of the fundamental and vital aims and purposes for which our institution stands. Those who, for various reasons, cannot be active, are silent partners in professional work. The disparagement of this essential element, and the lowering of this high purpose, would be suicidal, not only to the Association but to all the ramifications of pharmacy.

A prominent legislator, in reply to my request for his support of a measure of special interest to retail pharmacists, said: "I have a kindly feeling toward the druggist and have respect for his calling, but I do not see why he should ask for special legislation. He is not really a producer of medicines, and his lack of interest in the science of his vocation is quite apparent. He seems to be simply a retailer of manufactured goods."

This remark—while I put up an argument in rebuttal, directing his attention to the work of this representative association, state associations, etc.—made me painfully conscious of the manner in which the outsider formed an estimate of the pharmaceutical profession, in other words, "*As Others See Us.*"

In one of the recent numbers of a prominent pharmaceutical journal there is published what may be said to be a symposium of the physicians' estimate of the pharmaceutical profession. This symposium is quite illuminating. It gives some idea of the point of view of physicians—in other words, *As They See Us.*

It is encouraging to note that, in this symposium, we have, as a rule, a liberal and generous consideration. Quoting one remark, from one of the representative contributors, he says: "Physicians must grant to the pharmacist all the respect, esteem and deference due to a professional man. They must not look upon him as an ordinary man of business, but must consider his profession on equal standing with their own."

It is needless to say, perhaps, this generous estimate of pharmacy is not shared by the medical profession as a whole, but it is to be hoped that the time will come when the medical profession, as a body, as well as the public, will be as broad-minded and as liberal as the contributor above quoted.

The burden of this paper is a plea for a greater and wider support of professional pharmacy. Our reputation depends upon professional work, upon professional spirit for which this Association stands. The better this is upheld and sustained the greater and more rapid will be the progress of pharmacy in all of its ramifications.

LIQUOR ANTISEPTICUS ALKALINUS AND LIQUOR ANTISEPTICUS.*

BY K. A. BARTLETT.

Both of the above preparations have been the subject of considerable discussion. There seems to be no unity of opinion regarding them, and due to the general difference of opinion, the writer took the subjects in hand for investigation.

After devoting a great deal of time to the work and carrying out numerous experiments on the present formula as well as many modifications of them, some definite conclusions have been reached. In setting forth the results it will in all probability be best to treat the preparations separately.

* Read before Section on Practical Pharmacy and Dispensing A. Ph. A., New Orleans meeting, 1921.

LIQUOR ANTISEPTICUS ALKALINUS.

This preparation was official in the N. F. III and was carried to the N. F. IV. with but two minor changes. One, the replacing of Tincture Cudbear by Powdered Cudbear, which was a constructive change, and the other the replacing of Magnesium Carbonate with Talc, which change seems to make very little difference either way, the writer preferring Talc.

But as aforesaid, these changes were minor and what seems to be the chief objections to the formula were not remedied. Dr. LaWall back in 1914 presented an article calling attention to the faults of this preparation, which seem to be, its unnecessarily high total solid content, its excessive alkalinity, and its rather unpleasant taste. Upon examination, the above-mentioned faults seem to be substantiated. A number of experiments were carried out and the following formula was devised which seems to remedy the faults of the present formula and to offer a pleasant and effective preparation. It has been used quite extensively and favorably commented on by all who have used it.

Sodium Salicylate	10. Gm.
Sodium Benzoate	10. Gm.
Sodium Borate	20. Gm.
Thymol	0.5 Gm.
Eucalyptol	1. mil.
Methyl Salicylate	0.5 Gm.
Cudbear	2. Gm.
Alcohol	50. mils.
Glycerin	100. mils.
Talc	10. Gm.
Water.....q.s. ad	1000. mils.

Dissolve the Sodium Salicylate, Sodium Benzoate and Sodium Borate in 500 Cc. of water. Dissolve the Thymol, Eucalyptol and Methyl Salicylate in the Alcohol. Mix the two solutions adding the aqueous to the alcoholic, then add the Glycerin, Cudbear, Talc, and Water q. s. ad. 1000 mils. Let stand 24 hours and filter, returning the first portions until the filtrate comes brilliantly clear.

