by the pharmacist and that is the sale of preparations and supplies designed to prevent the spread of disease. A careful study of the work of the medical profession in disease prevention will reveal many avenues of trade for the retail pharmacist. This is a line that can be followed with good grace by the pharmacist and is really a part of his legitimate and necessary service to the public. Here the appeal to the health, happiness and peace of mind of the individual again comes prominently into play and can be skilfully handled to the advantage of both pharmacist and public. The so-called affection appeal, which takes into consideration the protection of others would naturally supplement the foregoing.

Good taste is such a self-evident factor in all sales work that it requires no extended discussion here. As stated near the beginning of this article, Professor Clark's classification of appeals as given seems incomplete unless the seven classifications are considered so broadly as to include factors which are not mentioned in them, specifically. There is for example the utilitarian appeal which certainly influences great numbers of buyers no matter whether they are purchasing drugs, sundries or toilet articles. "What is the most economical thing for me to buy to secure a maximum of efficiency?" "Can I use this product or that article for more than one purpose?" These are questions we meet with every day in the drug store and they indicate that the utility of an article or a product is the foremost consideration in the mind of the buyer who has already found a want for a certain type of product. Practically every advertisement consciously or unconsciously emphasizes the utilitarian appeal and salesmen do likewise.

It is a wise thing for a store owner to sit down for an hour or two each week with his sales personnel and discuss frankly and freely what makes people buy certain things in preference to others; what appeals to them about the merchandise sold in drug stores and what ought to appeal to the public if it were properly presented. Such conferences stimulate self analysis, the analysis of buying or selling appeals and must of necessity make better salesmen of the group. Furthermore, such conferences will stimulate interest and eventually bring about better service to customers as well as greater revenue and reputation to the store.

WHAT IS THE MATTER WITH PHARMACY?* BY AMBROSE HUNSBERGER.

For several years past the inquiry conveyed in the title of this paper has been a source of argument and controversy in pharmaceutical circles equalled in intensity only by the absorbing interest aroused in the lay mind some years ago when that classic query concerning the "age of Ann" was propounded.

So far as is known the latter problem has not been solved to the satisfaction of everybody and it reasonably may be assumed that our own problem as stated in the title will fail of a solution which will meet with unanimous approval from those who are most interested. This unpromising prognosis, however, should deter no one who is interested in the problem from grappling with it, in his own way and to the best of his ability, in the hope that ultimately a conclusion will be reached which will appeal favorably to the majority of those who are most seriously concerned with whatever may be "the matter with pharmacy."

^{*}Section on Commercial Interests, A. PH. A., Cleveland meeting, 1922.

The scope which is implied by the wording of the query is probably not intended by those who propound it, inasmuch as its querulous utterance is heard only in retail circles, other branches of pharmaceutical endeavor being seemingly free from any apprehension concerning their normal progress and development.

Certainly there is nothing "the matter" with the colleges. They never before had prosperity thrust upon them so copiously as to compel them to slam their doors in the face of it for sheer lack of room and facilities. They never before loomed as large in the eyes and minds of the laity, and they never before had opportunities equal to those of the present period for enlisting public support and securing adequate funds to carry on their educational and humanitarian work. They never before had better or more carefully selected student bodies to educate and send out into the world to spread the gospel of true pharmacy. They never before compensated their teachers as well as they do now and the teachers never before functioned better than they do at present.

In view of this flourishing condition of the educational branch of pharmacy it would seem as if there was not much "the matter" with it and that we can agree upon the elimination of that phase of pharmaceutical procedure from the problem under discussion.

Has the query then any relationship to the legislative phase in the sense that pharmacy may lack the guarantee of full legal protection of its prerogatives. Hardly, since but few of our States are so benighted, and so remiss in their obligation to humanity, as to fail to set aside the practice of pharmacy as a responsible vocation, entrance to which is limited to the chosen few who have qualified for their essential service to society according to the mandate of law. As a matter of fact nearly all of the States jealously safeguard the health and lives of their citizens by furnishing protection through legislative enactments against incompetent drug-smiths, charlatans and pharmaceutical fakirs. The legal restrictions which deny admission to the practice of pharmacy to those not qualified, to be sure, are not born of an overweening desire to favor pharmacists as a class but they have for their real purpose the protection of society against fraud and deception, and to guarantee that the sick and suffering in each community shall not be deprived of adequate and dependable pharmaceutical service.

