

DOES THE PRESENT FORM OF THE PHARMACOPŒIA INTEREST THE PRACTICING PHYSICIAN?*

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This subject is presented at this time because the writer is convinced that there is something lacking in the general plan of handling the revision and encouraging the use of the United States Pharmacopœia, which must be supplied in order that the most important factor in the therapeutic scheme, the practicing physician, will become interested sufficiently in the book to make it a part of his working library.

The inference to be drawn from the foregoing is that the average practicing physician is not interested in the U. S. P. from the standpoint of availing himself of the information contained therein. While it is believed that it would not be difficult to demonstrate the correctness of the inference by a multitude of figures the writer has not attempted to prove his point by that method. He has, however, made it a point during the past year to question a number of general practitioners and specialists in various lines of medical endeavor, and failed to find one physician out of the number who, himself, possessed a copy of the U. S. P. or who seemed to have much more than a vague knowledge of its contents.

Of course each one of them was aware of the existence of the book. A scattered few stated that on occasions they visited their neighboring pharmacist when it became expedient to consult the book but, on the whole, none of them appeared to consider it an essential part of their office libraries. Most of the physicians who, at some time or other, had seen a copy of the U. S. P. stated that its only value to the medical practitioner was that of a reference book and that the book in its present form failed to meet the requirements in that connection. Further inquiry disclosed unanimous desire to have the material in the U. S. P. presented in such detail as to make it informative to the busy practitioner and to have the matter set up in a manner or form to which quick reference might be made if an occasion arose which required it; that such occasions do arise frequently was readily admitted.

Inquiry as to the sources of information upon which dependence was placed in the absence of an official guide such as the U. S. P. disclosed the fact that in some cases the condensed publications, supplementary to the U. S. P. and N. F., issued by the A. M. A. and the N. A. R. D. were relied upon, but in an astonishingly large number of instances the information was secured from the catalogs of manufacturing houses. How this need for a convenient reference work on therapeutic agents was sensed by alert manufacturers is shown by an examination of the catalogs published by them. The space devoted therein to information concerning doses, dosage form, solubilities, compatibilities, therapeutic data, indications for use, etc., in most cases exceeds in area the space used for the purpose to which these catalogs are primarily dedicated, namely, price guides. This practice is not a new one among manufacturers, as most pharmacists know, and the fact that it has continued for years is obvious proof that the manufacturing houses which issue these publications must be convinced that the therapeutic information printed

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therein is supplying a rather general need; otherwise they would not continue to bear the increased expense incident to this voluntary expansion of the size of their price lists.

The point probably will be raised that much of the information referred to as being furnished to medical practitioners by means of manufacturers' catalogs may be found in the present form of Pharmacopœia. True enough, but is the information in a form whereby the busy medical practitioners may readily utilize it, and will they dig through a lot of other material which is essential to the pharmacist and manufacturer but seems extraneous to the physicians' needs? And is the information which the physician seeks set forth in the U. S. P. in as satisfying detail as the manufacturer's catalog presents it? If it is, then why do physicians generally not possess themselves of a copy of the U. S. P. for reference purposes?

It has been suggested that a sum of money should be set aside to advertise the U. S. P. among physicians. The book as a book does not need to be advertised. There probably isn't a medical practitioner engaged in active work anywhere in the United States who is not aware of the existence of the U. S. P. in an abstract way, but it is evident that he does not buy it. Yet he does not hesitate to spend money for any medical work or appliance that appeals to him as constituting a necessary adjunct to his medical practice.

If, therefore, after all the time and money which has been spent during many, many years in preparing and exploiting the U. S. P., the physician still is indifferent to it, should we not begin to seek a reason for his lack of interest in the book and make an effort to present something to him in the form of a summary, abstract or résumé containing additional therapeutic data that will arouse his interest and be considered by him as a necessary addition to his armamentarium?

It certainly seems as if it should be within the bounds of possibility to inspire as much confidence in the U. S. P. on the part of the medical profession from the standpoint of making the information contained in it medically official as is accorded the book by the United States Government, which declares the U. S. P. to be the official Government standard of purity for drugs used in medical practice. This confidence will be inspired when the practicing physician is provided with the information not contained in the U. S. P. plus such additional data as will enable him to apply it to his practice. He needs the information, wants it and will, no doubt, avail himself of it if it is put together in a form that he will recognize as being practicable, convenient and perhaps indispensable to his work.

With reference to the objections which have been offered from time to time as to the wisdom or unwisdom of furnishing therapeutic data in an official standard of the type of the U. S. P. it should be stated that the data need not necessarily be a part of the official volume. The important point to be emphasized is the fact that, in the language of a former President of the United States, a condition and not a theory confronts us.

If the U. S. P. is to play a part in guiding the practices of pharmacy and medicine along sane, rational, professional lines, the material contained in it must be made available to the self-respecting practicing physician who dislikes to be made an agency for the exploitation of every description of fantastic nostrum parading in the guise of a scientific therapeutic development, most of which are destined ultimately to join the myriads of other therapeutic fakes so eagerly sought by a

confiding but deluded self-medicating public—a consummation devoutly wished for by the selfish promoters.

No better argument can be offered in favor of prompt action in behalf of furnishing a means whereby the doctor can secure some official guidance concerning drugs of established identity, purity and usefulness, than to call attention to the extraordinary chaos which now prevails in the field of drug therapy. Art, romance, psychology, poetry, plus the consummate skill of the advertising expert are combined to expound the alleged merits of an endless host of new nostrums consisting of nothing more than pretty, palatable and profitable combinations of old and well-known U. S. P. drugs which a doctor is told he cannot combine extemporaneously and which he believes, because he has no dependable information to the contrary. As a consequence pharmacists' shelves are groaning and their bank balances are gasping under the load of every variety of dosage form under the sun which is being foisted upon them by modern methods of merchandising.

