

sentative in character, working with the Patent Office and the Courts, would probably result in securing the object of the patent law in this connection, i. e., the promotion of progress in medical science, and in the useful arts of pharmacy, chemistry and drug therapeutics.

The *personnel* of such a board of control is well exemplified by the U. S. P. Revision Committee. It is truly representative in character, and is already engaged in the work of standardization. If to this Committee, Congress would give advisory authority to act in expert capacity, in conjunction with the Patent Office and the Courts, and would provide sufficient appropriation to meet the necessary expense, all objections to drug standardization, on the part of inventors and manufacturers, would disappear, also the ethical problem would be solved, and an embarrassing situation relieved.

THE PHARMACOPŒIA, THE DRUGGIST AND THE PHYSICIAN.*

R. H. NEEDHAM.

That the Pharmacopœia is the "Book of Books" among chemical and pharmaceutical publications must be conceded, when we look about and, after reviewing the great mass of literature, we find that we are compelled to turn to it, as a rule and guide in selecting and standardizing drugs and chemicals. It is not perfect, and probably never will be, but this does not detract nor lessen its value, when considering it as a book of standards, because there is no other work equal to it, let alone being its superior.

Druggists who are familiar with the Pharmacopœia are aware of its value, though we regret to say that but few of them make any use of it, except as a reference to simples. When it comes to formulas and preparations, almost every one of the rank and file, consult a Dispensatory, instead of the Pharmacopœia. As a Dispensatory consists of notes taken from one or more pharmacopœias, the matter is second-hand in a way, and coming from so many sources, it gives the reader, if he is not very careful, quite confused ideas as to some preparations. Druggists will not agree upon the procedure for making a preparation for this reason, each claiming their preparations U. S. P. Should you ask them to make the preparation, using the U. S. P. text, you would be apt to receive a mild protest, as they would probably inform you that they preferred to use the Dispensatory rather than the Pharmacopœia as the latter gives all quantities in the metric system and they have difficulty in converting weights and measures. I consider it a shame and disgrace for the druggist to make such an excuse, when metric weights and measures can be so readily obtained and at such reasonable prices. Yet this bugbear is in the way, and nothing short of a national law making the metric system the official one will place the pharmacopœia where it ought to be among the druggists.

From my view-point and experience in teaching, I wish the other systems of

*Read before the Section of Pharmacopœias and Formularies at the Nashville Meeting of the A. Ph. A., August, 1913.

weights and measures were buried and forgotten and I further wish that the new Dispensatory would omit old forms entirely.

I fail to see how we are to make any headway with physicians concerning the Pharmacopœia under present conditions. First, until the metric system is forced upon the doctors they will neither read or write it, but will continue to use the old forms. In the second place, I declare, without fear of contradiction, that they are being educated away from the pharmacopœia instead of toward it. I refer to scholastic courses of education, now, and not to commercial education.

We all know where the latter leads to, without further comment. When the time for teaching *Materia Medica* and Pharmacy are so shortened as to give but thirty to forty hours' work in medical courses, kindly tell me, how, when, or where, can an instructor find time enough to teach anything concerning the pharmacopœia or of its listed drugs and preparations. I have tried for several years, asking for more time each year, in return being assigned shorter hours, until I am asked this year to teach these two important subjects within twenty-five hours. The *curricula* of other medical schools are following the same plan and a remonstrance is met with the declaration that the student does not need a longer time. Pharmacology and therapeutics are the important subjects, consequently our future physicians will know nothing of the pharmacopœia, except as an authority to be quoted, never to be used. Neither is there any time or place for the National Formulary. Thus we perceive that while the druggist may acquire a very complete knowledge of the pharmacopœia the practical application largely ceases when we reach the physician, because of his ignorance regarding it.

We must be alive to these conditions and exert a different influence in educational matters, else we as druggists will some day awake to the fact that the pharmacopœia will be the center of attraction of a mutual admiration society, composed of all other scientists, to the exclusion of the practicing physician.

THE NEED FOR GREATER UNIFORMITY IN LAWS RELATING TO THE MANUFACTURE, SALE AND USE OF POISONS AND HABIT-FORMING DRUGS.*

M. I. WILBERT, PH. M., WASHINGTON, D. C.

The untoward harm that might result from the promiscuous distribution of admittedly potent drugs and chemical substances was early recognized as being sufficient reason for the enactment of legislation designed to restrict the manufacture, sale and use of articles that might reasonably be classed as poisons or habit-forming.

Based on this generally accepted need, laws have been enacted for practically every political division constituting what is now designated as the United States. A compilation of the essential features of these several laws has been made, in

*Read before the Section on Education and Legislation at the Nashville Meeting of the A. Ph. A., August, 1913.