

# EDITORIAL

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## LOOKING BACKWARD, THINKING FORWARD.

AT THIS season of the year when the "old" and the "new" are brought together, thoughts review the past and hopes strengthen the possibilities and opportunities of another period of service—for every year brings to that which follows, unfinished work. While the waning year has brought many unpleasant experiences it has left impresses which will serve as lessons that should make the solution of confronting problems possible. The experiences of the year are different from those that preceded, but there are many prototypes. The recently published diary of "A Quaker Forty-Niner" (Charles Edward Pancoast, an apothecary) brings to light situations which in some respects are not so very different from those of to-day—general conditions were relatively worse and existing phases of medicine and pharmacy of his period have decidedly improved since then.

Neither pharmacy nor the drug business has produced large fortunes for individuals as a result of investments in these lines and, consequently, the effects of prosperous times and periods of depression are not as keenly felt by those so engaged. It is true that a few years ago the accruing profits were greater than they have been during the past year but there are indications of improved conditions. We express our *Christmas Wish* for a joyful season of gladness, health and happiness, and possibilities for contributing to the welfare of others.

Just as other activities, pharmacy occasionally faces a crisis, but it always comes through and, in our opinion, improved by the experience, due to the fact that pharmacists perform a service which is essential for public welfare. The over-development of the merchandise side of the drug store seems to have reached a peak and now more thought is given to cut out items that characterize the department store.

There is a necessity for many druggists to carry stock to increase their profits and supply patrons who also require pharmaceutical service. The business should not obscure the fact that pharmacy is fundamental and much of the merchandise sold is part of a service the patrons demand—the public has a very important part in shaping our way of doing things, and this applies also to other professions.

The *New Year's Message* is one of hope—that there will be increased prosperity in 1932 in which pharmacists will share and benefit all branches of the drug-trade interests, for pharmacists represent these as distributors, and their prosperity and advancement is necessary, if other divisions are to prosper. There is no incompatibility between commercial activities and professional conduct, when the guiding thought is service.

A hopeful wish is that the "American Institute of Pharmacy" may become a reality before the end of 1932, and that the idea of providing endowments, for this and other institutions of pharmacy, may develop in the minds of those whose successes have been won in the drug-trade and related industries.

Let genuine Christmas fellowship possess us. A new year is upon us with new duties and new opportunities.

## THE TREND OF PHARMACY IN ITS RELATION TO THE PUBLIC.

THERE is an evident "back to pharmacy" trend in drug stores, whereby a better public service is rendered. For a number of decades the development of drug stores was largely in merchandising lines, so that in the "modern drug store," in many instances, the fundamental structure was obscured. This trend was the result of public demand and the desire of the votaries to increase business volume and profit. Now it is being recognized by many that the so-called side lines, which are represented in the department stores and other establishments, do not greatly augment profit, because it is not possible, except in relatively few drug stores, to turn the stock often enough to yield the expected net profit. In this development, items, such as sick-room supplies and a long list of other articles formerly major parts of the drug stock and which properly belonged there, were neglected.

Seemingly, the ratio of exclusive pharmacies is small, but there are opportunities for most drug store owners to plan their stocks on a profit-producing basis by the inclusion of items that bear a closer relation to pharmacy. There may be reason for competitive price-cutting on merchandise sold in different types of stores, but in the sale of medicines quality will appeal to the public as of first importance.

The public can and should be informed relative to the significance of qualified pharmacists for handling medicines of all kinds, drugs, chemicals, poisons, etc., that untrained persons do not, as a rule, know the danger and responsibility in handling medicine, nor the importance of quality and uniformity. Herein is an opportunity for pharmacists; they have been the first to recognize the dangers of narcotics, of substandard drugs and chemicals and have, unhesitatingly, advised the public and legislative bodies of the need for proper regulations, but they have been somewhat backward in insisting that the regulated items should be handled by qualified pharmacists. They have been foremost in the preparation of standards, but have not strongly enough insisted that all who deal in these products should have the necessary knowledge for determining strength and purity and a realization of their responsibilities to the public. Pharmacy Week brings the importance of pharmacy to the attention of the public, but what is needed is constant, dignified observance, and that rational, reasonable information relating to the practice of pharmacy be passed on to the public, just as doctors and dentists have done and are doing. Quoting Dr. W. W. Charters:

