ADDRESS OF THE PRESIDENT OF THE AMERICAN PHARMACEUTICAL ASSOCIATION.*

BY H. A. B. DUNNING.

The pioneer movement which resulted in the organization of the AMERICAN PHARMACEUTICAL ASSOCIATION was initiated by delegates representing the College of Pharmacy of the City of New York, the Massachusetts College of Pharmacy and the Philadelphia College of Pharmacy in October 1851, and the movement was supported the following year by the aforementioned colleges, joined by the Cincinnati and Maryland Colleges of Pharmacy, the Richmond Pharmaceutical Association and the apothecaries and druggists of the cities of Hartford and Middletown, Connecticut. The membership of the organization, its constitution, code

of ethics, character, purposes and methods of procedure were then essentially the same as they are now.

ITS PURPOSE IS TO SERVE.

The Association was founded to serve, and service has been and still is its great opportunity and vocation. Its service has been unselfish in every respect, not only in regard to its membership, but to pharmacy generally, the medical professions and more especially to the public at large. It has been responsible, from the very beginning, for the enactment of laws which govern the practice of pharmacy and the registration of pharmacists, inclusive of proper restrictive laws controlling the sale of poisonous and dangerous drugs. The Association, through its members, is not



H. A. B. DUNNING.

only responsible for the National Formulary and Recipe Book, but it is, in a large measure, responsible for the present state of perfection of the United States Pharmacopæia and for the standards which regulate the identity, purity and strength of drugs and medicines.

It has been most influential in promoting the advancement of pharmaceutical education, the establishment of many new colleges of pharmacy throughout the United States and extending coöperation and service to the members of the various pharmaceutical faculties. The Association is responsible for the origin of practically every type of pharmaceutical association in the country and this, particularly, applies to the state pharmaceutical associations and the splendid national organization of retail druggists, the National Association of Retail Druggists.

The names of men who have been members of this Association, who can truly be considered great by any standard, form such an extensive list that all could not well be mentioned in a short address of this kind. Some of these names are representative of the early beginning of the Association and are familiar to all

[•] Baltimore, Md., May 7, 1930.

of us: Procter, Squibb, Maisch, Parrish, Rice and others and, as a connecting link between the beginning and the present, we can readily recall the names of Ebert, Thompson, Sheppard, Hallberg and Remington. In later years we have become familiar with the names of Beal, Caspari, Hynson, Whelpley and others. These men, through their activities in the AMERICAN PHARMACEUTICAL ASSOCIATION, have provided a guardianship for the protection, advancement, development and progress of pharmacy as a profession and as an honorable calling. Without the stabilizing influence of this ASSOCIATION, it is doubtful whether the profession of pharmacy could have weathered the storms which have swept upon it within recent years.

In an editorial of a recent issue of *Industrial & Engineering Chemistry* there appeared an interesting definition of a profession, the essence of which is: that a profession is recognized by its literature, its organization, its code, written or unwritten, and its service to humanity. Pharmacy has all these things, organization, literature, code, all of which it is justly proud, and the American Pharmaceutical Association is the active exponent. It has a code which it respects and lives up to and our Association gives a great service to humanity.

CONSOLIDATION.

I have read the addresses of a number of my immediate predecessors in this office and I find myself in complete disagreement with the idea that our great Asso-CIATION could best serve itself and pharmacy through some kind of merger or consolidation with other large national pharmaceutical organizations. In my judgment, such a consolidation would destroy, not only the identity of the AMERICAN PHARMACEUTICAL ASSOCIATION, but, in a large measure at least, the value of its influence and service to its membership, other pharmaceutical bodies and the public. In my judgment, the activities of the A. Ph. A. should be confined to those altruistic motives and opportunities for which it was organized. It has plenty of work to do through fostering, developing and protecting the educational and professional aspects of pharmacy and promoting those activities which will increase its service value. In other words, the A. Ph. A. should remain a service institution, as it has always been, a stabilizing influence in pharmacy, with no selfish interests or selfish motives involved. Its power should arise out of its recognized value to the drug interests of every kind, state associations, national associations, educational institutions, pharmacy boards, enforcement bodies and to mankind in general. Our ASSOCIATION has a great opportunity and should not be led by any mirage of great power to consider the formula of a super-organization. Each of the national drug organizations has its own grave responsibilities and great problems and they should have our sympathetic coöperation on all general policies which come within the scope of our own activities, but we should not deal with any specific questions or problems that would lead to any misunderstanding respecting our motives or ideals. Our Association will give the most valuable service to all other associations if it devotes its time and interest to the promotion of pharmaceutical education, to the establishment of the professional status of pharmacy, to the promotion of its ideals and guardianship of its ethics. In return for this service, this Association should have the support of all phases of pharmaceutical interests, individually and collectively, both moral and financial.

