

EDITORIAL

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THE UNITED STATES PHARMACOPŒIAL CONVENTION.

THE selection of the delegates to the eleventh U. S. Pharmacopœial Convention, if not of greater importance than the selection of the Committee for revising the Pharmacopœia, and the Board of Trustees for managing its business affairs, is the first important step of a decennial revision. The bodies entitled to representation in this convention have been urged to be fully and adequately represented, and the evident interest indicates that the Convention will be representative and composed of delegates who are fitted for and realize their responsibilities in the work before them, without any influence of personal favor or prejudices that may obscure judgment, and concerned only with a purpose of laying the best plans for this important undertaking, which concerns deeply the public and the professions.

In the selection of the members of the Committee of Revision and the Board of Trustees delegates will express their viewpoints as to the qualifications of the individuals chosen to discharge the duties resting upon these three groups. Experience in the past indicates that these selections will be made wisely and with a realization of the responsibility resting upon the delegates to continue the progressive improvement of our Pharmacopœia. It is also the duty of the delegates to lay down General Principles for the guidance of the officers of the Convention, the Committee of Revision and the Board of Trustees during the new decade, after considering the reports and recommendations, of those who have carried on the work during the period now coming to a close. Several questions that have an important bearing on the character and usefulness of the Pharmacopœia will be decided by the delegates in drawing up General Principles. The most important probably is whether the Pharmacopœia shall include only drugs and preparations for which tests and standards capable of verification can be applied, or whether others that are in quite general use by the medical profession and largely employed by the industries in the manufacture of products for which there is a general demand by physicians and the laity shall also be given official recognition.

A review of medical and pharmaceutical literature is convincing that viewpoints differ with individuals and with time, hence, the question of inclusions and deletions is a most important one, involving a consideration of whether it is best to include substances in general use, but at present without official recognition, or to leave these to standardization by other agencies which may not always be based on practical experience. A consideration of the stability of certain important drugs and preparations is another subject of convention interest in view of the questions that have been raised as to their permanency under the conditions which exist.

It is not the purpose of this comment to discuss momentous revision matters, but rather by these brief references to impress in a general way the need for positive thought relative to the work which will engage the Convention on May 13th. Progressive changes are occurring in the practice of medicine and pharmacy and the other professions and sciences related to public health and it is the duty of the delegates to study every phase of the work before them and to so plan that the U. S. Pharmacopœia XI will meet the requirements of the decade. Few books rank with

the Pharmacopœia in importance when its place in many activities and its part in the conservation of the life and health of the people is considered.

DISPENSING BY PHYSICIANS.

RESPONSES to a questionnaire sent out by *Medical Economics* has brought replies from 10,502 physicians, indicating that of this number, 2496 dispense exclusively; 4281 dispense partially; and 3725 do not dispense at all. The results as to population are about as follows: In communities of less than 5000, 1429 dispense exclusively; 1367 partially, and 789 not at all; the relations in cities up to 25,000 are 332, 779, 632; up to 100,000, 204,587, 491; larger cities, 531, 1548, 1813.

The foregoing results are published because they are worthy of study by pharmacists, whereby opportunities may be opened to bring about relations between physicians and pharmacists which will benefit the laity and perhaps reduce the extent of office dispensing. The practice of medicine and of pharmacy exist for the benefit and protection of the public, therefore discussion of the situation should be productive of good in various ways, because better professional relations benefit all groups. With a knowledge of conditions pharmacists should find a partial solution by either supplying the physicians with the products required by them, or encouraging them to write prescriptions.

Several deductions are made from the responses to the questionnaire; according to these the ratio of doctors who dispense has increased with the number of years they have been engaged in the practice of medicine, and more of them are dispensing than formerly. A greater number of manufacturers solicit patronage from doctors and at least some of the establishments supplying the doctors are growing.

Evidently, pharmacists have opportunities for bettering the situation by discussing all phases with their fellow citizens—the doctors. Attention is directed to the editorial of *Modern Surgery*, reprinted in the February JOURNAL, page 100. The application of right principles is essential to effect right relations; the attitude and spirit are all-important. The most potent measure for bringing about an understanding of the mission of professions is reasonable, rational discussion, with the purpose of devising means for improving their services to the public.

ESPERANTO IN PHARMACY.

THE matter of using Esperanto in pharmacy has been given consideration in Japan in connection with a discussion on an international pharmacopœia and fixing standards for potent drugs. When the 17th general meeting of Esperantists met in Tokyo last September, at which meeting more than forty pharmacists were present, a special group was formed, who discussed ways and means for the extension of the use of Esperanto among pharmacists. A resolution was also adopted to advise with authorities to establish a chair of Esperanto in colleges of pharmacy.

The thought may not be misplaced that the suggestion is worthy of consideration by the International Pharmaceutical Federation and, if so, the colleges of pharmacy would probably be willing to consider the possibility and advisability of introducing Esperanto as part of the pharmaceutical curriculum.

The article responsible for this comment, refers to a number of reports of various technical societies and institutes of Japan wherein Esperanto was used wholly or in part.

HISTORICAL INACCURACIES.

