Filtration of the sodium hydroxide solution must not be attempted with ordinary filtering paper for the reason that the causticity of the solution weakens the fiber of the paper, and at the same time acts on it in such a manner as to discolor the solution.

A very convenient way is to adjust two layers of plain gauze of suitable dimension by means of a rubber band to a ½ gallon funnel, then place a layer of absorbent cotton 1 inch in thickness and 5×5 squarely in the center and pour the solution carefully upon it.

The solution of magnesium sulphate may be filtered through absorbent cotton or ordinary filter paper.

COLLECTION OF THE MAGMA.

After the fourth decantation, it is not necessary to drain the whole mass of magma, but only such an amount as will remove the required volume of supernatant liquor necessary to bring the mass to the requisite density.

The draining at this point should be done on filter paper, and the magma thus collected should be removed by means of a silver or silver plated spoon and returned to the precipitating bottle, the whole mass then vigorously shaken. By this method the minimum amount of magma is at any time exposed or brought in contact with other bodies.

Rubber stoppers should be employed for the container, as the magma will in a short time act on cork and discolor both it and the mass.

THE PHARMACIST'S WORK TODAY.*

H. M. WHELPLEY, ST. LOUIS, MO.

We are living in an age of unrest which extends to all branches of human activity. Just at present, mankind is passing through a period of acute excitement which is manifest, the world over. At one time, pharmacy was a quiet, studious occupation with well fixed scope and definite limitations. Pharmacy was caught by the wave of unrest at a date prior to the memory of this generation. The pharmacist of today is so accustomed to chaotic conditions in his own vocation that he is not surprised by the perturbations that are found in other lines of trade and professions nor by the heavy head lines in the daily press that but faintly reflect the present great upheaval in the political world of Europe. Only the patient and even-tempered care to remain in pharmacy, with its trials, tribulations and uncertainties. Pharmacy, as we find it, calls for men and women of evenly balanced minds to think right and well developed bodies to resist disease. The future of pharmacy must be worked out by successive generations of the kind of persons who accomplish results in spite of difficulties. We, of today must be followed by those who are peculiarly strong and competent.

It is not my purpose on this occasion to diagnose the diseases that beset pharmacy today. Nor shall I outline a course of treatment nor even indulge in that innocent and inexpensive pastime of prognosing future conditions. What I have

*Address before the Colorado Pharmacal Association, at Boulder, June 23, 1915.

in mind is an exposition of a line of pharmaceutical work which has been going on quietly for two generations but is not generally recognized as "The Pharmacist's Work Today," although it is the most far-reaching in effect of all the varied activities in our calling at present.

THE PHARMACOPOEIA FAR-REACHING.

The Pharmacopoeia of the United States of America, as it is officially known, is more far-reaching in its influence than the drug trade at large comprehends. The Quiz Compend introduces the Pharmacopœia to the average candidate for registration. Such persons do not become well enough acquainted with the U. S. P. to know the book even by sight. College of pharmacy students are much given to studying the Pharmacopoeia in about the same manner as boys study the Bible in the mission Sunday schools of the slums in a large city. The street urchins learn by heart certain Bible verses in order to win prizes. The pharmacy students learn names, tests and formulas as a requirement for graduation. The employes of jobbing houses know the price of the U. S. P. and the fact that it cannot be sold at cut rates. The manufacturing pharmacist and the pharmaceutical chemists gain a more adequate idea of the standard which governs their products and work. Without going into tiresome detail, let us take a general survey of the Pharmacopœia from a safe distance and pleasant point of observation.

I shall not discuss the Pharmacopoeia from the ultra-scientific point of view. Do not place yourselves in a receptive mood for the consideration of the changes in mass and weight which is involved in the formation of complex atoms. You will not be told why the U. S. P. IX should adopt the drop weight method for the determination of the surface tension of a liquid.

PHARMACOPOEIA DEFINED.

A pharmacopoeia is, according to the etymology of the word, devoted to the formulas and directions for preparing medicines. Taking the United States Pharmacopoeia as a type, these authorities today define the character, establish the purity and regulate the strength of medicines for the country in which the Pharmacopoeia is issued. Twenty-three such authorities of national character are now in use. The Swiss Pharmacopoeia is published in German, French and Italian; the United States Pharmacopoeia, in English and Spanish, and some other pharmacopoeias are published in two languages. Some pharmacopoeias are legal authorities in more than one country and, on account of the itinerant habits of mankind, all of the leading pharmacopoeias are found in different countries. We, in America, use particularly the United States, the German, the British and the French Pharmacopoeias.

