

## EDITORIAL

E. G. EBERLE, Editor

253 Bourse Bldg., PHILADELPHIA

### THE NEXT REVISION OF THE U. S. PHARMACOPOEIA.

THE U. S. Pharmacopoeia is, admittedly, the leading pharmacopoeia of the world, and it is so because it is the most representative. Unlike all foreign pharmacopoeias, it is not published under governmental auspices, but in accordance with general principles determined by a convention composed of representatives from all sections of the country, the detailed application of these principles being worked out by a committee of revision elected by the convention from its membership.

The United States is the melting pot of the world. While its main stem is of Anglo-Saxon stock, its branches embrace the people of all nations, and in the framing of a pharmacopoeia for such a people, it is obvious that the founders of the present system of revision of the Pharmacopoeia of the United States builded far wiser than they knew in requiring a country-wide representative convention to determine the country-wide medical and pharmaceutical needs.

The needs of our nation in the way of medical material are not local. They are not governed by what is used only in Chicago, New York or Philadelphia, but what is used in *all* sections of the country. For example, Aconite is used in the Northern States, and Veratrum Viride in the Southern States, for the same therapeutic purposes. Solution of Iron and Ammonium Acetate is used on the Atlantic Coast, while other iron preparations are used on the Pacific Coast for the same purposes. The physician cannot and must not be handicapped in the selection of the drug-tools he works with, in the treatment of disease, by a delimited *materia medica*.

Obviously, then, no bureau or department of the U. S. Government, with a small body of men, out of touch with conditions in all sections of the country, even with an honorary advisory board (which would not be directly responsible), can hope to compare in efficiency with the thoroughly representative and wonderfully efficient system of revision now employed. True, the system can be improved, and this should be done with the closest coöperation between the Government departments and the Committee of Revision.

A matter of the greatest importance in the next revision of the United States Pharmacopoeia is the selection of delegates by schools of pharmacy and various associations that have representation in the Pharmacopoeial Convention. The delegates have a voice in the basic work of the revision and should be qualified for service on the Committee on Revision.

The Tenth Decennial Convention meets in May of next year and the selection of delegates by associations should be made this year. The revision of the Pharmacopoeia presents a timely subject for discussion. While the methods followed heretofore may not be perfect, they have been productive of what has been admitted to be the best of pharmacopoeias. The selection of members for the Committee on Revision in recent years has given representation to every department of medicine and pharmacy. The work is done, not only by those deeply interested, but usually by recognized experts in their particular line of work. It is true that the members serve practically without remuneration, but this has not caused them to neglect their duty. That the revision has not invariably proceeded as rapidly as should be the case is admitted, but this is a matter which can be corrected.

The main point is the determination of the general principles that shall obtain in the framing of the next Pharmacopoeia, and the selection of delegates that shall represent the best traditions of the medical and pharmaceutical professions.

E. G. E.

#### COÖPERATION IN STANDARDIZATION AND SPECIFICATIONS.

**R**OBERT P. FISCHER, in his address on protective gas masks before the New York and Philadelphia branches of the American Pharmaceutical Association, brought out the importance of coöperation in standardization and specifications. This was emphasized by the fact that lack of unity in standardization and specification caused some delay. The gas masks were essential for protecting the lives and health of thousands. The specifications were developed from experimentations in the laboratory on this protective apparatus; the experiences of the manufacturers may have been applicable for other purposes, but not for this. Until the order was made mandatory the manufacturers were inclined to furnish products according to their own ideas, which the experiences of many years, perhaps, had proven best.

The thought is applicable in many details of manufacture, not always explainable, but still the manipulation brings the desired result, and that is the essential thing. It meant little that according to art or science the other method was correct, when "over there" the lives and health of millions were at stake. We are not informed whether the points were empiric; it was sufficient that they contributed to a perfect mask and saved lives; the science can be proved later, if necessary.

