

COMMITTEE REPORTS

THE HEARING ON THE PHARMACY CORPS BILL.

Wednesday, February 20th, may be put down in American Pharmacy records as a day when the importance of pharmacy in Military Service was placed before Congress in a Hearing before the members of a Committee of Congress—the Committee on Military Affairs of the House of Representatives of the United States—H. R. 16278 by Congressman Clyde Kelly, and the same Bill was introduced in the Senate (No. 5406) by Senator Royal S. Copeland; both of these legislators are intensely interested.

The following organizations were represented at the meeting: The AMERICAN PHARMACEUTICAL ASSOCIATION, the National Association Boards of Pharmacy, the American Association Colleges of Pharmacy, the National Association of Retail Druggists, the American Drug Manufacturers' Association, the American Pharmaceutical Manufacturers' Association, National Wholesale Druggists' Association, the Federal Wholesale Druggists' Association, the Proprietary Association, the Conference of Pharmaceutical Secretaries, and by resolutions every National Association of the drug trade activities was represented.

A. L. I. Winne, Chairman of the Committee on Pharmacy Corps, gave an account of the action of the AMERICAN PHARMACEUTICAL ASSOCIATION at Portland, resulting in the formation of the Committee of which he is the Chairman. He referred to the correspondence with the Surgeon-General, which was made the subject of one of the first bulletins issued by the Committee and sent out to the pharmaceutical press. He stressed the need and reasons for a Pharmacy Corps and submitted a Brief in which the status of pharmacists in the U. S. Army is compared with that of other countries and pointed out the deficiencies to be corrected by the establishment of a Pharmacy Corps. (The Brief is appended.)

Chairman Winne then introduced Chairman S. L. Hilton of the Council of the AMERICAN PHARMACEUTICAL ASSOCIATION, who informed the members of the Committee relative to the importance of the pharmacist as a co-worker of the physician, an adviser relative to preparation of materia medica, of compounded medicines, of dosage, incompatibilities, etc. He referred to the fact that the numerous important branches in medicine made it necessary for the physician to depend on the pharmacist's knowledge, skill and care in the dispensing of medicines he prescribes and jointly with him safeguard the patient. He impressed the fact that nearly all medicines when given in large dosage or improperly dispensed are poisons and gave a number of examples from his own experience to explain his presentation. He also showed original orders which would have over-supplied narcotics, which would have been destructive, which provided for quantities far in excess of the intent of the prescriber and conducive to making narcotic addicts.

Questions from the members of the Committee came thick and fast and were met with ready answers. If it had not been for the memorial session held by Congress which required the attendance of the members the meeting would probably have lasted all afternoon. Permission was granted Chairman Hilton to extend his remarks. The orders were made part of the records.

President A. G. DuMez of the American Association of Colleges of Pharmacy had only five minutes to present the importance of pharmaceutical education and the advancement of requirements for pharmacists and extension courses in schools of pharmacy; he submitted a brief on the subject and the status of pharmaceutical education and the proceedings of the Association of which he is the president. He also referred to the U. S. Pharmacopœia revised largely by pharmacists and the National Formulary prepared by pharmacists.

Dr. R. L. Swain speaking for the National Association of Boards of Pharmacy called the attention of the Committee members to the fact that every state had enacted a pharmacy law, emphasizing thereby the dangers in the preparation and dispensing of medicines. He pointed out the watchful care of the Boards of Pharmacy so that the public may be protected and the advanced educational requirements in step with progress in medicine and pharmacy.

(It may be noted that a recent compilation of laws relating to Foods and Drugs, largely reference by titles and citations, covers 7000 pages, which bears testimony to the importance of pharmacy.)

Dr. Swain was permitted to extend his remarks.

James F. Finneran speaking for the N. A. R. D. referred to the number of enlisted men who had served in the hospitals during the war. He supplemented Chairman Hilton's references to dispensing pharmacy by pointing out the knowledge and training necessary to cope with incompatibilities which would destroy the intended purpose of the prescriber and endanger life. Mr. Finneran also was permitted to extend his remarks.

After the close of the Hearing it was readily discernible that a few who had questioned the need for a Pharmacy Corps in the Army had become convinced of the dangers in handling medicines by untrained men and women and, certainly, some of them realized that the soldiers should be given the same protection enjoyed by civilians.

Printed reports of the hearing will be distributed as soon as available.