The first physician in the forgotten past who reduced to writing a record of his medicines brought into existence the first pharmacopoeia. In the course of time, came the hospital book of prescriptions, the formularies published by medical authorities and, in 1618, the London Pharmacopoeia. Paris also issued a pharmacopoeia in 1639. In 1699, Edinburgh published a pharmacopoeia. Then came in 1818 the first pharmacopoeia of national character. France has the credit for it and it is significant that the work was given to the world at a time when the country was in the throes of political turmoil. The United States also

realized the advantages of a National Pharmacopoeia and published its first one in 1820.

The way for a national pharmacopoeia in this country was blazed by Dr. William Brown, of a military hospital, and it was published at Lititz, Lancaster County, Pa., early in the Revolutionary War (March 12, 1778). The advantages which Dr. Brown claimed for his little volume of thirty-two pages are in keeping with the spirit of the times in Europe today. Dr. Brown says that the eighty-four formulas for internal and sixteen for external remedies are "adapted especially to our present state of need and poverty which we owe to the ferocious cruelty of the enemy and to the cruel war brought unexpectedly upon our Fatherland." "The cruel war brought unexpectedly upon our Fatherland" sounds like a recent expression in Germany, Austria, Russia, France, England, Italy and particularly Belgium.

My first activity in editorial work of a pharmaceutical nature began in 1884, at a time when the pharmaceutical world expected to soon have an International Pharmacopoeia as a result of several years of previous work. During the seventh triennial convention of the International Pharmaceutical Congress, at Chicago, in 1893, the American Pharmaceutical Association tendered the sum of one thousand dollars for use in preparing an International Pharmacopoeia. The money was never used. It has since been determined that the pharmacists of the principal countries of the world can no more agree on general formulas than can the governments of the world on a plan of international peace. In 1902, the pharmacists gave up the idea of securing an International Pharmacopoeia which would give formulas for practically all of the preparations in use by civilized man and went to the other extreme. The International Conference for the Unification of Potent Remedies which met in Brussels, thirteen years ago, came to an agreement on a few general principles to be adopted by the Pharmacopoeias of the different countries, as they are revised. The United States was then at work on the U. S. P. VIII and was the first country to fall in line. Other countries have since changed some of their standards, but to the United States belongs the honor of having fully acceded to the letter of the international agreement. These standards are only of a general character, such as making all of the stronger opium preparations 10%, the liquid arsenic preparations 1% and having a certain fixed strength for some of the most universally used potent remedies. It was this agreement which caused the Revision Committee, ten years ago, to reduce the strength of the tinctures of aconite and of veratrum and to double the percentage of drug in the tincture of strophanthus.

The physicians and pharmacists of the world can agree on a uniform percentage of strength for potent remedies, but an international Pharmacopoeia is an impossibility because they cannot decide on the color for some liquids and the flavor for other preparations nor on the worthless ingredients to be retained in a few old time remedies.

It was in January, 1817, one year before the appearance of the French Codex, which was the first Pharmacopoeia of a national character, that the Medical Society of the County of New York arranged for a convention of delegates from medical societies for the purpose of editing and publishing a national pharmacopoeia. The volume made its appearance, December 15, 1820. This conven-

tion has greatly changed in character but has met every ten years since the first assembly, at Washington, January 1, 1820. The last meeting was in May, 1910, and the next one is called for May, 1920. The Pharmacopoeia has been published from one to five years after these decennial conventions. The U. S. P. VIII, now in use, appeared in June, 1905. We may anticipate the U. S. P. IX in November or December, 1915. It is misleading to refer to the Pharmacopoeia of 1900 or the one of 1910, as no revision since the first one has been published in a decennial year. We should form the habit of speaking of the new Pharmacopoeia as the U. S. P. IX.

EARLY PHARMACOPOEIAL REVISION WORK.