Because of the value of the service which the Association gives and will give more and more to all pharmacy, its activities should be endowed, especially by the wealthier pharmaceutical interests, individuals and associations. Such endowments, in a large measure, have been accomplished already through contributions to the American Institute of Pharmacy and it is quite probable that complete endowment will be effected within the near future. Seemingly, the present outlook for pharmacy is none too bright, for it has ahead of it many obstacles to meet and many problems to solve, but it must meet and solve them, for the science of pharmacy is a necessity to mankind and always will be, irrespective of changing conditions and modifying influences. It is my belief, however, that the darkest days in pharmacy are passing and that a brighter future is in store for it. Out of the chaotic condition which exists at present there will come change and order. Disorganizing influences and those things which belong more properly to general commercial practice will drop away and pharmacy will come into its own again, stronger and better through its bitter experiences and its practices will become more profitable because of the initiative developed through competition and the application of better business methods. Higher education, greater self respect and the elimination of the professional inferiority complex will do much for pharmacy in the future.

COÖPERATION WITH THE AMERICAN MEDICAL ASSOCIATION.

Coöperation between the medical professions and pharmacy should be stimulated and developed whenever the opportunity may arise, for there are more drugs used to-day than ever before and more intensive researches are being made upon drugs by pharmacists to establish their value and more careful supervision is being exercised over their distribution. It is most unfortunate that the coöperation between the American Medical Association and the American Pharmaceutical Association is not closer and it is to be hoped that, within the near future, some means may be found to promote better relations on a basis of mutual self-respect and interest. There was a time, not so many years since, when greater coöperation was in force, especially in the work of that splendid body, the Council on Pharmacy and Chemistry of the American Medical Association, which has done so much for the benefit of medicine, pharmacy and the public, through its efforts to eliminate from medical use and public consumption many worthless and ineffective preparations offered for the treatment of the sick and the cure of the ills which mankind is heir to.

In the beginning, pharmacy was represented on the Council by several pharmacists who were among the most active in developing its plans and organizing its work and in promoting its progress and success. Both medicine and pharmacy will remember the pioneer work of Wilbert, Puckner and Hallberg. Dr. Puckner has devoted his lifetime to the work of the Council and with most excellent results, but Wilbert and Hallberg have passed beyond and their interest and influence is no longer felt in the Council; their vacancies have not been filled by pharmacists.

I recommend to pharmacy and suggest to medicine that consideration be given to this most unsatisfactory state of affairs, with the hope that some improvement may eventuate in the not too far distant future. It seems to me that such a Council would be more effective and its influence more widely felt if it were more

truly representative of medicine, chemistry and pharmacy and could avail itself of the special knowledge, reactions and experiences of representatives of the different groups.

I cannot well leave this subject without commenting upon the value of New and Nonofficial Remedies, published by the American Medical Association, which lists, describes and defines many valuable drug products, Council accepted, which cannot be found elsewhere. Every medical man should have a copy as a therapeutic guide and every pharmacist requires it as a reference book. This work has served a real purpose and its high character reflects much credit upon those who have been responsible for it.

Undoubtedly, pharmacy has much to account for and must get its house in order, much as medicine has done during the last decade or two. It would be good for pharmacy and helpful to medicine, I am sure, if some way could be evolved to bring about better coöperation between the two professions. I believe that when the American Institute of Pharmacy begins to function, which will be within the very near future, a more satisfactory relationship between pharmacy and medicine will eventuate.

THE ASSOCIATION'S OFFICES.