BRIEF IN FAVOR OF ESTABLISHING A PHARMACEUTICAL CORPS IN THE MEDICAL DEPARTMENT OF THE UNITED STATES ARMY AS PROPOSED IN H. R. 16278.*

Honorable John M. Morin, Chairman,

and Members of the Committee on Military Affairs,

House of Representatives of the United States:

Gentlemen:

On behalf of the pharmaceutical organizations¹ represented at this hearing as favoring the legislation under consideration, and in the interest of those who constitute the Army of our country and of their families, this formal statement is presented.

Pharmacy a Necessary Profession.

The progress of medical service has necessitated specialization and the separation of medical practice into several branches—as medicine and surgery, dentistry, veterinary medicine, nursing and pharmacy. Those who practice either branch must be systematically and scientifically trained to discharge the particular service required of them in the interest of society.

The success of the other practitioners of medicine and the lives and welfare of their patients depend upon the faithful and capable performance of the work of the pharmacist, for unless drugs are properly selected, and unless the medicines are properly prepared and dispensed, their efforts are rendered ineffective and in many instances the health and even the lives of the patients are jeopardized.

American pharmacists hold a prominent position in the world development of their profession. The United States Pharmacopœia ranks as the peer of any national pharmacopœia. In the more recent revisions of this authority, the pharmacists have contributed very largely the chemistry, botany and pharmacognosy of the standards, as well as most of the formulas contained therein. The other legal authority for medicines, the National Formulary, has been prepared entirely by a committee of the AMERICAN PHARMACEUTICAL ASSOCIATION. It is inconceivable that the War Department should ignore this important branch of the medical profession and to-day has not commissioned in its service a single pharmacist to dispense medicines. Pharmacy is recognized as the right arm of medicine in civil life, and there is no reason why this cooperation should not be taken advantage of in the military service.

The Preparation and Dispensing of Medicines Regulated by State Pharmacy Laws.

The preparation and dispensing of potent remedial agents, whether in civil practice or in the military service, should be restricted entirely to those who have been especially educated and trained as compounders and dispensers of medicines. This principle is so thoroughly established that the States, and likewise the District of Columbia and our Insular possessions, in the exercise of their police power, have by legal enactment provided for boards of pharmacy to examine and license those to whom authority only is given to compound and dispense medicines.

The Army medical supplies necessarily include poisonous drugs and their preparations and the soldier is entitled to pharmaceutical service and protection equal to that which the States provide in civil life.

* This brief is printed for ASSOCIATION record.

¹ See second paragraph of this report.

Prepared Medicines Not Adequate.

The statement has been made that "the pharmaceutical preparations of the Army, especially in time of war, are for the most part in tabloid form; the pharmacy is, therefore, a matter of dispensing rather than of compounding of preparations." If true, this indicates that pharmacy as practiced in the United States Army is very elemental indeed and that even the very basic ideas of professional pharmacy are ignored. Such service must necessarily be far from satisfactory or efficient or protective of the interests it is supposed to serve.

Tablets and similar preparations are for some purposes a convenient and useful dosage form, but for many purposes they are absolutely unfitted. Not infrequently, where prompt and reliable action is necessary, the conscientious physician is compelled to select some special form of medication. The most serious evil resulting from this "ready-made medicine" and tablet dosage is that too often the patient is made to fit the preparation on hand instead of a remedy being prescribed to fit the needs of the patient. There can be no question as to the superiority of the individual treatment over this method of "treatment *en bloc*." The proper method, and the ideal professional method, would be for the physician to diagnose each case, prescribe what that patient needs at that time and to have the medicines compounded and dispensed by a competent pharmacist. To do otherwise may be detrimental to the patient and to the medical service.

Efficiency of the Medical Department of the Army Demands an Adequate Pharmaceutical Service.

Each branch of medical activity requires specialized education and training, and the Medical Department of the Army should be so organized as to insure the employment of the personnel in that service for which they have been specially trained. Any other arrangement means inefficiency and lack of coördination.

The *Journal of the American Medical Association*, on June 16, 1917, editorially commented:

"So far as official recognition of it is concerned, the science and art of pharmacy might not exist for the Army. To-day, as never before, victory in war goes to the Nation that most effectively conserves the health of its fighting men. The physician is now of such military importance that the medical profession will be called on to make no inconsiderable sacrifices. It will materially lighten the arduous duties and responsibilities of the physician to have in the Army trained pharmacists who will be able to give intelligent coöperation. But it is imposing too great a strain on the patriotism of those whose special knowledge is obviously a large asset to the Army, to expect them to enlist as privates without any recognition of their national worth. Pharmacists should be given a rank commensurate with their importance, first because it is but simple justice to the pharmacists themselves, secondly, because the usefulness of the medical corps will be greatly augmented and, lastly, and most important, because the efficiency of our Army demands it."

