EDITORIAL

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THE OPPORTUNITIES OF OUR PHARMACY SCHOOLS.

To review the early history of American colleges of pharmacy is to receive inspiration. Hampered by slender means and inadequate facilities and with no public support or endowment, these schools struggled on against heavy odds and won a place through sheer determination and dogged courage. While primarily teaching institutions, conducted for the instruction of apprentices, the old-time pharmacy schools went beyond this and functioned as centers about which the professional interests of pharmacy were grouped. Collections of journals and books as well as of drug specimens were early formed and became the forerunners of our present pharmaceutical libraries and museums. Public lectures were given, meetings of pharmacists were facilitated, codes of ethics were adopted, pharmaceutical periodicals were founded and professional interests generally were conserved and increased.

With the later developments of the pharmacy schools, their more adequate equipment, finer buildings and more generous support we are all familiar. One has but to survey the scientific papers presented at the annual conventions of the American Pharmaceutical Association to appreciate how prominent a part the faculties of the schools are taking in research. Similarly, a scanning of the list of the revision committees of the United States Pharmacopœia and the National Formulary reveals the large proportion of teachers in the pharmaceutical schools who are thus giving effective aid in maintaining high standards for American pharmacy.

It is estimated that there are between nine and ten thousand students in attendance at our pharmacy schools and if the average cost of their instruction is two hundred dollars each, which is believed to be a conservative figure, then the schools of pharmacy in the United States are expending nearly two million dollars a year in carrying on their teaching work.

It is evident then that the progress has been chiefly along lines of teaching and But while rejoicing in their success, may we not pause to ask whether the research. schools are doing their full duty when they devote their energies entirely to teaching and research? Might they not, to the profit of pharmacy, the public and themselves, give greater attention to those fundamental services which characterized their early days? Cannot their libraries and museums be made more available to pharmacists and the public? Should they not endeavor to impress more strongly upon the thousands of young men and women who annually pass through their portals, the importance-nay the absolute necessity-of organization, to the end that the professional no less than the commercial interests of pharmacy shall be adequately served? Would not a presentation of ethics as set forth in the Code of the American Pharmaceutical Association be worth while? Should not the pharmaceutical student be impressed with professional ideals at a time when his mind is best fitted to receive and retain these impressions? Could not the importance of

the AMERICAN PHARMACEUTICAL ASSOCIATION as a "graduate course" to keep him in touch with professional and scientific pharmacy be emphasized? Is there any good reason why the great majority of the graduates of our schools of pharmacy, to the number of three or four thousand each year, should not be inducted into the ASSOCIATION, thereby building it up to greater usefulness while at the same time insuring their continued interest in the professional phases of our calling an interest only too likely to be submerged in commercial pursuits after leaving the schools? WM. B. DAY.

EDUCATION VS. LEGISLATION.

THIS, being an odd year, will witness the convening of some forty-three state legislatures. As in the past the pharmaceutical profession and drug trade, manufacturing and distributing, must be prepared to face a vast number of proposals to place further restrictive measures about the conduct of professional and commercial practices. A careful analysis of the bills introduced in the years 1921 and 1922 indicates that about one out of every seven legislative proposals directly or indirectly affects pharmacy and the drug trade. Repeatedly in the past it has been pointed out, and it should now be emphasized again, trade and professional malpractice cannot be corrected by legislation of too severe or regulatory character; additional legislation will not necessarily serve to check what may at times appear as abuses, but only a better observance by individuals of existing laws and the common principles of right as distingushed from wrong.

In a number of states, at least eight, bills have already been presented with the view of confining by law all sales of package medicines, toilet articles and simple household drugs to registered or licensed pharmacists. While there is strong argument, almost irrefutable, in favor of such proposals, there are also one or two fundamental contentions on the other side that should be fully and carefully weighed before pharmacy commits itself in support of such legislation. In the first place there is the very practical question as to what means of distribution can be set up in those rural areas where there are no pharmacies, where even doctors do not dwell, but in which families suffering from ailments of one kind or another are almost wholly dependent upon self-medication for relief. These families should be protected in their right to procure drugs and medicines of proper quality and purity at the least expenditure of effort and money possible, whether it be from wagon distributors or general stores. The consumers in these areas are going to secure their needs, whether it is contrary to statute or not, and some outlaw agency is going to supply them. The suppliers, however, being made outlaw by the terms of the proposed statutes will have some difficulty in procuring goods of proper quality and purity from law-abiding manufacturers and dealers, thus being forced to market simple drugs and medicines of more or less doubtful quality, produced by unscrupulous manufacturers. Such a situation does exist to-day even in those states where there are less restrictive laws than those now proposed. It is a problem of serious concern to both pharmacy and the public.

One only has to refer to the results of narcotic and liquor restrictions to observe the dire consequences of super-restraints upon distributing outlets. The narcotic addict no longer procures his supplies of pure drugs from responsible sources but gets an ample supply of adulterated "stuff" from an outlaw dealer. The same largely applies to the liquor habitué. In both cases, though, the drug trade and pharmacy are policed from morning until night, saddled with burdensome taxes, detailed records, reports, inspections, bonds, permits, licenses, applications, and the full responsibility for supplying the entire community with quality goods.

Now it is proposed to throw further burdens upon the profession and trade by a mass of state laws which will have to carry with them some regulatory power, some new or enlarged bureaucratic body, employing an army of political appointees, paid and maintained out of more special taxes to be levied on the drug store and the merchandise sold therein. As in all previous similar restrictive legislation, the law-abiding citizens will be harassed, and the general merchandise bootlegger will escape.

Pharmacists might well observe that the most severe restrictive measures relating to the practice of medicine have in no way limited the expansion of public use of drugless methods of healing or disease treatment. Furthermore, if the drug and pharmaceutical trades are not naturally the most economical agencies of distributing drug merchandise, they will ultimately have to give way to some other.

The wiser course to pursue, it would seem, is not to seek any more restrictive legislation, but rather to systematically educate the consuming public on two fundamental principles: (1) the importance of buying and using only those drugs and medicines that are of such quality in strength and purity as will serve the purposes for which they are intended; (2) the drug trade and pharmaceutical profession handle and distribute only goods that are of such standards of purity and strength as will serve their intended purposes. Both of these can be accomplished by carefully planned advertising both in the press and by circular letters and pamphlets.

Constructive work along this line will improve the public health and also benefit pharmacy, omitting all the possibilities of regulation and taxation that are bound to follow a short-sighted legislative policy aimed at a few otherwise law-abiding merchants. C. H. W.

HEALTH DEPARTMENT OF THE LEAGUE OF NATIONS.

V. Cofman, B.Sc., M.P.S., writing in the *Pharmaceutical Journal and Pharmacist* of January 13, on above subject, closes the article with the following paragraph on an International Pharmacopœia: "The utility of a permanent international body dealing with matters related to public health is only too evident. How largely pharmacy, as well as medicine, is interested in it is obvious from the work cited in connection with the standardization of vaccines and sera. From this to the international unification of other medicinal preparations is only one step, and the time is probably not distant when the Health De-

partment of the League of Nations may have to take the matter in hand. Would it not be fitting that the initiative should come from the pharmacists? The next meeting of the International Pharmaceutical Federation, to be held in London in July this year, could well put forward a constructive plan for approaching that difficult goal-an international pharmacopœia. Such an initiative would bring credit to the profession and show its progressive ideas. During the last few years we have seen so many schemes formerly thought Utopian become part of every-day life that it would be hypercritical to doubt the practicability of having uniform pharmaceutical preparations all over the world."