

## EDITORIAL

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### COÖRDINATING PHARMACAL AND MEDICAL ENDEAVOR.

IN the larger cities, following the completion of the last two editions of the U. S. Pharmacopoeia and National Formulary, under the auspices of the A. Ph. A. branches and local pharmaceutical associations, meetings were held to discuss the new standards. Physicians and dentists participated in the discussions, resulting in better acquaintance with these standards and a friendlier relation was developed between the participants, with a growing recognition that the best service to humanity by the professions is largely dependent on their coöperation. These periods of closer affiliation are activated by common purposes, or the recognition of the need of one branch of medicine for the other. While it must be admitted that the relations were not always cordial and coöperative during the War, a realization of mutual service was clearly indicated during the Washington meeting of the American Pharmaceutical Association. That pharmacists, though not as such, held responsible positions in the U. S. Medical departments is indicative of the value of pharmacy, even if this only served them in their further medical studies.

During the period referred to Dr. J. Madison Taylor said: "Pharmacy is as full a correlate of medicine as is dentistry or veterinary surgery." In order to offset the statement which is frequently made—that pharmacists present the need of coöperation to physicians, but the latter seldom, if ever, admit the importance—we cannot do better than quote from an address by Dr. Thomas E. Satterthwaite before the New York Branch A. Ph. A., May 14, 1917 (see THIS JOURNAL, July 1917, p. 612):

"First, we need a closer fellowship. We should coöperate and fraternize. We also need to do team work. Each requires the aid of the other. There are tasks that will not be accomplished successfully, or certainly will encounter unnecessary delays, unless we unite our forces to accomplish them. I am referring now more particularly to the solution of problems that are at the moment subjects of legislative inquiry with a view to proper enactments. The problem of drug addiction is one that positively calls for our coöperation. Physicians cannot solve it without the aid of drug manufacturers, and *vice versa*. In fact, in so far as the public is concerned, our county and state medical societies should, through their respective committees, meet at suitable times with accredited pharmaceutical associations, with a view to concerted action in these public matters. We should do so in the interest of public welfare; otherwise the problems will be imperfectly handled, and the results disastrous."

At a meeting of drug manufacturers in Washington last month the following resolution was passed:

*“Resolved, That the organization of local clubs or associations of manufacturing, distributing and dispensing pharmacists and practicing physicians will tend to promote a better feeling and understanding between these professions to the advantage of the communities they serve, and such an organization should be formed and maintained in every large city.”*

These presentations of the subject under discussion are not far apart; the former is from a representative of the medical profession and the resolution was prepared by representatives of drug industries. Only selfish motives prevent the desirable coöperation of the medical professions, whereas the mutual relation should be for best public service. It is not improbable, if a more general expression of medical men and pharmacists were obtainable, that their aims and purposes would be found to harmonize more closely than indicated. There is lack of action. Both are concerned in many legislative matters at the present time, and the sooner graduation in pharmacy becomes a prerequisite for those who deal in and prepare medicines, the better and more safely will the public be served, and it will also be for the best interests of medicine and pharmacy. Herein is an opportunity for coöperation in which the support of the medical profession should be forthcoming. Everyone realizes the dangers that may result from undesirables in drug stores under prohibition regulations. No class is free from those who yield to mercenary persuasion, but responsibilities limit that number, or, at least, regulations can be more readily and effectively provided for them. Unquestionably, in many states, and probably in those without prerequisite laws, medical men are more influential in legislative halls than pharmacists. They should coöperate in a coördinated endeavor to effect such legislation. The public will be better served.

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### THE NATIONAL NATIONAL FORMULARY.

BY WILBUR L. SCOVILLE.

The primary purpose of the National Formulary was to provide standard formulas for the members of the American Pharmaceutical Association. For the men in pharmacy who are sincerely interested in the professional side of pharmacy. For those whose joy in knowledge and skill is not secondary to their remuneration therefor. Whose satisfaction in compounding a prescription that has baffled others is even greater than the profits accruing therefrom. Whose chief pleasure is professional rather than financial achievements. For of such are the members of the American Pharmaceutical Association. And the National Formulary has reflected the wants of such pharmacists.

For this reason it has retained the best of the older pharmacy. It has kept on record formulas which have gone out of style or which have never become entirely Americanized. It has preserved many articles because of old associations