At this time I wish to make special mention and impress upon our membership the value of the services of your Permanent Secretary, Dr. E. F. Kelly, and Editor, E. G. Eberle, and make you aware of their unceasing activities and their strenuous labors in the interest of pharmacy in all of its various phases. It seems to me that your Secretary never sleeps, for he is always on his way somewhere, night and day, in the interest of pharmacy. To mention just a few of your Secretary's activities during my incumbency: numerous visits to Washington and exhausting conferences with various officials, commissions and committees related to or representing Public Health Service, Veterans' Bureau, the Army, Navy, Personnel Classification and others, all for the purpose of obtaining the recognition of pharmacy in Government service, with good results; conferences with the American Council of Education and various committee meetings for the purpose of promoting the survey of pharmacy and many other meetings and conferences, either individually or with his associates for the purpose of advancing the progress of pharmacy and obtaining its security; frequent visits to Washington to confer with the Secretary of the Fine Arts Commission and others in reference to the Headquarters Building, with satisfactory results. I have just begun to realize how hard your Secretary works and how effectively, and we owe him much appreciation and recognition. The following reports are based largely on the information obtained from him and, in some instances, through my own participation and experience.

RECOGNITION OF PHARMACY BY THE GOVERNMENT.

The A. Ph. A. has undertaken to obtain for pharmacy the recognition which it deserves and to improve pharmaceutical service in every governmental branch in which pharmacists are engaged. Conditions in the Navy are the most satisfactory and no effort is being made in that department at present. Pharmacists are employed in the Army and Navy as enlisted men and in the Public Health Service, the Veterans' Bureau and in the Prohibition (including narcotics) Bureau

as civil service employees. The Public Health Service is the only branch to require graduation in pharmacy as an entrance requirement. This is an important work and one of far-reaching influence on the future development of pharmacy. If pharmacy is recognized, as it fully deserves to be, as a public health profession by our national Government, this will not only effect national legislation of interest to pharmacy, but also state and local legislation; it will also promote a better appreciation of the service of pharmacy by the public. The effort to secure this recognition will be explained in greater detail by the Secretary and in the reports of several committees and I will confine myself to a few brief references.

PERSONNEL CLASSIFICATION.

In the original classification of governmental employees, some years ago, pharmacy was classified as a "sub-profession." In 1928, a re-classification was ordered by Congress. The A. Ph. A. then filed a protest against this classification and requested that pharmacy be placed in the "professional and scientific" group, submitting data in substantiation. In October 1929, the Association was invited to a hearing before the full Personnel Classification Board, when pharmacy's claim to recognition as a profession was stated in full by representatives of the American Pharmaceutical Association, the American Association of Colleges of Pharmacy and the National Association of Boards of Pharmacy. In particular it was emphasized that a sub-professional classification was unfair to and a reflection upon the thousands of pharmacists of this country who are rendering a professional service of acknowledged value in the conservation and improvement of the public health. In a preliminary report, just issued, pharmacists are classified in the Professional and Scientific Service and we are indebted to the Personnel Classification Board for their recognition of the justness of our claim.

THE ARMY.

Bills to create a Pharmacy Corps in Medical Departments of the Army lapsed when the 70th Congress adjourned in March 1929. The same bill was introduced in the present Congress in February and referred to the committees on Military Affairs, introduced in the House by Representative Reece, of Tennessee, H. R. 8473, and in the Senate by Senator Copeland, of New York, S. 3211. Our Committee on Pharmacy Corps has been active in interesting the members of the Committees in the measure and several have announced their approval of it.

THE PUBLIC HEALTH SERVICE.

The Parker Bill, H. R. 8807, passed the House on March 26th and the Senate on April 1st and was approved by the President on April 7th. It provides for the commissioning of pharmacists in the regular corps of the service on the same basis as physicians, dentists and sanitary engineers—Our first result.

THE VETERANS' BUREAU.

In December 1929, Representative Johnson introduced H. R. 6996 to create a commissioned medical service for the Bureau, consisting of a medical, a dental and a nurse corps. At present, physicians, dentists and nurses, as well as pharmacists, are civilian employees. The A. Ph. A. promptly requested a hearing, which was

granted on March 19th, and with the support of the A. A. C. P. and the N. A. B. P., insisted that pharmacists should also be commissioned and submitted an amendment for a separate Pharmacy Corps.

I must also mention the activities of Winne, Swain, Hilton, DuMez and Eberle in connection with these efforts to improve the position of pharmacy in the Government service.