Resolution Adopted by House of Delegates of American Medical Association at 1917 Meeting in New York City.

"The pharmaceutical service in the Army is unsatisfactory because it is not on a modern basis; there is no pharmaceutical corps devoted to the prosecution of pharmaceutical duties; pharmacists are compelled to enlist as privates without the hope of promotion to commissioned rank as in the dental and veterinary corps. A professionally trained pharmaceutical corps could be made invaluable to the medical corps as assistants both in the field and in hospitals. We earnestly urge the War Department to establish by Congressional enactment a pharmaceutical corps with definite military standing and responsibilities."

Comparison of the Army Pharmaceutical Service of Foreign Nations with That of the United States.

In the Russo-Japanese War, the Japanese demonstrated the life-saving value of a scientific and systematically organized medical department, and the remarkable reduction of mortality from disease and wounds in the Japanese Army during that war attracted world-wide attention.

The pharmaceutical service in the German Army was completely reorganized in 1902. Since that date, the pharmacists in addition to performing purely pharmaceutical duties, have been given charge of the hygienic, chemical and research laboratories of the Army and each ranking officer in the Pharmaceutical Corps must have taken the special course in certain official laboratories and have obtained a diploma as a chemist qualified to examine foods.

Each army corps has an associated sanitary corps under the control of an apothecary officer who has charge of the pharmaceutical service and supplies and is the director of the laboratory connected with that corps. Each army corps has likewise a supply depot and a manufactory of supplies which furnishes the medicines and dressings for that army corps. The medicines kept on hand for the hospitals include nearly all the official pharmaceutical preparations.

The commander of the German Army Pharmaceutical Corps is the *Oberstabsapotheker* who is attached to the Medical Section of the Prussian Ministry of War and his rank is equal to that of a general of a brigade.

France has an organized Army Pharmaceutical Corps, the commander of which is called the Inspector and with rank as brigadier-general. The complete organization includes the titles of principal pharmacists, pharmacists, pharmacist-major and assistant pharmacist-majors and ranking as colonels, lieutenant-colonels, majors, captains and lieutenants. When the French peace army of 500,000 men was rapidly increased to 3,500,000 trained soldiers, the pharmaceutical corps was automatically increased from the pharmacists in reserve, many of whom had already held commissions and had experience in the sanitary corps.

In January 1915, over 1200 of the mobilized pharmacists who had the necessary experience and training in the service were commissioned as first-class assistant pharmacist-majors ranking as lieutenants. The pharmaceutical corps in France manufactures many of the army supplies and is charged with chemical examination of water, foods and army supplies, and a pharmacist of rank is attached to the Sanitary Council of each military district.

In Spain, as early as 1813, the Military Pharmacy Corps was promulgated. Despite the several changes and reorganizations of the Sanitary Corps that have taken place in that country since that date, the organization has been continued and its work made more comprehensive and beneficial. Its personnel comprises inspectors, subinspectors, pharmacist-majors, pharmacists of the first class and pharmacists of the second class and with commissioned rank from colonel to lieutenant.

In Japan, "the Army has a Sanitary Supply Department and the Director of this Department is equal in rank to a colonel, and wherever there is a barrack, it has a field hospital which has a Department of Pharmacy, and the Director of this pharmacy is equal in rank to a lieutenant-colonel. The rank of pharmacists in the Army is from a sub-Lieutenant to a Colonel."

The members of the Australian Pharmacy Corps are exclusively qualified pharmacists, enlisted under conditions similar to those which prevail with the other units of the A. M. C., physicians and veterinaries. The officers are: Senior Major, who ranks as staff officer of pharmacy service on the staff of the Director-General of the A. M. C.

Next in rank is Captain: the chief senior pharmacy officer of each state. Lieutenants are qualified pharmacists, head dispensers in general hospitals, base hospitals and forward casualty stations. Staff-Sergeant is the lowest rank of any member of the unit, and is held by all assistant dispensers, and men in charge of medical stores.