"The materials that the pharmacist deals with are in many cases so dangerous in their effects upon physical well-being, and the problems that face him in handling these materials and in his contacts with the public require so much intelligence—if they are properly performed—that it is absolutely essential for him to have a rather wide and intimate acquaintance with the fundamental sciences upon which the art depends; and since the distinction between the trade and the profession lies essentially in the fact that the trade needs to know only the methods in order to be proficient while the profession needs to know the principles upon which the methods depend, it follows that pharmacy is a profession rather than a trade."

"Conspicuous among the duties of the pharmacist is the group which deals with public health. These activities constitute his major function in connection with social and community life. Filling prescriptions correctly is, of course, important

to the public, as is also the display and sale of reliable products; but in the service to public health the pharmacist serves the community in a unique way."

Dr. Hugh S. Cumming, Surgeon-General, U. S. Public Health Service has said:

"The usually strategic position and the familiar association of the drug store with medical matters in the popular mind places pharmacists in a position to render a material service to the community in connection with public health activities. It is the privilege, as well as the duty, of a pharmacist to cooperate with public health agencies in the dissemination of reliable information concerning the public health, and to assist the constituted public health authorities especially as relates to communicable diseases and the protection of biologic products. It is, therefore, evident that a pharmacist should possess information of wider scope on matters pertaining to the public health than is possessed by the average layman."

It is for the good of the public that the drug business provides profits for its votaries and, unquestionably, this requires sales other than drugs and medicines, but the sales of the latter should, as far as possible, be restricted to those learned in the profession of pharmacy, for the safety of the public and promotion and protection of public health. There should be closer adherence to the Pharmacopœia and National Formulary, and the professional responsibilities should strengthen the resolve of pharmacists that those engaged in pharmacy be qualified to assume its duties and responsibilities. Coöperation among those engaged in the divisions of the drug industries is necessary for its promotion; united they can place pharmacy in its best light before the public and gain its support, while division on essential questions impedes progress. There should be a proper appreciation of the pharmacists' relation to the public, and no wavering among the divisions of the drug industries, represented by its organizations, relative to the requirements of that relation.

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### STANDARDS FOR DRUGS.

**T**HE professions of medicine and pharmacy of this country have worked closely together in the development and improvement of standards for the identity, purity and strength of the substances used in the prevention and treatment of disease. In this work, medicine and pharmacy have had, particularly in recent years, the coöperation of other professions that could contribute to the improvement of drug standards. The responsibility, however, has rested to a great extent upon medicine and pharmacy, for obvious reasons.

The results of more than a century of persistent efforts are the United States Pharmacopœia, concerned chiefly with simples, the National Formulary, devoted principally to preparations, and "New and Nonofficial Remedies," devoted largely to defining proprietary substances which are, under their rules, denied recognition in the U. S. P. and N. F. It is no exaggeration to state that these books of standards are recognized as the peers of those of any civilized country both as to scope and requirement, and that, so far as standards are concerned, the health and welfare of the public are as fully protected as the present sum of knowledge with respect to drugs makes possible.

It is to the credit of medicine and pharmacy that the Pharmacopœia and Formulary were established and were voluntarily observed as standards for drugs

by the members of both professions long before there was any public demand for legislative control of the purity and quality of foods and drugs; that the income derived from the sale of these publications has been used for the necessary expenses of their revision; that the extensive and important research work involved was carried on without charge; and that the abuses which were largely, if not entirely, responsible for drug legislation were connected with drugs and preparations that were without the scope of the U. S. P. or the N. F.