PHARMACY IN HOSPITALS.

The A. Ph. A. became a member of the American Conference on Hospital Service in 1928, in order to better cooperate in the general improvement of Hospital Service. The pharmaceutical service in many hospitals is apparently unsatisfactory and would not meet the requirements of the various state laws regulating the practice of pharmacy. The requirements of a hospital, to be approved by the American Medical Association, do not mention pharmacy, although pharmaceutical service is one of the most valuable, as well as reponsible services in a hospital. The hospital pharmacy should be kept abreast of all improvements in modern pharmacy and in other branches of hospital service for the protection of the public. The A. Ph. A. is in correspondence with the A. M. A. requesting that a requirement covering a modern hospital pharmacy be included with the other requirements of an approved hospital.

CONFERENCE OF PHARMACEUTICAL ASSOCIATION SECRETARIES.

The pharmaceutical associations in most states have now reached the stage of development where they are really effective and influential organizations. This is also true of a growing number of local organizations. Realizing the desirability of an exchange of experience and information about the work of these associations, a conference of their secretaries was organized at the St. Louis meeting in 1927 and will hold its third annual meeting here. The organization needs stimulation and encouragement. By bringing together the secretaries of the state and local associations, it will be possible to coördinate the efforts which are being made for the advancement of pharmacy in the many states. Such a plan will work for greater uniformity in progressive organization methods and for a practical study of the best methods to adopt. Similar organizations in other professions are doing very effective service.

CONFERENCE OF PHARMACEUTICAL LAW ENFORCEMENT OFFICIALS.

Attention has been largely devoted to securing adequate laws regulating the entrance to and practice of pharmacy. These measures cannot produce the expected results unless the necessary machinery for enforcement is provided. There is a general realization of the need for law enforcement. The Conference of Pharmaceutical Law Enforcement Officials was organized at the Rapid City meetting last year, to bring those officials into personal contact for the purpose of exchanging information and improving enforcement procedures. Its first annual meeting will be held at this convention and those who are wisely promoting this organization should be given every encouragement and assistance.

The A. Ph. A. has been the source of pharmaceutical organizations. The two conferences just discussed will prove to be as helpful to the cause of pharmacy as

have others in time and with proper support. In this year's program they have been given the same time as sections of the Association and they should continue to have this position.

I have always felt that the regeneration of pharmacy would come about through public demand when the public came to realize the importance and necessity of pharmaceutical service and it seems to me a good sign that many newspapers, magazines and scientific journals, in their columns, editorials and otherwise, are taking note of the disorganizing conditions which exist in pharmacy at present and, especially, in the retail drug stores. In most of these published statements ridicule is employed as a whip to sting our sensibilities, but, in many instances, the importance of pharmacy is recognized and the hope for change is voiced. Despite all this, the recognition of pharmacy as a profession is receiving more and more substantiation from men and institutions of the highest standing in the land. The American Council on Education, after a careful investigation, was willing and anxious to make a survey of pharmacy on the basis of a profession. It now remains only a matter of financing.

EDUCATION.

All schools and colleges of pharmacy holding membership in the American Association of Colleges of Pharmacy require for entrance evidences of the satisfactory completion of four years of high school work or its equivalent and as a minimum for graduation not less than 2250 hours of instruction, including oral lectures, personal laboratory work, recitations and reviews of which at least 1000 hours shall consist of lectures and recitations, such work to be given in a period of not less than three full college years of at least thirty weeks each. These institutions will require for graduation after July 1, 1932, not less than four full college years of at least thirty weeks. Eighteen schools and colleges now maintain a minimum four-year course. The time will come, I believe, when our colleges of pharmacy will train most, if not all, of the scientific specialists, especially the chemists, bacteriologists and, perhaps, the pharmacologists, who are becoming a part of the research organization of our manufacturing pharmaceutical establishments and elsewhere. Meanwhile, wherever practicable, opportunity should be made available in some of our pharmacy colleges for courses leading to a degree equivalent in value and training to the Doctor of Philosophy degree in chemistry, offered by our Arts & Science Universities.

REGISTRATION.

Each state in the Union and the District of Columbia has a law regulating the registration of pharmacists and the practice of pharmacy.

Forty-five states and the District of Columbia require graduation from a high school as a prerequisite to examination for registration.