The pharmacopoeial revision work in this country began in 1820 and was entirely in the hands of the medical profession. A few physicians, at odd moments, decided on the text of the first five publications which were authorized by the conventions of the decennial periods 1820 to 1860 inclusive. In 1852, the American Pharmaceutical Association asked for the admission of pharmacists to the pharmacopoeial revision conventions and secured representation in 1870. The U. S. P., published, December 15, 1820, is a small volume of 272 pages. One-half of the book is taken up with a Latin translation of the English text. It was soon found, however, that all Latin reading pharmacists in this country could also read English, so the Latin text was not continued in subsequent revisions. The U. S. P. of 1820 is little more than a mere list of materia medica titles accompanied by a collection of formulas without working directions for manipulations. Physicians do not realize the value of the Pharmacopoeia as a working manual and the revisions authorized in 1830, 1840, 1850 and 1860 made but little progress in that direction. The collection of early Pharmacopoeias in the library of the Denver Branch of the American Pharmaceutical Association will prove instructive as well as interesting to those who care to study the foundation on which the greatest work of American pharmacists is built.

RECENT PHARMACEUTICAL REVISION WORK.

The admission of pharmacists to the convention of 1870 lead to revision along broader lines. This became more apparent with the publication of the U. S. P. VI, authorized by the convention of 1880. The book became more popular and important. The committee elected by the convention of 1890, expanded the Pharmacopoeia in a new direction. Dr. Charles O. Curtman and Professor Frederick B. Power were members of that committee. They found that the description of chemicals and the tests for purity had been copied from foreign authorities. These practical revision workers realized that the chemicals in the American drug trade do not always come from the same source as those found in Europe, nor are they always made by the same processes. The chemicals in the United States have impurities not occurring in those of foreign markets. The Pharmacopoeia gave no tests for such substances but detailed tests for impurities which never occur in the chemicals of the American market. The U. S. P. VII became a working manual for pharmaceutical chemists to an extent not covered by previous revisions. The convention of 1900 was revolutionary in character and incorporated the delegate body as the "United States Pharmacopoeial Convention." The general principles adopted and the instructions given the revision committee

all evidenced a determination to make the Pharmacopoeia more useful in the drug store, the laboratory and the office of the analyst. The U. S. P. VIII which resulted and with which we are now working is acknowledged as the most useful Pharmacopoeia in the world. In England, it has been held up as a model for the revisers of the British Pharmacopoeia. Germany gave the revision committee credit for advanced pharmacopoeial work. The convention of 1910 was the most democratic of any in the series. The gathering in 1820 was made up entirely of physicians. The deliberate body in 1910 represented medical schools, pharmacy schools, state medical associations, state pharmaceutical associations, the American Medical Association, the American Pharmaceutical Association, the American Chemical Society, the U. S. Army, the U. S. Navy, the U. S. Marine Hospital and Public Health Service, the U. S. Department of Agriculture, the U. S. Department of Commerce and Labor, the Association of Official Agricultural Chemists, the Association of State and National Food and Dairy Departments, the National Wholesale Druggists' Association, and the National Dental Association.

INFLUENCE OF THE FOOD AND DRUGS ACT.

Prior to the Food and Drugs Act of June, 1906, the manufacturing pharmacists, the manufacturers of medicinal chemicals and the jobbing druggists regarded the Pharmacopoeia as a joke as far as being a law and guide for them. To always follow the Pharmacopœia never entered even the edge of their minds When requested by the revision committee to give processes and tests for use in revision work, the information was not forthcoming. The U. S. P. VIII became official late in 1905. Early in 1906, it became apparent that the Food and Drugs Act would become a law and make the Pharmacopoeia the legal standard. The chemists in manufacturing and wholesale houses began to study the U. S. P. VIII and find fault with limits of purity and the kinds of tests. The Board of Trustees authorized a conference of the Committee on Revision with representatives of the manufacturing interests. This resulted in the publication of a four-page supplement to the first print of the U. S. P. VIII, changing a number of standards so that they could be met on a commercial basis. Medicinal purity was maintained but chemical purity not always necessitated. This was not a supplement of corrections of errors in the Pharmacopoeia but a list of revision changes which would not have been necessary if the Committee on Revision could have secured before printing the U. S. P. VIII the information which later came so freely on account of the food and drugs legislation. The full co-operation of every interest in any way associated with pharmacy or medicine is now assured for revision work. This condition should be apparent in the U. S. P. IX but will inure to a fuller extent in the preparation of the U. S. P. X, which will be authorized by the convention of May, 1920, only five years hence.

MEDICAL INFLUENCE ON THE PHARMACOPOEIA.

