their contributions recorded. I have interviewed several of the oldest Minnesota pharmacists and always succeeded in obtaining valuable data and facts which would otherwise have been lost to posterity.

Veteran pharmacists' associations or clubs are steadily increasing in number. All of them include members who could furnish many valuable local historical data, which would be interesting material for the State Associations to publish in their year books.

In conclusion let me say this brief article has been written hastily and with no intention of developing the thought back of it. The suggestion it contains is given for what you may find it to be worth.

SOME OBSERVATIONS ON PRESENT-DAY RETAIL PHARMACY.*

BY EDWARD S. ROSE,

It is evident from the many valuable papers read before this assembly from year to year on the betterment of retail pharmacy that many are trying to live up to the Rooseveltian motto—everyone owes some of his time to the upbuilding of the profession to which he belongs.

So this paper was prepared with the hope that at least someone somewhere might be encouraged to give more attention to that part of retail pharmacy which deals with the sale of drugs and medicines.

Every pharmacist naturally is interested in the "bread and butter side" of his business and has doubtless in many instances followed the path of least resistance or has unwittingly been led by the pharmaceutical press or otherwise into the many side-lines with the hope of making money. Be it as it may, the pharmacist has permitted himself to-day to become in so many instances a mere tradesman.

Witness the able and exhaustive editorials on this subject recently published in the pharmaceutical press. The opening paragraphs of an article are devoted to a comparison of grocery stores and drug stores. If every pharmacist on leaving college had resolved to henceforth uphold the traditions of his honorable profession, no such comparison would be possible. Contrasts might be made but not comparisons.

The ever-increasing number of side-lines is proving a bugbear in retail pharmacy. In many instances they have proved an evil, resulting in loss of money and even failure in business.

"Cut prices" are a real menace to the independent pharmacist, unless he takes steps to meet the condition. As early as 1881 George J. Seabury began a series of articles in the pharmaceutical press, dealing mainly with the "cut price" evil. So at that very early date pharmacy began to experience a condition which has probably grown to be our most disastrous trouble-maker.

Short profit and "cut prices" have increased through these years, due to many factors. Manufacturers have carried on intensive advertising to the consumer, stating retail prices that meant short profit to the pharmacist. Chain and department stores have steadfastly followed the plan of cutting prices on nationally ad-

^{*} Section on Commercial Interests, A. Ph. A., St. Louis meeting, 1927.

vertised goods as a bait to lure people to their places of business. The Federal Trade Commission has not helped matters. Here and there will be found an independent who disregards the ethics of his profession and cuts prices.

"Cut prices" may be here to stay; if so, let the independent pharmacist adjust his business so as to protect it from this evil.

There is a wide-spread belief in the trade that the chain store is destined to replace the independent. Since the grocery business, in particular, has been lost to the chain stores, it is argued that other businesses will follow, including pharmacy. About five per cent of the drug stores in the United States are parts of chains and they are said to do 20 per cent of the business.

Such a statement ought not necessarily scare the independent pharmacist when he discovers what that 20 per cent of business consists of. In a recent drug-journal article the president of an organization representing 500 chain stores doing an annual business of \$75,000,000 is reported as saying that 90 per cent of the organization's requirements consists of toilet articles, candies, novelties, rubber goods and soda fountain supplies. Another large chain of stores in the middle west claim 65 per cent of their business is from the soda fountains and lunches.

Is that pharmacy? No, it isn't pharmacy, but it is encouraging news to the pharmacist whose chief concern is the production and distribution of drugs and medicines. It should further open his eyes to his possibilities.

The pharmaceutical press has always been friendly to the retailer, but at times has kept silent or has been indifferent when the interests of the national advertisers were in conflict with those of the retailer. To-day the pharmaceutical publisher would like to extricate himself from this unhappy position. Should the chain store entirely replace the independent, there would be little need for the drug journal. House organs of the chain would take their place. The publisher is no exception to the rule that one's post-sight is always better than his fore-sight, so now it must be very evident to him that something must be done to place retail pharmacy on a firm foundation.

We all may have our opinions, pro and con, on the chain-store situation. The author of this paper wishes to express himself in the belief that the independent pharmacist can always be in the majority if he will but take advantage of conditions, especially favorable to him.

While to the chain store are conceded advantages in purchasing power, its greatest handicap is lack of personal contact with the customer, which the independent enjoys and on which he should capitalize. If only 10 per cent of the chain's business is drugs and medicines, there should be much rejoicing among the independents.

So long as there are people there will be sick people, and so long as there are sick people there will be a demand for drugs and medicines. In fact, it requires no great stretch of the imagination to believe that most people have something the matter with them most of the time. Now here is where the independent should function if he wishes to practice real pharmacy, be of genuine service to the community and make a good profit in his business.

Let us now turn our thoughts to those things that the independent can well afford to give particular attention to and which should assure a future without the dread or fear of being replaced by the chain or ruined by "cut prices."

Though the amount of business done in the prescription department is small on the average, it is this department that helps very materially in establishing the reputation and professional standing of a pharmacy. So it should receive especial attention, along with diagnostic work for physicians and the sale of biologicals and associated products.

In college we were taught the manufacture of pharmaceuticals and were advised to buy nothing we could possibly find time to make profitably. Most of us to-day have reversed the advice and prefer to make nothing that we can buy. Had the college advice been generally followed many of the present unfavorable conditions in pharmacy would not exist.