Thirty-six states and the District of Columbia require College of Pharmacy training as a prerequisite to examination for registration.

All states, with one exception, and the District of Columbia, require practical experience as a prerequisite to registration toward which credit is given for college of pharmacy attendance. In a majority of cases, four years of practical experience is required.

The Association should provide for a Council on Education composed of members from the different groups, as is at present represented by the Committee on the Study of Pharmacy, which has functioned so effectively up to the point of obtaining the necessary funds for the continuation of a survey.

U. S. PHARMACOPŒIA.

Many of our members will go from our meeting to Washington, only a few miles away, to participate in the deliberations of the Eleventh Decennial Convention which will provide for the revision of the Pharmacopæia. The U. S. Pharmacopæia is a book of standards for the guidance and use of the medical profession and pharmacy and is the greatest book of its kind in the world. It is gratifying to know that our membership, from time to time and from revision to revision, have given greatly of their time and service to this work.

THE REMINGTON HONOR MEDAL.

The Remington Honor Medal is awarded by the Ex-Presidents of the American Pharmaceutical Association and presented by the Senior Past-President of the New York Branch of the A. Ph. A. in recognition of the highest services to pharmacy within the year and it is gratifying to our membership, especially us Baltimoreans, that the medal for 1930 was presented at our banquet last evening. It is well known that Joseph P. Remington was not only a great pharmaceutical educator, but a great leader in pharmacy, and was one of the most active and effective chairmen of the Pharmacopæial Revision Committee.

AFFILIATED ORGANIZATIONS.

We are glad to greet and have you meet with us the American Association of Colleges of Pharmacy, National Association of Boards of Pharmacy, National Conference of Pharmaceutical Research, Plant Science Seminar, Conference of Pharmaceutical Association Secretaries, Conference of Pharmaceutical Law Enforcement Officials and other organizations that are working with us for the advancement of pharmacy. We wish them successful and profitable meetings and can assure them of our greatest interest, best good will and coöperation.

PHARMACY WEEK.

We congratulate the joint committee of the A. Ph. A. and N. A. R. D. on the successful issue of Pharmacy Week and we believe that this undertaking has rendered a valuable service to pharmacy and we hope that the movement will continue to extend.

THE AMERICAN INSTITUTE OF PHARMACY.

Since the last report at the Rapid City meeting the subscriptions to this most important enterprise have increased to approximately \$820,000.00, \$480,000.00 of which have been paid in cash. Additional land has been purchased and architect John Russell Pope's office has practically completed the final plans for the building, subject, first, to the approval of the Plans Committee and then the Council. Only minor changes will be necessary and, within a few months, the building will be under way. There is enough cash in hand to provide for the land

and erect the building. Additional collections will be, approximately, sufficient to provide equipment and maintenance endowment for the building. Exemption from taxation is expected. The income of the Research Fund of the A. Ph. A. consisting of \$55,000.00, which is increased each year by one half the net income from the National Formulary, will be available for research in the new laboratory and the U. S. P. Convention is expected to set aside a fund of \$50,000.00 of which the A. Ph. A. will be trustee and the income of which will be allocated to research laboratory work. These sums will provide a nucleus for the research laboratory. Additional funds will eventually be required for research and the library and museum will need to be endowed. Certain new activities, which have either already been established or have been promulgated, will need to be provided for, such as an annual conference of the Secretaries of State Pharmaceutical Associations, the American Council of Pharmaceutical Education to direct and control education and registration in pharmacy, etc.

The income of the A. Ph. A. from its dues will need to be employed for its current expenses. This means that the land, building, equipment and the necessities of the institution are provided for, but to have this fine institution function satisfactorily and to provide for the altruistic activities which will enable the A. Ph. A. to develop as it should and pharmacy to properly benefit, one-half million of dollars or over is required as an endowment; this requirement has been recognized by influential friends to the cause and there is a strong probability that it will be forthcoming.

In my judgment, the Headquarters Building should be occupied by only service organizations and service institutions and there should not be representation of any organization whose activities will result in profits, if for no other reason than that the American Institute of Pharmacy will not be in a position to charge rentals if it expects to be freed from taxation. In the beginning, the organizations which should be represented in the building are the executive offices of the A. Ph. A., the American Association of Colleges of Pharmacy, the National Association of Boards of Pharmacy, the Committee on National Formulary and others of this character. A meeting place should be provided for secretaries of State Pharmaceutical Associations and other gatherings of this kind.