Perhaps it was appropriate for the physicians to be the only obstetricians at the birth of the U. S. P., in 1820. The doctors acted as wet nurse until 1870 The pharmacists then began a courtship and the Pharmacopoeia became wedded to them, in 1890. The chemists became the star boarder in the official family of 1910. The doctors saw the trend of affairs and made an outcry. One medical

teacher wrote a sensational article on "The Recapture of the Pharmacopoeia" and urged the medical profession to take possession of the U. S. P. at the convention of 1910. The Pharmacopoeia slipped away from the physicians because the doctors drifted away from the materia medica and therapeutics of the days of 1820. Medical schools have almost ceased to teach along lines that interest the students in the Pharmacopoeia. Few practitioners came to the convention of 1910. The Pharmacopoeia was not captured. If it had been captured, perhaps the physicians would not have known what to do with it. More medical work in pharmacopoeial revision is desirable and pharmacists should urge physicians to learn more about the Pharmacopoeia and give it greater attention in the medical schools.

WHY PHARMACISTS HAVE NOT DESERTED THE PHARMACOPOEIA.

Pharmacists did not follow physicians in deserting the Pharmacopoeia because of the counter trade in drug stores, which calls for drugs and domestic remedies even though the prescription trade has dwindled in volume and changed in nature until very few prescriptions call for pharmacopoeial preparations. The food and drug legislation of more recent times has increased the importance of the Pharmacopoeia to pharmacists. In some states, the law requires a Pharmacopoeia as a part of the library of each drug store. Pharmacists cannot desert the Pharmacopoeia even if they would. In fact, the importance of the work grows with each decennial revision.

THE SCOPE OF THE PHARMACOPOEIA.

Two extreme views are held regarding the proper scope of the Pharmacopoeia. Some contend that such an authority should include every article used in medicine which is not of a proprietary nature. A few years ago, a practitioner of medicine, high in pharmacopoeial authority, stated that, "If physicians prescribe brick dust, then brick dust should be defined by the Pharmacopoeia." Other physicians believe that only medicines of "proved therapeutic value" should be admitted to the Pharmacopoeia. The average pharmacist who holds views on this subject expects the Pharmacopoeia to cover a scope midway between these two extremes. The National Formulary relieves the situation very much as far as the retail pharmacist is concerned. The proposed Recipe Book of the American Pharmaceutical Association will still further help furnish standards for unofficial medicines of questionable therapeutic value of a discarded but not forgotten class. It is probable that the convention of 1920 will be called on to adopt very definite action on scope of the U. S. P. X.

LEGAL STATUS OF THE U. S. P.

The Pharmacopoeia has, by common usage, always answered the purpose of a legal standard in the various courts of this country. It was not until the Food and Drugs Act of June, 1906, that the U. S. P. was read into a national law. The ruling of the Department of Internal Revenue also holds the Pharmacopoeia to be the standard under the Harrison Anti-Narcotic Law. Various state pharmacy laws recognize the authority of the U. S. P. In practical effect, the Pharmacopoeia in this country is as much a legal standard as are any of the government-made pharmacopoeias of the old world.

WORK OF A PHARMACOPOEIAL CONVENTION.

When the three or four hundred delegates convene at a decennial assemblage, the first work is the adoption of a set of General Principles to govern the work of a committee on revision for a period of ten years. Then comes the election of a new set of officers, the Committee on Revision and the Board of Trustees. A record of this procedure is not found in the commentaries on the U. S. P. but is given in a portion of the Pharmacopoeia which is seldom read even by teachers in schools of pharmacy. I refer to pages I to LXXV inclusive. I advise you to read this section of your Pharmacopoeia at the first opportunity. It will give you a better idea of the American Pharmacist's Work of Today.

HOW THE COMMITTEE ON REVISION WORKS.