We would encourage the return to manufacturing in the individual stores of many pharmaceuticals that will prove profitable. Of course the manufacturer has many advantages over the retailer in quantity production, but large quantity production calling for special facilities is not necessary in retail work. A pharmacist, with a little ingenuity, learns to do a surprising amount of very profitable work with meager facilities.

Let any pharmacist who has never really interested himself in the manufacture of pharmaceuticals spend some time with the Pharmacopæia, National Formulary and a few price lists, selecting such items as he has much use for and in each case answering his own questions: —What does it cost to make this? What does it cost to buy it? He will surely have some surprises. He will conclude that while consistency is a jewel he has come to the wrong place to look for it. One thing he will find is that the cost of material and the labor involved have little to do with the price and that the higher the cost of the material the better it pays him to make it himself.

The suggestions in this paper are not based on fancy but on facts demonstrated during 50 years of retail pharmacy. Our store is a small one employing six people with additional help at times. Our slogan has ever been "buy nothing that can be made at a profit." While we handle lines of staple sundries that have been sold in drug stores for half a century at least, such as, brushes of all kinds, soaps, perfumery, creams, face powders and other toilet articles, rubber goods and sick-room supplies, we have neither a soda fountain nor a cigar case, and are endeavoring to reduce the number of sundry lines.

Everyone is expected to be busy at all times. Looking after the needs of the customer is always first. At other times manufacturing is carried on or stock is gotten ready for the trade to come. This plan is certainly not new, but is a profitable one to follow.

We have found it advantageous to make many pharmacopœial and N. F. preparations in small quantities. On a larger scale we make ointments of zinc oxide and sulphur in 50-pound batches, ground in an ointment mill; antiseptic solution similar to the N. F. in 6-gallon lots, altogether about a barrel a year; milk of magnesia about 400 pints; elixir iron, quinine and strychnine many gallons a year; a tragacanth base toilet cream, about 2000 bottles annually in 4-, 8- and 16-ounce sizes; an analgesic balm, 10 p.c. menthol, 30 p.c. methyl salicylate in a lanolin base, of this several hundred dollars' worth are sold annually in jars and tubes; compound cresol solution, 30 to 40 gallons a year; we are equipped to make compressed tablets; we make large quantities of distilled water; such preparations as

corn collodion, cough mixture, hair tonic, pepsin mixture, laxatives, etc., are prepared as an individual line to compete with others of similar character.

We feature several toilet articles of our own make, as refreshing cologne, perfumes, hair oil, after-shaving lotion, a deodorant, a depilatory and especially a cold cream made from oil of sweet almonds. This cream is made twice a month so it reaches the customer in fresh condition, a point greatly appreciated. A recent shipment of 1-, 2-, 4- and 7-ounce square opal jars for this preparation weighed 800 pounds.

For the farmer we make lime and sulphur solution, stock dip, fly repellant and certain poultry and stock remedies.

With the exception of mustard and red pepper we grind all the spices we sell. We make most of the natural flavoring extracts, using vanilla as a leader, made only from Mexican and Bourbon beans, which we buy in 25-pound lots.

Household items which the retailer usually buys from the jobber already packaged, we put up ourselves using the familiar round pasteboard packer or tin cans for solids and glass or metal containers for liquids. This enables us to buy in barrel lots—powdered alum, boric acid, borax, epsom salt, Glauber's salt, blue vitriol, copperas, sodium bicarbonate, moth balls, naphthalin, petrolatum, codliver oil, 8–10 barrels a year. In drums, liquid petrolatum, both light and heavy; crude oil; turpentine; denatured alcohol. In 100-pound drums, carbon bisulphide, carbon tetrachloride, cresol, paradichlorbenzene. During this past year we purchased about a ton of glycerin, mostly sold as an anti-freeze in automobile radiators.

The writer appreciates the opportunity afforded him to tell this section concerning the practice of our store which has carried on for over half a century. What we are doing isn't new but we think it good pharmacy. We are giving particular attention to the production and sale of drugs and medicines. We believe that any pharmacist can conduct his business in a similar way, adjusted to meet conditions of his particular community, and build up a patronage that will weather the attacks of even our most dreaded evils—"chain" stores and "cut" prices.

Boerner's Pharmacy, Iowa City, Iowa.

MARKETS FOR PREPARED MEDICINES.

The U. S. Department of Commerce has published in book form Trade Promotion Series, No. 48, "Markets for Prepared Medicines," by M. C. Bergin of the Chemical Division. The report may be obtained by addressing the Superintendent of Documents, Government Printing Office, Washington, D. C. Nearly all of the individual reports are supplemented by comments. For example, that on the Philippine Islands conveys the following information:

"Before pharmaceutical preparations can be sold in the Philippine Islands they must be approved by the board of pharmaceutical examiners, the members of which are appointed by the Government. The formula from which the medicine is prepared must be displayed on each package. Preparations containing alcohol must have the alcoholic content stated on the label, and such preparations are subject to a tax on this alcoholic content. Those products containing drugs or chemicals considered dangerous may only be sold to individuals having a doctor's prescription for their use, but those not containing substances deemed dangerous will be granted a license permitting unlimited sale.

"In order to obtain a license, the manufacturer or exporter must submit to the board of pharmaceutical examiners, through a licensed pharmacist, two packages of the remedy in question for examination and approval. In addition, he must submit a duly executed document certifying to the exactness of the formula. All medicinal preparations approved by the board must have the formula from which they are manufactured printed on the label."