To furnish this honorable service to the public is an obligation which the State imposes upon pharmaceutical practice in return for the exclusive privilege which it grants to pharmacists. Since the discharge of this obligation entails nothing further than living up to their pharmaceutical pretentions it does not seem to impose anything upon pharmacists to complain of, therefore, it may be permissible to assume that, with few exceptions, nothing much appears to be "the matter" with the legislative phase of pharmacy.

Is it possible then that the query has an application to the manufacturing branch of pharmacy. Probably not, because in expansion and general development that industry certainly appears to be holding its own. One needs to go back but a decade or two for a basis of comparison in order to visualize the tremendous growth in numbers and size of the pharmaceutical manufacturing enterprises in the United States. These organizations involve profitable investments of millions of dollars in capital and they provide lucrative employment for multitudes of assistants. Their annual output of pharmaceutical supplies which finds its way into the markets of the civilized world in the aggregate represents a volume of business that staggers the imagination.

Admittedly we shall be unanimous in agreeing that there is nothing noticeably "the matter" with the manufacturing branch of pharmacy.

And of course the query also applies negatively to the wholesale distributors of pharmaceutical products because the increase in growth and numbers in this branch of pharmaceutical endeavor compares favorably with that in the manufacturing branch and we may therefore again anticipate unanimity of opinion when we absolve the wholesale dealers from having anything "the matter" with them.

Having then briefly considered four important branches of pharmaceutical activity and found that there does not seem to be much that has gone awry with them, one is reluctantly but rather irresistibly drawn to the conclusion that the scope of the query must be limited to the one branch of pharmacy not yet considered, and that whatever is "the matter with pharmacy" must lie at the door of the retail pharmacist.

If the present day condition in which the practice of pharmacy finds itself is not altogether an ideal one, does the condition exist because of the policies followed by the latter day practitioner of the art, or does it exist in spite of such effort as he may have put forth to preserve the integrity of his vocation? Since pharmacy, in its broader conception, does not appear to have undergone a retrograde movement in the sense of having its field of activity more circumscribed, or that the facilities for its practice are any less adequate than formerly, it is difficult to understand why one branch of the practice should find itself in a mood for adverse introspection. All of the factors whose potentialities were utilized in the upbuilding of the other branches of pharmaceutical endeavor were equally available to the promoters of the progress of retail pharmacy and if, as it appears, there has been failure to apply the same intensive and intelligent method of utilizing those factors in behalf of retail practice as was used in developing the other branches then it becomes obvious where the fault lies and our query will be more accurately stated as follows "What is the matter with the retail pharmacist."

No good and substantial reason is apparent as to why anything should be "the matter" with the retail pharmacist. Facilities for receiving first class training in all the phases of retail practice were never better, the opportunities for exercising their prerogatives were never more plentiful, they never had better legal protection of their exclusive vocation, the demand for the products of their skill was never greater as is evidenced by the prodigious output of large manufacturing plants, nor was the opportunity for establishing the prestige and importance of their profession as an indispensable factor in community life ever as promising as it was during the last decade. This would seem to establish sufficient grounds to encourage ambition, inspiration, confidence and pride in their calling, and to instill a spirit of determination to achieve the goal of pharmaceutical success by rational methods.

What then is the matter? Has the pharmacist been discontented with what seemed to him to be too circumscribed a field in which to give full play to his talents, and did he complacently surrender his prerogatives to manufacture the products he might have dispensed because he could buy "more cheaply," and in turn did he spurn his obligation to provide adequate pharmaceutical service to his sick

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neighbor because it was more lucrative and less troublesome to cater to the saltwater-taffy proclivities of other and less bothersome neighbors. And did he perchance listen to false prophets who led him off into the wilderness of intensive merchandising where the practice of pharmacy is conspicuous by its absence, and did the aforesaid prophets sing a song of "chain store turnover," "merchant prince methods" and divers and sundry other ventures having no special relationship to the practice of pharmacy. And did the false prophets, perhaps through an oversight, fail to whisper that any and all of the spectacular things which they encouraged the pharmacist to trade his birth right for could readily be performed, and often more successfully, by any one with a sharply developed business sense and a more or less obtunded conception of the fitness of things. And did the fickle prophets, thoughtlessly, also fail to point out the jeopardy in which the pharmacist placed his prerogatives when he ignored their reciprocal duties. And did they distract the pharmacist's attention from the obvious fact that some one, somewhere, was laboring incessantly to meet the tremendous and steadily increasing demands for pharmaceutical products, many of which he might produce with credit and profit to himself and by so doing increase the number as well as the permanency of his patrons?