It is also to the credit of medicine and pharmacy that when national and state legislation, controlling the purity and quality of foods and drugs, was enacted, standards for drugs, perfected through years of experience and investigation, were immediately available in the U. S. P. and the N. F. That they were incorporated without question into food and drug laws as standards for drugs and that their revision was continued in the control of the professions responsible for them, was a well-deserved recognition of their standing and of the disinterested efforts that had brought them into being.

With the enactment of food and drugs legislation, the U. S. P. and N. F. passed from the status of standards, voluntarily observed by the professions charged by the state with the preparation and use of drugs, to that of legal standards for the purity and strength of drugs recognized in them, unless otherwise labeled. During the twenty-five years that they have occupied the latter status there has been very little criticism, either public or private, of the standards they offer and but little modification necessary to make them fit the added demands of legal standards. The national and state governments have, therefore, been furnished acceptable standards for drugs with no cost and the only return requested is the coöperation of the enforcement officials in suggesting improvements in the standards.

It seems obvious that those who are licensed to prepare and prescribe drugs—pharmacists and physicians—are best qualified to establish standards for their identity, purity and strength. Many of the substances used as drugs are also employed for other purposes in the arts and sciences. When dispensed as medicines, they must meet certain requirements that may not be necessary when intended for other purposes.

It is equally obvious that the standards for drugs, if they are to have the effect of law, must be enforced by a governmental agency, not by the professions directly concerned, and under the supervision of those acquainted with the preparation and use of drugs so as to avoid evasions, so far as this is possible.

Theory and practice evidence that our system of establishing drug standards through the combined efforts of medicine and pharmacy and such other professions as are directly concerned, and of their enforcement by governmental agencies, is effective and inexpensive.

Since the U. S. P. Convention of May 1931, the suggestion that the method of establishing standards for drugs was unconstitutional and that they should be established as well as enforced by a governmental agency has been advanced. In the November issue of the American Medical Association *Bulletin* the statement is made that "The drug standards in the United States are now established by a private corporation known as the United States Pharmacopœial Convention. The American Medical Association has endorsed the principle of the establishment

of such standards by a properly organized governmental agency and expects that legislation toward that end will be introduced during the coming session of Congress."

The development of the United States Pharmacopœia is the result of more than one hundred years of coöperation of the bodies represented in the U. S. Pharmacopœial Convention and for more than a quarter of a century the U. S. P. has been satisfactorily employed as one of the standards of the national Pure Food and Drugs Act. It is to be noted that no demand for change has come from any government official or enforcement agency, although pharmacopœial standards and the enforcement of the Food and Drugs Act were, this year, under searching consideration by a committee of the Senate, with the result that the appropriations for its enforcement were increased.

Pharmacy should continue its coöperation with the present system of establishing and enforcing drug standards and insist that no change be made until after proposed methods of revision have been given the most careful study and that they not be adopted unless it can be proved that a change is necessary and will, unquestionably, be more satisfactory than the present method of revision, wherein all affected interests are represented.

It is a responsibility of pharmacy to protect and guard the rights and safety of the public with respect to drugs. It is also necessary to consider the probable effect of a change in the method of establishing drug standards on the future of medicine and of pharmacy.—E. F. K.



Photograph Courtesy of Dean Frederick J. Walling.  
Educational Window, showing native drugs.

THE DEVELOPMENT OF PHARMACY AND OF THE U. S.  
PHARMACOPŒIA.

Liberty is taken in the selection of the title for part of the address of the Remington Medalist—E. Fullerton Cook, for 1931—delivered on the occasion of the formal award in Philadelphia, November 9th. Further mention will be made elsewhere in this issue.



E. FULLERTON COOK.  
Remington Medalist.



Face of the Remington  
Honor Medal.

**P**HARMACY has always had a broad application. Hundreds of years ago it linked the primitive gatherers of herbs and roots in jungle, desert or mountain with the medieval mystic searching for the Elixir of Life or the Philosopher's Stone. As the medical sciences have developed pharmacy has always been associated in the gathering, experimenting, preparing and dispensing of medicines and therapeutic aids to treatment. To-day pharmacy serves as a bond between the most intricate researches of the medical sciences and the practical application of these to medical use. This is still the major field of pharmacy and there is no limit to the opportunities presented.