AT the Rapid City meeting of the AMERICAN PHARMACEUTICAL ASSOCIATION, before the Section on Historical Pharmacy, Dr. Edward Kremers contributed an article "Writing Pharmaceutical Biography and History,*" in which he points out the danger of misstatements that are carried from one record to another, and stand for truth until the error is discovered, when there may be great difficulty in obtaining facts. Recently we noted a related statement on state historical records, wherein it was pointed out that historical inaccuracies are often due to imperfect records, gathering together of fragments and supplying defects; other causes are motives of magnifying influence or efforts to establish priority, whereas the aim should be truth. Too often favorable tradition has been accepted without critical use of primary sources.

NOTICE FROM TRANSPORTATION COMMITTEE.

EXCURSION RATES TO BALTIMORE AND WASHINGTON.

BY T. J. BRADLEY, CHAIRMAN.

A REDUCED rate of one and one-half fare for the round trip from all or most sections of the country, on the certificate plan, will be allowed to those who attend the annual meeting of the ASSOCIATION in Baltimore, on condition that the reduced number of 150 or more certificates are turned in. Also, the time for beginning the return journey is extended, so that members can stay over for the United States Pharmacopœial Convention in Washington the following week if they wish to do so. The reduced rate will be allowed to members and their families, including children from 5 to 12 years, who will be charged half the fares for adults.

The following directions should be carefully observed.

1. Tickets at the regular one-way tariff fares for the going journey may be obtained on May 1st to 7th from most sections of the country, and a few days earlier than these dates from the far west and southwest, but not on any other dates. Be sure that when purchasing going ticket you request a separate CERTIFICATE for each ticket, on account of the convention of the AMERICAN PHARMACEUTICAL ASSOCIATION. *Do not make the mistake of asking for a "Receipt."*

2. Present yourself at the railroad station for tickets and Certificates at least 30 minutes before departure of train on which you will begin your journey.

3. *Certificates are not kept at all stations.* If you inquire at your home station, you can ascertain whether Certificates and through tickets can be obtained to the place of meeting. If not obtainable at your home station, the agent will inform you at what station they can be obtained. You can in such case purchase a local ticket to the station which has Certificates in stock, where you can purchase a through ticket and at the same time ask for and obtain a Certificate to place of meeting.

* JOUR. A. PH. A., 18 (October 1929), 1032.

4. *Immediately on your arrival at the meeting present your Certificate to the endorsing officer, E. F. Kelly, Secretary, as the reduced fares for the return journey will not apply unless you are properly identified as provided for by the Certificates.*

5. It has been arranged that the Special Agent of the carriers will be in attendance on May 7th and 8th from 8:30 A.M. to 5:30 P.M., to validate Certificates. If you arrive at the meeting and leave for home again prior to the Special Agent's arrival, or if you arrive at the meeting later than May 8th, after the Special Agent has left, you cannot have your Certificate validated and consequently you will not obtain the benefit of the reduction on the return journey.

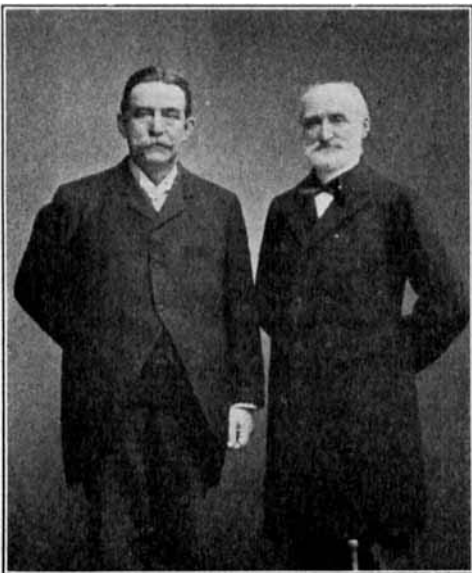
6. So as to prevent disappointment, it must be understood that the reduction on the return journey is not guaranteed, but is *contingent on an attendance of not less than 150 members of the organization and dependent members of their families*, holding regularly issued Certificates obtained from Ticket Agents at starting points, from where the regular one-way adult tariff fares to place of meeting are not less than 67 cents on going journey.

Certificates issued to children at half fares will be counted the same as Certificates held by adults.

7. If the necessary minimum of 150 Certificates are presented to the Special Agent, and your Certificate is duly validated, you will be entitled up to and including May 21st to a return ticket *via* the same route over which you made the going journey at *one-half of the regular one-way tariff fare* from the place of meeting to the point at which your Certificate was issued.

8. Return tickets issued at the reduced fares will not be good on any limited train on which such reduced fare transportation is not honored.

9. *No refund of fare will be made on account of failure to obtain proper Certificate when purchasing going tickets; nor on account of failure to present validate Certificate when purchasing return ticket.*



CHARLES E. DOHME, ELECTED PRESIDENT OF THE A. PH. A., AT THE LAST BALTIMORE MEETING; AND DR. FREDERICK HOFFMANN.

Left.—Charles E. Dohme, president of the AMERICAN PHARMACEUTICAL ASSOCIATION, 1898–1899. Mrs. Dohme is in her 90th year; she is looking forward to a visit from old friends during the Baltimore meeting. President Dohme died December 7, 1911. Right.—Dr. Frederick Hoffmann; he prepared the 50th anniversary address, A. PH. A., but the condition of his health did not permit his stay in this country to deliver it in person; it was read by Secretary Charles Caspari, Jr.—See PROCEEDINGS, A. PH. A., 50 (1902), 100–145. Dr. Hoffman died November 30, 1904.

Dr. A. Tschirch of Berne, Switzerland has been invited to deliver the "Dohme Lecture," in Baltimore, this fall.