Senior Major, the officer commanding, is responsible for all medical supplies, and through him all recommendations for purchases must be made. Captain, as chief senior officer of the state, has charge and supervision of all medical stores and supplies for his state. Lieutenant has charge of medical supplies of hospitals, casualty stations and is chief dispenser for such institutions. Staff-Sergeant is assistant dispenser under command of the Lieutenant and A. M. C. Quartermaster.

All officers in the pharmacy department must be regularly qualified pharmacists, and draw pay according to rank, as in all other units.

The Medical Department of the United States Army has no Pharmaceutical Corps to render the pharmaceutical service provided for the armies of the nations referred to above.

The Soldier Is the Ultimate Concern of the Medical Department.

Those in the military service of the Nation and their families are entitled to the very best medical attention that the Government can procure. In the report of the Surgeon-General for the calendar year 1927 it is stated that the total number of patients among the military personnel treated in hospitals and dispensaries, from all causes, was 87,226. It is evident that an adequate and properly organized pharmaceutical service is essential to the treatment of such a large number of patients. The Surgeon-General is quoted as calling attention to "a distressing shortage"

of personnel in the Medical Department of the Army, which becomes "increasingly serious." The people of the United States will expect the Medical Department to adopt the most efficient methods for the conservation of the health and lives of our soldiers and of their families. The establishment of a Pharmacy Corps, as provided for in H. R. 16278, would meet one of the pressing needs of the organization of the Army. Congressman Clyde Kelly says:

"In the consideration of the proposal in Congress, it will be pertinent to remember that pharmacists must have special training in pharmacy. They must be graduates of a recognized pharmaceutical college, with some experience in retail and manufacturing pharmacy. They must have a special knowledge of medicinal drugs, chemicals, compounds, derivation, doses usual in the prescription uses of medicine and what are called the incompatibles. They must understand the methods of preparing mixtures and compounds of all kinds. They must know, for instance, how to prepare fluid and solid extracts, elixirs, sirups, pills, tablets, capsules, ampoules, etc. They must be able to supervise and direct such medicinally manufacturing work, to make proper inspection of material used and of the finished products and must be alert and dependable generally in their line of work."

A pharmacy corps organized as provided for in the measure before you will attract to the service this type of highly qualified pharmacist.

In our opinion, the present conditions surrounding the practice of pharmacy in the Army are highly unsatisfactory from the standpoint of the control and dispensing of drugs and medicines used in the maintenance and safeguarding of the health of the Army.

The Pharmaceutical Corps should be promptly organized to take up its various duties and to coördinate its work with that of the medical, dental, veterinary and nurse corps of the military service.

No doubt the experience of other nations will be duplicated in that the duties assigned to the pharmaceutical corps will rapidly increase and with such increase of duties the corps will grow in usefulness and importance. Eventually it may be placed in control of not only the providing, manufacturing and distributing of pharmaceutical and hospital supplies, but also, as in foreign countries, of the various hygienic, chemical, analytical and research laboratories of the Army.—February 20, 1929.

Respectfully submitted,

A. L. I. WINNE, *Chairman, Committee on Pharmacy Corps.*

THE MINNESOTA PHARMACEUTICAL EDUCATIONAL CONFERENCE.*

BY FREDERICK J. WULLING.

The third annual meeting of the Minnesota Educational Conference was held at the College of Pharmacy on Monday, January 14th. So many inquiries concerning the nature and purpose of the Conference have reached me of late that I feel I should write this brief article, for the information of pharmacists of Minnesota as well as of elsewhere, although I have once before written about the Conference.

The Conference is a new organization having been established in the early Fall of 1927 for the purpose of carrying out the suggestions and offers of the National Association of Boards of Pharmacy and the American Association of Colleges of Pharmacy. These two national bodies represent the regulatory and functional, and the educational interests, respectively, of pharmaceutical development. These national associations were organized to meet the increasing and accelerating need of doing many things collectively and coöperatively, that could not be done otherwise. The N. A. B. P. membership is made up of the Boards of Pharmacy of the several states, and the A. A. C. P. is composed of the recognized colleges of pharmacy. Many things which the growth and development of pharmacy required to be done, and which the separate boards and the separate colleges could not do as individual organizations, the two national bodies now do very successfully. While each of the national associations works primarily in its own field, there are so many points at which they have contact with one another, and so many over-lappings of activities and interests, that it became necessary for them to work together on many points, and accordingly, they have held joint meetings for a number of years now during the periods of their annual meetings. The

* Read at the first midwinter meeting of the Northwestern Branch of the A. Ph. A.