In this connection, I wish to acknowledge the great encouragement and assistance we have been so fortunate to receive from the Commission on Fine Arts and the Parks and Planning Commission of the Government. The members of these two bodies, which control the developments bordering on property owned by the Government in Washington, have shown a sympathetic understanding of what we plan and hope to accomplish in the Headquarters Building and their help has been invaluable.

It is a matter of sincere regret to those of us most closely in touch with this effort, that building operations could not be begun during this meeting. Such a representative gathering of pharmacists in this city and in Washington makes this a most opportune time to begin construction of the building which we have looked forward to and worked so hard for. However, the plans of the Government for this section of the Capitol City have been enlarged and extended recently and are not as yet completed. These modifications will greatly improve our site and its surroundings and mean so much to the complete success of our undertaking

that we must delay our plans. It is difficult to exaggerate the advantage of the location for our building and we trust that every one in attendance at this meeting will visit the site if they have not already seen it.

OUR PRESENT PROBLEM.

Probably the most serious problem pharmacy has to deal with at present is the overmerchandizing craze. It has become more and more difficult by viewing the outward and internal appearance of many drug stores to tell just what service they offer, whether they are drug stores, department stores or tea rooms. This should not be so and the practice will not survive, for the public needs and will demand professional pharmaceutical service free from the distractions of overcommercializing influences and environments. This public interest, I believe, should be regarded as a hopeful sign that the turning point for pharmacy has been reached, that the pendulum towards overcommercialism has swung too far and must swing back again. Public demands must be satisfied and it requires and must have professional pharmaceutical service, free from disturbing factors. There is much complaint by druggists in regard to the sales of drugs and medicines in other than drug stores. This represents an unfortunate situation indeed and should be corrected and, in a large measure, will be, I believe, some time in the future, not only as a result of prohibitive law, but through educational processes. The public will become informed and will realize that all drugs require special knowledge of their properties, such as effects of light, heat, storage, age, etc., and that they should be dispensed or sold only under the supervision of a registered pharmacist, who has received a liberal education in knowledge of drugs.

We must regain our professional influence and our prestige with the public. It is not so much the sale of package products of drugs and medicines in 5 and 10¢ stores that is disorganizing pharmaceutical practice as the display of alarm clocks, electric fans, can openers and the like and the sale of sandwiches and other food-stuffs and similar lunch-room operations in drug stores that alienate the interest of and also tend to destroy the respect of the public and of the merchants whose prerogatives and opportunities have been appropriated. I am confident that the powerful associations representing grocers, chain stores, department stores and other merchandizing agencies would recognize the value to themselves and mankind of limiting in a great measure the distribution and sale of drugs and medicines packaged or otherwise to regular drug channels if we would coöperate with them and restrict our encroachment upon their field of operations.

Law, prohibition and force are not effective unless equity is in the balance. I sincerely believe that large numbers of drug stores may be conducted in accordance with legitimate or ethical policies with acceptable side lines, with a greater measure of profit than results from the operations of the overmerchandized store. Package goods, representing quick sales and rapid turnover, may be sold with a small margin of profit, but compounded medicines or special orders should be subjected to service charges adequate to provide a reasonable profit and a living wage.

The future of professional pharmacy is assured despite its serious difficulties and its great problems, for so long as drugs and medicines which are poisons of varying degree are used in the treatment of the sick, pharmacy will remain of vital importance to the welfare of mankind. Just as the lawyer guards the public wealth and material interests, and the physicians the public health, so does the pharmacist guard our lives, for one little error in dispensing or combining the drugs which are prescribed by the physician or obtained by our customers, may mean and sometimes does mean death. This the public must know, understand and appreciate. As regards our problems and difficulties, they are no greater than those of medicine, if so great, a few decades since, with its diploma mills, lack of education, training, experience, professional pride and interest. Much has been done to improve medicine and medical service through better educational requirements, prerequisite educational training, standardization and advancement of education leading to the medical degree, standardization of hospitals, better organization of its associations and their activities.

