

SOME PRESCRIPTION KINKS AND HINTS.*

GEORGE M. BERINGER, JR.

The pharmacist might, with profit, stimulate the physicians of his neighborhood to prescribe various coatings for extemporaneously prepared pills. A coating that is easily applied, and, at the same time, is distinctive and unusual, is plumbago. The pills are simply rolled in finely powdered graphite. They may, afterward, be highly polished by rolling on a piece of cotton flannel or of felt.

Physicians are coming more and more to order ointments dispensed in collapsible tubes. The usual methods of filling the tubes are by means of a spatula or by melting and pouring the ointment into the tube before the ointment has quite solidified. The first of these is rather troublesome and "messy." The second cannot be used in very many cases without having an uneven admixture of the ingredients and an ointment far from smooth. The following has been found a convenient, clean and rapid method: The prepared ointment is placed in a thin streak along the center of a piece of suitable paper (preferably parchmented) about $1\frac{1}{4}$ times the length of the tube to be filled and about three or four times the diameter of the tube, in such a manner that the paper and ointment may be rolled into a pipe of slightly smaller diameter than the tube. This pipe is inserted into the tube and the outer end of the paper folded over. The folding-over is continued and the paper withdrawn as the ointment is expressed into the tube. In this way the tube is filled as solidly as by a machine and with little or no loss or smearing.

It has been found difficult to powder Chloretone finely enough to make a smooth ointment. It becomes so electrified upon trituration that it sticks to mortars, pestles and spatulas and, when scraped off, flies in every direction excepting the one intended. As it was prescribed in an ointment, for rectal injection, it was not thought advisable to use alcohol or similar solvents to facilitate its incorporation. The substance can, however, be made into a very smooth paste by rubbing upon a tile with a few drops of expressed oil of almond, before incorporating with the other ingredients.

Scarlet Red Ointment is frequently prescribed in such a manner as to leave the selection of the base for its incorporation to the judgment of the dispenser. Petrolatum is the base most frequently used. The dye, however, is nearly insoluble in this medium. It would seem reasonable to suppose that particles of a substance coated with another substance in which they were insoluble would have little or no action upon the tissues with which they were brought in contact. The dye is soluble in benzoinated lard and the ointment so made is certainly smoother and probably more efficient.

A prescription was received for soft elastic capsules of Oil of Erigeron, each containing three or four drops. It was necessary to add some fixed oil as a diluent in order to fill the capsules satisfactorily. Olive oil, the usual diluent in such cases, formed a cloudy mixture, and, with an old sample of erigeron oil,

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even threw out resinous masses. Expressed almond oil did the same. Castor oil made a very clear and brilliant solution and was used with satisfaction.

The following prescription for an injection seems simple, but illustrates how a very slight difference in manipulation may make considerable improvement in the finished product.

℞ Tr. opii, fl. dr. 1.
Tr. catechu co., fl. dr. 2.
Plumbi acetatis, gr. 15.
Zinci sulphatis, gr. 15.
Aquae rosae qs. ad., fl. oz. 8.

M.

This was at first prepared by adding the tr. opium and the comp. tr. catechu to the other ingredients—previously mixed “secundum artem.” It was found, however, that the precipitate subsided very rapidly and, with some specimens of comp. tr. catechu, was granular. The following method proved better: The tr. opium and the comp. tr. catechu were mixed with 4 fl. ozs. of the rose water, the other ingredients mixed secundum artem with the balance of the rose water and the two solutions mixed. By the latter method the precipitate was more bulky and more finely divided, hence, subsided more slowly and could be more evenly administered.

The well-trained pharmacist is exceedingly careful, when triturating, two powders, to add very slowly and cautiously the diluent powder to the more active; yet, very often, the same person fails to realize the importance of observing the same procedure when triturating an insoluble powder with a liquid. Two samples of the following prescription illustrate the importance of this:

℞ Calaminae, gr. 40.
Zinci oxidi, dr. 2.
Liquor calcis, fl. oz. 4.

M.

A sample, prepared by adding the lime water in considerable quantities at the start, although triturated for a fairly long time, commenced to subside immediately after being shaken up. Coarse particles could be readily seen in the mixture.