The principal differences between this formula and the present official one are; the elimination of potassium bicarbonate, which seems to be the chief cause of the unpleasant alkaline taste, the dropping of oil of peppermint, which detracts rather than adds to the flavor, a slight decrease in the alcohol and glycerin content and an increase in the thymol, eucalyptol and methyl salicylate.

In a comparison of the two formulas as regards alkalinity, they were both checked against $\frac{N}{1}$ H_2SO_4, the N. F. IV formula requiring 0.6 Cc. of $\frac{N}{1}$ H_2SO_4 to neutralize 1 Cc. of it, and the above formula requiring 0.11 Cc. of $\frac{N}{1}$ H_2SO_4 to neutralize.

A comparison of the two formulas will show an obvious cut in the total solid content.

LIQUOR ANTISEPTICUS N. F. IV.

Some have raised objections to this formula on the basis that it does not stay clear. After experimenting with the formula, the writer has reached the conclusion that any trouble with it must be due to lack of care in compounding.

One might be led to believe that the eucalyptol and possibly some of the other

antiseptics were present in too large quantities, as they do not all go into solution and an appreciable amount of them filter out. However, these quantities seem to be essential to get the desired flavor in the finished preparation. Cutting down the oil quantities lessens the excess amount of oil but it very materially changes the flavor, so that such a procedure is not advisable.

This excess oil is in all probability the cause of trouble with the formula. If after the preparation is put on the filter, it is allowed to drain thoroughly, a portion of this oil will pass through the filter and will sooner or later cause a clouding of the preparation. There are only two ways of overcoming this difficulty; one is by carefully watching the filters and removing them before the excess oil has a chance to pass into the finished preparation, and the other, to use sufficient additional filtering medium (talc or kieselguhr) to completely absorb this excess oil and prevent its passing through the filter.

If the above precautions are borne in mind no difficulty should be experienced in making a satisfactory preparation by the formula of the N. F. IV.

LABORATORIES OF
E. R. SQUIBB & SONS,
BROOKLYN, N. Y.

FURTHER NOTES ON TINCTURE OF CANTHARIDES.*

BY F. W. NITARDY.

At the 1919 meeting of the American Pharmaceutical Association in New York City I presented before this section a paper on Tincture Cantharides[1] in which I recommended for consideration in the U. S. P. X, a preparation made by exhausting the drug with a hydro-alcoholic menstruum and the aid of sufficient potassium hydroxide to saponify the oil in the drug and combine with the cantharidin present. By referring to this paper[1] you will note that the inability to produce an active tincture by the U. S. P. IX method or find an active tincture on the market, led to the investigation of the alkali method which had been recommended by Dr. E. R. Squibb many years ago.

Satisfactory results were obtained from the method referred to, not only in experimental lots but also in large scale production. In all seven large lots were made between September 1918 and February 1921, all of which showed blistering power. In some instances the tincture itself when applied to the skin would blister, in some instances it had to be concentrated somewhat in order to give good results.

Since early in this year, however, several lots have been obtained which show no blistering power when concentrated, even though the drug showed satisfactory cantharidin content on assay. Strange to say, some of the lots of drug which failed to give an active tincture with the alkaline menstruum did yield a good tincture by the U. S. P. IX method; a situation just the reverse of that previously experienced.

I feel obliged, therefore to withdraw my suggestion of two years ago as it now appears that neither the method proposed in my previous paper nor the U. S. P. IX method will give satisfactory results at all times or under all conditions. The whole situation evidently requires further investigation.

I am sorry that I can offer no explanation at this time for the unsatisfactory results obtained, but hope to make a further report on this subject at a later date.

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[1] Read before Section on Practical Pharmacy and Dispensing, New Orleans meeting, 1921.

[1] Journal A. Ph. A., December 1919, p. 1030.