Many instances could be cited of the harmful and costly effects of too rigid specifications, multiplicity of specifications, and of those loosely drawn. These facts have economic importance, and the experiences have established closer coöperation between the Government and the industries. The latter have been

represented by elected committees who have not only worked with the Government but established coöperation among firms and corporations and various branches of related industries. What has been done by the industries and the Government should be and has been done to some extent by the professions, and the coöperation should be closer among related professions. In the reconstruction of the Army Medical Department little, if anything, has been said of pharmacy and pharmacists. This is certainly not the best way to get best results. Unquestionably many discoveries in medical science have been made; just as in the construction of a pharmacopoeia all medical branches should be represented and coöperate, so also the useful armamentarium of the medical men is best developed through the working together for the interests of the professions and humanity. Medical research requires such coöperation.

Dr. George K. Burgess, in his address as President of the Philosophical Society of Washington, January 4, 1919, asks this question: "Is it well during the after-war period to demobilize completely this army of scientific men?" (men engaged in scientific work during the war). He preceded the question by the statement that "in America, individual initiative in the past has on the whole been more potent than the State in providing research. In the prosecution of the war, however, the federal government has spent huge sums on projects requiring scientific investigation and development, and in order to carry out the scientific projects of military urgency has mobilized the scientific men of the country." This work, so well begun, should be continued.

These specific points are applicable to standardization of drugs. There is a difference of opinion relative to the activity of many drugs, for example, digitalis, due to the fact that the coöperation between pharmacology and therapeutics is not as close as should be the case. This has been pointed out by Dr. Albion Walter Hewlett in his address as Chairman of the Section on Pharmacology and Therapeutics of the American Medical Association. Medical history and experience prove that contact between the science of drug action and the art of treatment is essential for best results. There should be closer coöperation between medicine and pharmacy in research.

E. G. E.

#### COMPULSORY HEALTH INSURANCE.

**U**NDER Editorial Notes references are given to papers and reports that have heretofore appeared in the JOURNAL OF THE AMERICAN PHARMACEUTICAL ASSOCIATION. These reports were largely concerned with the effect of Compulsory Health Insurance on the drug business. Quite naturally druggists are concerned along these lines, but if the proposition really is beneficial to the majority such special arguments would have little value.

Many legislatures are now in session and in some states Compulsory Health Insurance laws have been proposed. Druggists, as citizens, should take an active

interest in this legislation. Full light should be had on the subject, it should be rationally investigated, and foreign experience with such measures contrasted with the facts.

Relative to Compulsory Health Insurance President Samuel Gompers, of the American Federation of Labor, recently expressed himself as strongly opposed to the system, as follows:

"This fundamental fact stands out paramount, that social insurance cannot remove or prevent poverty. It does not get at the causes of social injustice.

"The efforts of trade organizations are directed at fundamental things. They endeavor to secure to all the workers a living wage that will enable them to have sanitary homes, conditions of living that are conducive to good health, adequate clothing, nourishing food and other things that are essential to the maintenance of good health. In attacking the health problem from the preventive and constructive side they are doing infinitely more than any health insurance could do which provides only for relief in case of sickness, and yet the compulsory law would undermine the trade-union activity. There must necessarily be a weakening of independence of spirit and virility when compulsory insurance is provided for so large a number of citizens of the state."

Magnus W. Alexander, of West Lynn, Mass., in the legislative hearings in New York State and Massachusetts, made use of these words:

"An impartial judge of the health insurance proposal will recognize that its chief function would be to distribute funds and to provide medical care; that it lays but weak emphasis on prevention of disease, the great consummation toward which all health betterment efforts should tend. Instead of saving the money of wage-earners and our people in general, it seems designed to waste it; instead of adding virility and efficiency to our people, it gives every promise to lower their standards of independence and to discourage American grit; instead of promoting initiative and research amongst the medical profession, it seems to threaten to retard it with political and professional surveillance, and with complicated machinery."

Members should see to it that in every State where Compulsory Health Insurance laws are proposed the subject is studied from every standpoint.

E. G. E.

---