

DEPARTMENT OF COMMERCIAL INTERESTS

CONDUCTED BY DR. ROBERT P. FISCHER.

It is the desire of the editor of THIS JOURNAL, and the writer of this page that the membership of the AMERICAN PHARMACEUTICAL ASSOCIATION take an active part in making the Department of Commercial Interests of value to all our readers. We would appreciate comment on the topics that have been discussed thus far and, in fact, we hope that the members of the ASSOCIATION will feel free to voice their opinions on subjects of commercial interest through this Department at any time.

At the Founder's Day celebration of the Philadelphia College of Pharmacy held on the one hundredth anniversary of the founding of that institution, February 23, 1921, Dr. H. V. Army, of New York, addressed those assembled on the subject: "The Pharmacy of One Hundred Years Ago and of To-day." In this splendid address he drew the following comparison between the pharmacy of to-day and one hundred years ago: "While pharmacy of 1821 was the art of compounding medicaments and the sale thereof, the pharmacy of 1921, the age of machine-made goods, is largely the art (or science if you will) of salesmanship, the distribution of the products of other men's hands. Deplore it as we will, the machine has largely replaced the man in our calling, as in many others. The druggist of 1821 was a merchant of standing who served his customers with products made in the back room of his store, and in many cases that back room between now and then has grown into a huge factory. The pharmacist of 1921 has four ways in which he may utilize his training; (a) he may be a clerk in a corporation drug store; (b) he may be a proprietor of a commercial store where salesmanship is the keynote, even as it is in the corporation store; (c) he may become a prescription specialist to whom physicians turn for expert advice, even as the physicians of 1821 turned to Marshall, to Milhau, to Durand and to Ducatel; (d) he may be a trained pharmaceutical chemist or pharmacognosist employed in a manufacturing plant."

Let us analyze this statement for a moment. Is there, after all, so much difference, fundamentally, between what are now considered the "good old days" in pharmacy and the pharmacy of 1921?

The only real difference is the existence of the pharmaceutical manufacturing house, a factor which did not enter into the consideration of the pharmacy of 1821.

A span of one hundred years has not altered the fact that the pharmacist occupies the dual position of tradesman and professional man. Specialization has left its mark on pharmacy, as it has on every other profession or trade during the past century. In 1821, Philadelphia was a city of 137,000 population and New York trailed behind with 123,000 and Chicago consisted of a few shacks around Fort Dearborn. To-day these three cities and their suburbs alone represent a population of over 15,000,000. Is it any wonder that the drug store, in

endeavoring to serve such densely populated communities, has changed from the old apothecary shop to the modern store with its fine fixtures and bright lights?

The drug store, because of keen competition, has kept pace with the demands of the times and, in providing the many service features now expected by the public, it has had to cast about for means of maintaining itself. Drugs, theoretically, are used only by the sick. Except in times of epidemics, the demand for medicines would not be sufficient to keep very many drug stores running as private enterprises. People would raise a howl if they had to walk or even ride a mile or two to the nearest pharmacy for their medicines. Hence, the drug store, in order to be convenient to a large community in time of sickness, must support itself by the sale of other goods which that community may need or can be persuaded to buy there. The modern drug store, which some of our brethren look upon with disdain, is not the realization of some business man's dream. It is a product of the evolution of the American city and the demands for service on the part of its inhabitants.

The pharmacist who graduates from a good college to-day knows a great deal more about pharmacy than did the apothecary of 1821, but he does not have as much opportunity to practice what he has been taught. In 1821 the pharmacist was his own manufacturer in addition to being a distributor. In 1921, manufacturing is a very small part of his function. He is more of a distributor of manufactured products but he still compounds prescriptions. The trend of the times is toward the elimination of the small manufacturer. Shoes are no longer made to order by the old shoemaker; furniture is no longer made to order by the small cabinet maker; ready-made clothes have reduced the tailor to a mender and presser, and drug products are made on a large scale by the big manufacturing houses. There are, of course, exceptions to all the cases cited, but by far the largest portion of the demand for the necessities of life which require manufacturing, is the product of large-scale operations.

Rather than limiting the opportunities of those who want to continue their trade or profession as manufacturers of any of the products referred to above, this modern condition of affairs gives them an opportunity to specialize and make themselves indispensable to the manufacturing concerns who are supplying the demand for their wares.

A noted shoe manufacturer was recently told that a certain educational institution was about to turn out some men who had specialized on shoe manufacturing and expected to enter his employ as specialists in that field. He answered to this effect: "I have no use for specialists in shoe manufacturing. What I want is specialists in any one of the forty-two items and operations that enter into the production of a shoe. The man who has made or will make an intensive study of eyelets, for example, and all the problems connected with the selection of proper metal, proper insertion, devise labor-saving methods of inserting them, etc., is one who will become indispensable to this business. He cannot become expert in all of the forty-two items because he won't live long enough." So it is with pharmaceutical manufacturing. The man who wants to do manufacturing and loves manufacturing problems will have endless opportunity in our large drug concerns.

On the other hand, the man who wants a business of his own and goes into

the retail drug business has his choice of locating where a strictly prescription pharmacy will pay, or conducting a modern drug store with such side lines as are necessary to support it. It is a question of specialization and the graduate in pharmacy still has the opportunity and privilege of making his choice. The apothecary of 1821 had only one avenue open to him and he was able to do all that the pharmacy and medicine of that day required. The pharmacist of 1921 cannot be expert in all branches of the work which modern pharmacy and medicine are liable to send his way. He should have a fundamental knowledge of it all, but he must specialize either in merchandising, prescription compounding, manufacturing or medical laboratory work.

One hundred years have not passed without developing pharmacy, and the modern pharmacist himself is a part of that development. We may not like some phases of the development but we ought to face the facts.

DRUG CLERKS, UNIONS AND STRIKES.*

BY JOHN CULLEY, OGDEN, UTAH.

[Editor's Note.—As an introductory to his paper the author discussed labor organizations and the methods pursued by them in carrying their plans of action into effect, and strikes play an important part. As the author states, we are mostly concerned with the relationship of these organizations to drug clerk activities, and that part of the paper follows.]

The great mass of people comprising this country's population may conveniently be divided into three general classes: Capitalists, professional men and laborers. A capitalist is one who owns bonds, has a savings account, shares of stock in a company, owns a business, no matter how large or small. Any one who uses his money to make more money is a capitalist. One who hires his fellow-men to work for him is a capitalist. The proprietor of a drug store is in that class. A laboring man therefore is one who works for another for a given wage. The professional class includes doctors, dentists, teachers, pharmacists, and, perhaps, men and women of a score of other vocations. I prefer to place the drug clerk in this professional class; technically, he may be laboring for another, but he is not paid for the actual work or labor performed, but his salary determined, more, by what he knows. He is, in fact, a working professional. The man in the professional class is not paid for the actual work he does, neither is he bound down to a specified number of hours, but his pay, his remuneration, is always based upon his knowledge of his chosen profession. The more he knows the more he will surely command. This applies to the drug clerk, the mining engineer, the physician, the teacher, the lawyer. If this were not so, why do some drug clerks command a higher wage than others, and why do some stores pay more than others? It is a matter of proficiency and knowledge, that's all. Drug clerks may join all the unions on earth, but that fact alone will never improve their condition in life or pave the way for advancement. They may work eight, six, or less hours per day, and four or five days per week, but it will

* Part of a paper read before Section on Practical Pharmacy and Dispensing, A. Ph. A., City of Washington meeting, 1920.