A second sample, prepared by adding the lime water in small amounts and triturating after each addition till a perfect magma was formed, had scarcely commenced to precipitate five minutes after being shaken. The particles were apparently evenly divided and after final separation, on long standing, the precipitate was twice as bulky as that in the first specimen. It is easy to imagine which sample could be most evenly applied and would give the most benefit when applied to the skin.

The following formula presents a unique difficulty:

℞ Kaolini, oz. 4.
Glycerini, fl. oz. 1.
Sod. salicylatis, dr. 2.
Ol. eucalypti, fl. dr. 4.
Ac. borici, gr. 50.
Ol. gaultheriae, fl. dr. 2.
Mentholis, gr. 40.
Lanolini, oz. 2.

M.

This was prepared by rubbing the kaolin, boric acid, sodium salicylate and lanolin together in a mortar, incorporating the oils in which the menthol had been dissolved, and, finally, adding the glycerin. The result was a granular mass

mixed with what appeared to be streaks of oil. However, the oils had been perfectly incorporated before the glycerin had been added; also, previous experiences had taught that alcohol and some other liquids would not mix with lanolin until diluted with sufficient water. Hence, a fluid ounce of water was added and well stirred in, when the mass became a perfectly smooth cataplasm.

A RECENT BUCHU ADULTERATION.

R. B. HARVEY.

Commercial lots of Buchu recently appearing on the market have been adulterated by the addition of small amounts of foreign leaves. Although present to the extent of only three or four percent, the intense astringency and bitterness of the leaves of this new adulterant make it especially objectionable.

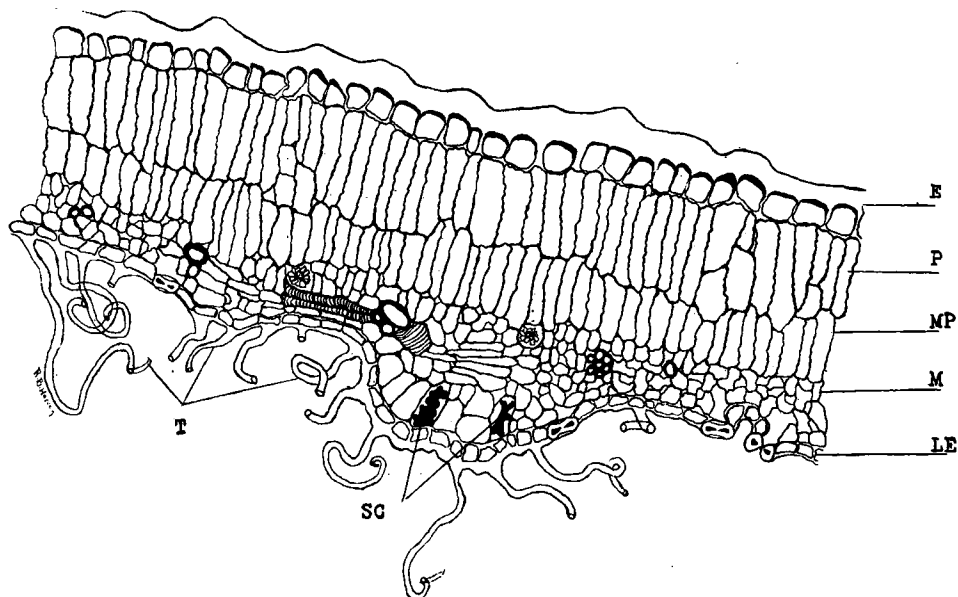


FIG. 1.

As no flowers or other diagnostic features were found, the botanical source of the leaves has not been determined, but they are probably derived from some shrub growing in the same locality as Buchu.

The leaves of the adulterant are somewhat darker in color than Buchu and of a different shape. They are oblong, lanceolate, 10-20 mm. long and 3 to 8 mm. wide with acute apex and obtuse base. They are also much thicker than Buchu, the average being about $\frac{1}{2}$ mm. The upper surface of the leaf is olive green, glabrous, and finely reticulate; the under surface, somewhat lighter in color and minutely tomentose. The margin is entire and revolute, and the texture, coriaceous.

In cross section, the leaf of the adulterant (Fig. 1) shows a structure considerably different from that of Buchu (Fig. 2). The upper epidermis (E) of the adulterant is made up of thick walled cells, the outer part being 24-30