older drugs. These salesmen go out, primed with the newest ideas, canvass the medical field, and supply to medical men information which they utilize, all of which relates to that particular firm's application of the newest experiments in medicine and surgery.

Does the U. S. P. do likewise for the retail pharmacist? Can we confidently turn to the U. S. P. and learn the best way to dispense, the origin, and use of the newer drugs, or even the older ones? No we cannot, but we could if the U. S. P. had a national laboratory where pharmacy might work hand in hand with medicine and surgery, and so be able to supply the best drugs, in suitable form and elegantly dispensed, as the standard and official preparation of its class.

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Then would the pharmacist be able to fill with confidence any prescription that is called for, he would know that it was the concerted product of many scientific minds, regardless of overhead expenses, rather than the formula of one man, no matter how clever, who must consider the great item—expense—perhaps to the detriment of the preparation. Were it not for the drug journals and their willingness to help pharmacy, we should have no book to which to refer, when information concerning newer remedies is requested and necessary, but even these publications are at the mercy of the manufacturer, and can tell only what the originator of the preparation cares to make public,—so, that even these sources are not really adequate, and as events have proved, these are times when the manufacturer has exploited most carefully all the good points of the preparation but entirely neglected to mention the precautions to be observed in its use, which are equally as important.

At the present time pharmacy is entirely dependent upon medicine, but if pharmacy is a profession, why look to medicine for sustenance. At best, in the present, pharmacy acts merely as a vehicle for the ideas of others, it does not originate nor create of its own accord. Consequently it is the servant of those who do create. The opportunities for us to know absolute facts exceed by a million those of the doctor—for we can start with the knowledge of definiteness, and step by step as the process elaborates quantitatively determine our results.

Why then should the pharmacist allow the opportunity to prove his ability slip by? If through lack of education, then improve the course; if because of the non-existence of a national laboratory that can furnish monthly digests which will keep pharmacy abreast with the progress of medicine and surgery, then it is time that the pharmacists of the United States get into action and demand that some of the national money wasted on other things be directed to the establishment of such a laboratory, in order that pharmacy may retrieve itself, and be as it was originally intended to be,—a help to mankind.

That doctors want elegant preparations, has been demonstrated beyond a doubt, and their liberal prescribing of preparations other than those of the U. S. P. proves their complete disregard for the book. They consider it obsolete, which is emphasized by many facts, among which may be mentioned—fluid-extract of ergot—it is only of late years that any except that of one manufacture has ever been used, and even now does the average doctor ever think of using any except the ether and chloroform of the same manufacturer? No, because ether and chloroform to be acceptable for anæsthesia, must be highly purified, and in spite of this fact, the U. S. P. allows an appreciable amount of water and alcohol, and as this appears to be of great moment, it is not lost sight of by the firm's detail-man, and physicians, after his learned explanation, are afraid to use any but his particular product. So true is this that books on medical jurisprudence fail to recognize any other brand.

It may have been true in earlier days that there was only one brand of ether or chloroform, suitable for use, or even but one fluidextract of ergot, but it is just as reasonable to suppose, that today this is a fact, as it is to suggest that only one pharmacist can make a quinine pill.

If the guarantee of the U. S. P. amounts to anything, then any product turned

out by any reputable manufacturer and labelled U. S. P. should be acceptable. Also why the necessity of going to court to prove that hexamethylenamine is the same as the proprietary preparation? If on the other hand the proprietaries are advertised as being identical with the U. S. P. the results obtained should be the same, and clinicians should not be disappointed, as they frequently are.

What requirements are necessary in a preparation to make it official in the U. S. P. instead of the N. F.? Why is Elix. Aromatic in the U. S. P., and the complete line of similar preparations, equally as important, in the N. F.?

The value of the coal tar products is an established fact, but there is no effort on the part of the U. S. P. to introduce or do research work on these, and with the exception of the introduction into the book of a few products upon which the patent rights have expired, there has been, not even a feeble attempt to offset the manufacturer in this direction and help the retail man so that he does not have to pay a most exorbitant price for something, of doubtful as well as known value, whose popularity is obtained primarily through good advertising.

It is time the U. S. P. became modernized, and since it has duplicated so many preparations of the manufacturers, it might be well to take a few hints as to their methods of creating a demand for the products by letting the physician know that the book contains all that is up to date and that the preparations are thus standardized and officially guaranteed.

Also, that the tests, methods of preparation, and general dispensing notes be made so explicit, that all pharmacists can with ease produce a uniform product. Then will the legitimate work of the true pharmacist be restored, and the manufacturing man no longer usurp it, nor destroy the ethical relations of pharmacy and medicine.

Our stores will resume their proper position in the mercantile world and many of the sidelines now indispensable through lack of real pharmaceutical business, will be discontinued not only to the advantage, but with the hearty approval of pharmacy.

THE CULTURE OF THE EDIBLE MUSHROOM (AGARICUS CAMPESTRIS) AS A HOBBY FOR THE RETAIL PHARMACIST.*

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Before relating my own experience in connection with the study and culture of the mushroom, it may be well to briefly refer to the subject in a general way.

When one asks the question as to which wild mushrooms are safe to eat and which are poisonous, a very common answer is that they may be divided into two classes, first those which are "Deadly Poisonous!" and second those which will "Kill Sure!" The average person is not inclined to test the edibility of the numerous wild sorts, and those who are possessed of some knowledge concerning those suitable for the table will usually shun inquiries or answer "yes" or "no."

* Read before the January meeting of the Northwestern Branch, A. Ph. A.