SYMPOSIUM ON THE RÉVISION OF THE UNITED STATES PHARMACOPOEIA.*

THE SCOPE OF U. S. P. REVISION.

BY CHARLES H. LAWALL.

The Committee on Scope of the U. S. P. IX was the first experiment of its kind, I believe.

Its duties were governed by the initial paragraph of the "general principles" adopted at an early session of the 1910 convention in the following language:

"We recommend that the Committee of Revision be authorized to admit into the Pharmacopoeia any medicinal substance of known origin, but no substance or combination of substances shall be introduced if the composition or mode of manufacture thereof be kept secret, or if it be controlled by unlimited proprietary or patent rights and the list of substances should be carefully selected, with standards for identity and purity, as far as possible. Substances used only for technical purposes should not be admitted to the next Pharmacopoeia, and a sta ement should be pla(ed in the preface to the effect that standards of purity and strength, prescribed in the text of the Pharmacopoeia, are intended solely to apply to substances which are used for medicinal purposes, or in determining the identity and purity of the same."

It is doubtful whether a better phrasing of the necessary guiding principles of such a committee could be devised.

In the application thereof, however, it was soon evident that there was much opportunity for discussion and argument, and the length of time devoted by the committee on scope to the question of what should or should not enter into the U. S. P. IX would have delayed the issuing of the book for a year longer, had not the committees, to whom were assigned the duty of drafting the standards for the final accepted list, gone ahead and prepared copy for a large number of substances irrespective of the final decision, thus working synchronously instead of successively as was the intent. The personnel of the committee on scope was entirely medical.

Theoretically, it would seem proper for physicians only to decide what is to be included in the list of officially recognized substances, but practically, it does not work out very well. Each physician, of course, follows certain habits in prescribing and relies upon certain drugs for particular results. Two equally successful practitioners may use different drugs entirely, and if it comes to a question of limiting the list of official substances each wants the substances that he uses included in such a list, and he may have a poor opinion of the list selected by his equally successful professional brother.

When to the time consumed in settling differences of this kind is added the time consumed in convincing physicians that certain substances of pharmaceutic importance must be admitted in order that preparations of uniform quality may be made, it is evident that the plan has its disadvantages.

I have heard physicians ridicule the Pharmacopoeia because it includes in the official list Iron Wire and Mercury, although they would criticise the same book did it not contain the preparations of iron and mercury which can only be properly standardized by beginning with the first ingredients.

Inasmuch as the report of the Committee on Scope was reviewed by the entire committee during the progress of the last revision of the Pharmacopoeia and many changes made during the progress of the work, it would seem advisable for the next convention to change the procedure and make the entire Committee of Revision a committee on scope. The suggestions for admissions and delegations could be made by the various sub-committees together with arguments in favor of the change and, while the mimeographed discussion might be voluminous, it would probably lead to quicker results than were obtained by the plan used in the present revision.

It is hoped that a radical change in procedure will be instituted in the next revision by providing for frequent meetings of the heads of sub-committees. This group is known as the Executive Committee and it might be a good plan for them to act as a clearing house in the matter of scope and submit the proposed list together with reasons for action taken to the entire committee for ratification. This would be the best plan of all.

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* Papers on the revision of the United States Pharmacopoeia were read before the Scientific Section and the Section on Education and Legislation of the American Pharmaceutical Association at the New York meeting, 1919. The papers and discussions printed in this number of the JOURNAL were presented before the latter Section; other papers of the Symposium will follow in succeeding issues.