The work of the Committee on Revision goes on so quietly that no one realizes the nature or full extent of the task. The General Committee consists of fifty-one members who work without salary or assurance of adequate remuneration. This large body finally passes on all questions brought before it and must approve the Pharmacopoeia as a whole before the pages are electrotyped for printing. Each of the fifty-one members has a large ring cover in which to file the recent correspondence. The letters are mimeographed on legal cap size sheets. The pages are numbered consecutively and the letters dated and numbered. Canvas binders are furnished, each holding five hundred sheets of the accumulated correspondence. Thus each member has a complete set of volumes covering all of the work of the General Committee. The last circular is Number 302, dated June 9, 1915, and closes with page 1810. This means that 92310 sheets like this exhibit were mimeographed and mailed to the fifty-one members of the General Committee on Revision. The General Committee is divided into fifteen sub-committees on as many different subjects. Each one of the smaller committees has a chairman who conducts correspondence with the associates on his committee. Each member of a sub-committee has a full set of all of the correspondence of the committee. As some persons serve on two or more committees, this correspondence becomes very voluminous. The Executive Committee of fifteen receive the reports of the sub-committees and vote on them before subjects go to the General Committee for approval. The last Executive Committee letter is Number 628 and is on page 3318. These are mimeographed on letter size sheets. The Executive Committee has to date required a total of 51,770 sheets. This, together with the General Committee sheets, makes a total of 145,080 sheets to date. As sheets of both letters and circulars in addition to the above are sent to five trustees we must add 27,640 sheets, making a grand total of 172,720 sheets exclusive of the over-run for reserve sets. This statement of mechanical labor will give some idea of the mental work which has thus far been recorded. It is merely the summing up of committee work, which in turn is based on the work of individual pharmacists, the world over. The Pharmacopoeial Work of American Pharmacists is, indeed, the great work of pharmacists of this decade.

DIGEST OF COMMENTS ON THE U. S. P.

In 1905, the government started in the Hygienic Laboratory a series of bulletins, covering all of the current comments made on the U. S. P. Ten volumes

have thus far been published. Each one contains about five hundred pages. If you desire to know what has been said about the Pharmacopoeia or any official substance by members of the Colorado Pharmacal Association, you will find it in this set of ten government publications. Copies may be purchased at a nominal price from the government printer, at Washington. No one should write a paper on an official substance without seeing what others have said on the same subject before him. This series of bulletins will give the author reference to all that has been published during ten years.

BOARD OF TRUSTEES OF THE U. S. P. C.

All financial transactions and business of the U. S. P. C. is transacted by a Board of Trustees of five elected members, together with the president of the Convention and the chairman of the Committee on Revision, as ex-officio members. Each member of the Board preserves the correspondence of the Board in a manner similar to that followed in the revision work. Every item of expense must be authorized by the entire Board. Bills are paid only by voucher checks which show the nature of the expense. The chairman and the secretary of the Board and the treasurer of the Convention must sign all voucher checks. The Board holds annual meetings but most of the business is transacted by mail and all are mimeographed so that the record in the hands of each Trustee is complete.

THE SALE OF THE PHARMACOPOEIAS.

The publication and the sale of the Pharmacopoeia is entirely in the hands of the Board of Trustees. The book is printed by one firm and another firm has the sales agency. The sales of the U. S. P. VIII began in July, 1905, and now amount to more than sixty thousand copies, for which the Board has received about one hundred and fifteen thousand dollars. The sale will continue even after the U. S. P. IX is on the market.

SPANISH TRANSLATION OF U. S. P.

Over twenty-five hundred copies of a Spanish translation of the U. S. P. VIII have been sold. The same firm that prints the English edition also prints the Spanish translation, but the sales agent is not the one handling the English edition. The income for the Spanish edition to date is over six thousand dollars. The Board of Trustees is now considering the advisability of having the U. S. P. IX translated into Spanish.

PAYMENT FOR USE OF U. S. P. TEXT.

Each revision of the Pharmacopoeia is copyrighted by the Board of Trustees. No author or publisher can legally use portions of the text of the Pharmacopoeia without having permission from the Board. A statement that this permission has been granted must be printed on the reverse of the title page. The form of notice is furnished by the Board and reads as follows:

"*Authority to use for comment* the Pharmacopœia of the United States of America, Eighth Decennial Revision, in this volume, has been granted by the Board of Trustees of the United States Pharmacopœial Convention, which Board of Trustees is in no way responsible for the accuracy of any translations of the official weights and measures, or for any statements as to strength of official preparations."

Publishers in foreign countries as well as America recognize the copyright property and apply to the Board of Trustees for permission to use U. S. P. text in books on pharmacy or medicine. The range of payments made by those using the U. S. P. VIII text is from five to five hundred dollars. The total amount paid to date on account of the U. S. P. VIII is over three thousand dollars. It is probable that the money paid for use of the U. S. P. IX text will be a much greater sum.

PHARMACOPOEIAL INCOME.