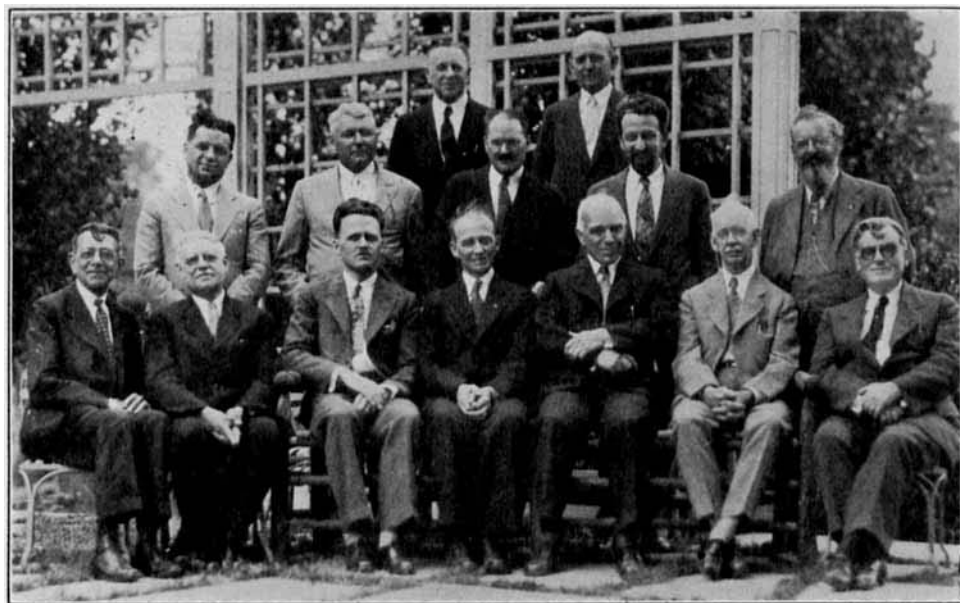
This brings us to the final thought. In the days preceding big mergers when the counting house played a less important rôle than it does to-day, it was a custom for chemicals to be developed by chemical manufacturers who would market them as such. Pharmacists would purchase them as needed to meet their requirements and dispense them in the dosage forms ordered on the prescriptions of physicians. The pharmacist's investment then consisted of the cost of such a portion of the chemical as he deemed necessary to purchase. This might vary from a few grains up to an ounce, depending somewhat on the dosage.

The custom to-day is changed. Instead of setting on a shelf a portion of a newly discovered chemical and contenting himself with the thought that he is in a position to serve his patrons, the pharmacist now first buys a portion of the chemical, not from a chemical manufacturer but from a pharmaceutical manufacturer, who soon follows the exploitation of the chemical itself, with a one-grain capsule thereof, then in proper sequence a two- and a three-grain capsule, pink colored or otherwise, then tablets in various strengths, then a watery solution and an oily solution, perhaps a suppository and an ointment, a tincture of the crude drug if the substance in question is the active principle of a vegetable drug, then a syrup of the same and, of course, an elixir and so on until the entire gamut of dosage forms is run, and all of them must be under the label of the original promoter of the chemical. In the case of ephedrine one manufacturer has worked up to eighteen different preparations of this one substance.

If the original substance is not controlled in some way by a single manufacturer, then the pharmacist's troubles, if he runs a real service store, have just begun because waiting outside the door are the representatives of a half dozen competing manufacturing houses who are going to tell him how many pages of advertising in medical journals they are going to use in the ensuing months to exploit the same substance, in the same dosage forms, usually at the same prices, and the pharmacist looks mournfully at his empty capsules, his tablet machine, his graduates, scales, percolators and glass funnels, his ointment slab and his suppository machine, his mineral oil and distilled water bottles, and he buys and buys and buys. Because, how can he tell that all of the advertising is not going to pull and of course he does not want to be caught without Blank & Blank's one per cent solution of the

exploited substance if a call for it comes in just before closing at eleven o'clock at night.

Is it not time to get back to first principles in some of these connections? Has the merchandising frenzy not gone far enough? Have we not departed a bit from the rational procedure which should guide those who pretend to serve the sick? Can we not correct this condition to some extent through the agency of the U. S. P.? The interval between revisions seems too long for the book to keep pace with scientific progress. Therefore, it would seem as if at this time the question of supplementary sheets might well be considered. Just how the details would have to be worked out the writer does not pretend to say, but does desire to leave the thought that along with the development of some official publication, patterned after the lines of the summaries of the U. S. P. and N. F. for the use of practicing physicians, provision should be made also for the periodic or sporadic publication of a supplement to the latest revision of the U. S. P. which would serve as an official source of information of new therapeutic agents, that are deemed of value, which could be relied upon by those who desire to adhere to intelligent and honest practice in the professions of medicine and pharmacy, thereby insuring a respected position and the permanency of both practices.



National Formulary VI Revision Committee.

(See page 673, July JOURNAL A. PH A.)

Front row, left to right—Samuel L. Hilton, H. V. Army, Adley B. Nichols, *Secretary*; Louis Saalbach, *Vice-Chairman*; E. N. Gathercoal, *Chairman*; Wilbur L. Scoville, Leonard A. Seltzer.

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