Medicine has earned and obtained the support of the public through its efforts to improve its service and because of its ability to educate the public to the value and importance of that service. We can and must do likewise and we are making substantial and steady progress through the improvement of our own prerequisite educational requirements, our advances in pharmaceutical education, our desires and efforts to solve our problems, improve our service to the public and educate the public to knowledge of its value. I maintain that these special altruistic problems and services and no other represent the prerogatives and duties of the A. PH. A. but it must have the support and coöperation of every national pharmaceutical association and the financial aid and interest of the wealthy individuals and corporations connected with pharmacy, for, unlike medicine, we have not as yet established the particular public appeal and we have no Carnegie or Rockefeller foundations to help us with financial aid and support. Our wealthy individuals and rich corporations must, therefore, help us, for we render to them a great and invaluable service. They must realize the commercial value of the great opportunity provided them of conducting their businesses under the protective influence of a privileged class with prerogatives and opportunities guarded and restricted to an extent not accorded other business enterprises.

While this is justly so, the equity will not remain, nor the opportunity, unless our professional qualifications justify it and our special service is understood and recognized by those who accord us special privileges, that is the public.

I believe that the A. Ph. A. has the respect and confidence not only of its membership, but the rank and file of drug people in every branch of our calling to a larger degree than is true in any other instance of its kind.

I know that there has been and still exists some doubt of its initiative, virility and ability to do great things, but the A. Ph. A. was never stronger than it is now, not perhaps in outstanding individuals, but in the numbers of well-educated, able, active younger men, of keen executive ability, determination and force, who are able and willing to carry through the policies of our Association.

Let us then, our membership and every pharmacist in the United States who has any interest in his vocation, give our confidence and support to the ASSOCIATION'S efforts to promote, protect and guard the professional, educational and ethical aspects of pharmaceutical service through the promulgation of the policies of the A. Ph. A., in direct coöperation with the American Association of Colleges of Pharmacy and National Association of Boards of Pharmacy, with the interest

and support of all other national pharmaceutical associations operating together, in daily contact in our new grand American Institute of Pharmacy Building, which will be established within the year on its splendid site opposite the Lincoln Memorial in our nation's capitol.

CONCLUSION.

The Presidency of this Association is a great honor and a great responsibility. I deeply appreciate the opportunity of serving in this office and the fine coöperation which the other officers, the committees and the members have given me.

I am highly appreciative of the interest which has led many of our members from distant points to gather here to participate in the work and share the companionship and pleasures provided by our Seventy-Eighth Annual Meeting.

In particular I am indebted to my neighbors and friends who have spared no effort to promote the success of this occasion and, especially, do I acknowledge with grateful appreciation the untiring interest, guidance and coöperation of our Permanent Secretary, Dr. E. F. Kelly.

COÖPERATION WITH HOSPITAL PHARMACISTS.*

BY ERNEST E. IRONS, M.D.

Inspection and study of the hospital drug room will be of interest and profit alike to the administrative and professional members of the hospital staff. The superintendent will find here opportunities for justifiable economies, the existence of which he had not suspected. Attending physicians will be surprised at the large amounts of proprietary drugs which they are unthinkingly using in place of equally effective and less expensive pharmacopæial preparations, often under the misapprehension that the widely advertised proprietaries were accomplishing something more than the practically identical official drugs.

A closer acquaintance and coöperation between the hospital pharmacist and the members of the attending staff will be of mutual profit. The pharmacist will learn the problems which the staff has to meet, and the physicians can learn much concerning the composition and origin of new as well as of old remedies. In many hospitals the staff has failed to avail itself of the store of pharmaceutic information which may be had from the pharmacist for the asking, and the pharmacist has not taken as large a place in hospital conferences as he should. His function should not cease with supplying of drugs called for on prescription and the detecting of inadvertent errors of dosage, but properly should be extended in an informative and advisory capacity, under instructions given by the staff and medical superintendent, so that the hospital prescribing may be limited to remedies whose composition is known and whose use is approved by the best medical practice. The correction of habits of prescribing proprietary drugs in hospitals will go far toward eliminating confusion and improving the medical education of interns, nurses, the public and the attending physicians themselves.

[•] From an article read before the Annual Congress on Medical Education, Medical Licensure and Hospitals, Chicago, Feb. 17, 1930, through J. A. M. A., April 26, 1930, page 1278.