The U. S. P. C. has but three sources of income. They are the sales of the Pharmacopoeia in English, the sales of the Spanish translation and the payments made for the use of text. This income since the publication of the U. S. P. VIII in 1905 amounts to about one hundred and twenty-five thousand dollars.

PHARMACOPOEIAL EXPENSES.

The U. S. P. C. has three sub-divisions of expense. They are, (1) Revision Work, (2) Payment for Publication and Sales and (3) The Cost of Administering the Business of the Corporation. The records are kept in a manner that shows expenses in detail so that the Convention of 1920 will know the total cost of the Spanish translation, the Committee on Revision expenses for supplies, the amount spent by the Board of Trustees for meetings and all other such details that may be of interest.

HONORARIA FOR PHARMACOPOEIAL WORK.

The by-laws of the U. S. P. C. provide that the members of the Board of Trustees must serve without compensation. The members of the Committee on Revision are not salaried, but the Trustees may vote them honoraria. This will be regulated by the cash balance rather than the value of the services rendered. The Committee on Revision of the U. S. P. VIII received a blanket payment of two hundred dollars for each member. Additional amounts were then paid to some of the committee who had carried the main burden of the work.

THE CHAIRMAN OF THE COMMITTEE ON REVISION.

The chairman of the Committee on Revision is the one officer who has constant work of responsibility, volume and detail. He is the only one who receives a fixed salary.

PROOF READING OF THE PHARMACOPOEIA.

Proofreading is tiresome routine and a thankless procedure at best. The proofreading of the Pharmacopoeia where a single word or figure may cause error resulting in death is a grave responsibility. The copy is prepared with much care and the proof read by expert professionals in the publishing house. Galley proofs are furnished the fifty-one members of the General Committee on Revision. The page proofs are distributed in a similar manner. Even the proofs of the plates for the final printing are read. The first order for printing calls for ten thousand or more copies. Of this number, one or two thousand are run off, bound and placed on the market to be proof-read by the eager and critical eyes of the pharmacists at large. If errors should be reported, the plates would

be corrected before more copies are printed. I am pleased to say that serious mistakes have never been found in the printed volume.

When the metric system was introduced, the copy or the printer used the word "decimeters" in place of "centimeters" in the statement of the average length of a stick of licorice. This made the stick a giant, ten times as long as natural. A member of the Committee on Revision caught this error in the galley proof. Instead of correcting it, he merely noted with blue pencil on the margin of the paper, "Gosh! What a stick of licorice!"

U. S. P. PUBLICITY.

For the first time in pharmacopoeial work in this country, publicity has been given to the proposed changes in text. The Journal of the A. Ph. A. has published six instalments of Abstracts of Proposed Changes together with New Standards and Descriptions. The pharmaceutical press in general has republished much of this matter. This publicity has led to comments from pharmacists at large and will, no doubt, avoid some of the criticisms of the new work which might otherwise be expected when the U. S. P. IX is placed on the market.

THE NEW PHARMACOPOEIA.

The U. S. P. IX will not be ready for the opening of the schools of pharmacy, this fall, but should be on sale by the first of next year. The Board of Trustees will fix a date on which the new standard will become official. This date will be two or more months after the Pharmacopoeia is obtainable.

The Food and Drugs Act of June, 1906, makes the U. S. P. VIII the legal standard. Perhaps it will require a special act of congress to have the U. S. P. IX become the authority. This is a complication which has never before been possible. The forthcoming Pharmacopoeia will probably be some larger than the present one. The cloth binding will be replaced with buckram, which is more durable. Straps will re-enforce the back so that the book will stand more hard usage. It should be remembered, however, that it is impossible to make an acid and alkali proof book. Nor should a pharmacist expect a single copy of the Pharmacopoeia to endure drug store usage and misuse for ten years. In this connection, it is interesting to note that much more than half of the present Pharmacopoeias sold were cloth bound.

The U. S. P. IX will reflect the present high cost of living and sell for fifty cents per copy more than the U. S. P. VIII.

HOW THE PHARMACOPOEIA SHOULD BE REVISED.

This is a subject unto itself, too large for consideration here. The Pharmacopoeia is the greatest Work of American Pharmacists Today, because it reflects the labor of pharmacists for half a century or more. This feature of the revision plan should not be lost in the future. The committee work, however, would be more effective if in the hands of salaried persons. Perish the thought of a government revision of the Pharmacopoeia. Our present methods are not perfect, but are superior to those followed in foreign countries.