And then completely obsessed with the idea that the rosv path to rapid financial success lay along purely merchandising lines did the pharmacist go on, and on, and on, tying up with this national campaign and with that intensive selling plan and with every other shade and color of scheme that led him further and further away from his safe pharmaceutical anchorage, and in his enthusiasm, having succeeded in forgetting his obligations to society, did he build for himself a beautiful merchandising image of wonderful contour and golden in color, symmetrical from every merchandising standpoint, draped in pharmaceutical garb but devoid of a pharmaceutical soul. And when the first thrill of joy over his handiwork had subsided did a feeling of horror gradually steal over him as he became aware that his beautiful image was undergoing a sickening metamorphosis. Was he startled to see his wonderful image of golden promise gradually being transformed into a sinister cut-throat Frankenstein, which being without a pharmaceutical soul, threatens to rend and destroy, not only its creator and all he should hold dear, but also those who by force of circumstances cannot readily detach themselves from that to which the creator of the pharmaceutical Frankenstein proved faithless? And just about then did the pharmacist stop, look and listen and plaintively inquire "what is the matter with pharmacy?"

Or has he been content to shoulder the obligation which he assumed when he asked the State to keep incompetent and untrained men out of his field of operations, and has he exercised his prerogatives to the full. Has he ministered to the ills and pains of the sick and suffering, and has he tried to uphold the prestige of his calling. Has he sincerely endeavored to build up a legitimate merchandising system suitable to his practice, and has he stood shoulder to shoulder with his colleagues and fought with them for the just rights and privileges of pharmacy. Has he affiliated himself with organizations which in season and out are striving to better pharmaceutical conditions. Has he made any contributions to the advancement of his calling through constructive work or advice. Has he assumed his proper place as an exponent of health conservation in his community, and has he had the courage to deny himself the profits accruing from transactions which would lower the dignity of his practice. Has he kept faith in maintaining a professional attitude in his work? Has he taken cognizance of his duty to those who will follow him in the manner in which those who preceded him prepared the way?

If he has faithfully lived up to these obligations and has not permitted his professional standing to be submerged in a self-created merchandising maelstrom, in all probability he finds himself so substantially situated socially, professionally and financially as to warrant, so far as he is concerned, the complaisant conclusion that "there isn't a darn thing the matter with pharmacy."

HOSPITAL PHARMACY AND PHARMACISTS.

THE EDITOR, JOURNAL A. PH. A.:

According to a recent statement by Homer F. Sanger, of the Council on Medical Education and Hospitals of the American Medical Association, there are 6580 hospitals in the United States of which number there are 136 in Chicago with 49 hospital pharmacists. A simple calculation gives 87 hospitals in Chicago which have no properly trained and registered pharmacists preparing and compounding the medicines required by the physicians in treating their patients.

In the Greater City of New York we have 146 hospitals (25 public hospitals and 121 semi-public institutions) also 70 private hospitals making altogether 216 hospitals for the entire city. If the same ratio of properly trained pharmacists to the hospitals obtains in New York City we have about 60 per cent. of our hospitals without registered men being in charge of the pharmacies in these institu-While an examination into the true conditions in New York City would tions. show a much better state of affairs than this it is a fact that there are too many hospitals and dispensaries where untrained persons are allowed to prepare and dispense medicines. If it be true that over 50 per cent. of these institutions which owe their existence to the national desire of the people to take care of its most important asset, its health, are compounding and dispensing their medicines with unqualified help, two things suggest themselves. First, that the pharmacy laws in each state forbid anyone but legally qualified persons to practise pharmacy independent of the requirements of the Harrison Act. Secondly, if untrained persons may be allowed to prepare medicines in quantities and dispense same in 50 per cent. of the American hospitals and dispensaries why cannot the same privilege be extended to the retail drug stores where in the great majority of cases the purely professional part is of minor importance in the day's business?

It is true that most of the larger hospitals fully meet the requirements as to the pharmacy department and some of the most able pharmacists in the country are employed in these institutions, enjoying the respect and confidence of the medical men attached to these places. The patients who are treated in these hospitals get the full benefit of medical science as the medicines used are prepared by trained competent pharmacists in a scientific manner which cannot be the case where this work is in the hands of persons without the necessary knowledge and experience, and it follows as any right thinking man must concede, that where this important work is done by the latter slipshod and unscientific manner the patient neither gets the full benefit of the physician's learning and medical knowledge but the whole business where medicines are concerned is unsatisfactory and