To the unprecedented developments of the last half century the medical sciences have contributed their share, and the intense activities of chemists, physicists and bacteriologists in health promotion are reflected in both medicine and pharmacy. In this constant search for facts we naturally see two trends. One of these is the discrediting and disuse of some of the older remedies and methods. The other is the discovery and introduction of the new. This situation is revolutionizing pharmaceutical service in everyone of its phases, but it is not destroying pharmacy itself, for many with ability and understanding have foreseen and are meeting the developments as they arise.

It is fully realized that the pharmacist graduating to-day must be thoroughly grounded in the principles and facts underlying pharmacy and then must specialize either in the sciences or in business, as personal plans for the future may demand. Pharmacy colleges are now equipping and organizing to take their part creditably in this advancing program.

Pharmacy is not worthy of survival as a profession if it cannot recognize and honestly face the new situation of this progressive and searching age. True, it is disturbing to be jostled out of one's complacency and discover that entirely new circumstances must be met. Are they, however, less interesting, or are the service opportunities less definite than in the past and is there not an adequate reward?

To stand still is to perish; pharmacy must awake or the opportunities will go to others more progressive and with a clearer vision.

What are some of the new conditions?

The manufacturing of chemicals and intricate pharmaceutical products are of necessity in the hands of large and modernly equipped organizations. Pharmacists rightly find abundant and profitable opportunity in these organizations. As technical experts in the many pharmaceutical operations, as analytical and research chemists, as managers, officers and frequently as owners, as salesmen, advertising experts and as detail men, they are the back-bone and brains of these organizations, great and small.

No training in the sciences can be too advanced for the pharmacist who would make his place in these business and professional groups. No one can deny that here is scientific pharmacy as never dreamed of in any previous period and with a fascination and a future so large that it has only been touched.

Think of the developments of the past few years; insulin, liver extract, biologicals, the vitamins, arsphenamin, the barbitol group, local anesthetics, new anti-septics. . . . The number is legion and some of these new substances are notable contributions to the maintenance of health and the cure of disease. The medical sciences are absolutely dependent to-day upon pharmacy's contributions to medical practice and there is no danger that this need will lessen, for the field is expanding and the opportunities are only restricted by the limitations of the pharmacists entering this phase of practice.

As one reviews even the past twenty-five years it is difficult to believe that so great an advancement has been made in so short a time. In this period two legislative measures have brought about a revolutionary change in the programs and established policies of the nation in the matter of truth and recognized responsibility.

The Harrison Act controlling the sale and distribution of narcotics and the Food and Drugs Act requiring a true statement of fact concerning foods and drugs, have to their credit been incorporated as the foundation policy of all great pharmaceutical organizations and insure their perpetuation and success. Let it not be forgotten that both of these measures were promoted and made law largely through the initiative of pharmacists.

The activity of Governmental enforcement officials turned in the beginning, about twenty-five years ago, much more energetically toward the food situation, as there was the greatest need. In this field to-day the results are phenomenal, for coöperation is the policy of the large food distributors and almost universal compliance with food regulations is the result.

In the medical field the problems are far more difficult than when dealing with foods, but tremendous advances have been made and the policy of most producers to-day is entirely in harmony with the declared principles of the Food and Drugs Act.

It is believed that more and more the wise business heads, working with the professionally trained scientific groups responsible for the creation and production of medicinal products, will recognize the wisdom of a policy which avoids a constant clash with enforcement officials and will expand the program, so ably begun by the 'Contact Committee,' whereby the manufacturer, who is honestly

trying to maintain the ethical ideals of his profession, coöperates with the officials of the Government in a solution of the scientific questions involved, in the interpretation of terms and in the development of methods of analysis, fair to all.

But the retail pharmacist—what is his future?

Dispensing doctors, group practice among physicians, the clinic, the hospital, the expansion of drugless therapy, the abandonment of therapeutic teaching in many medical colleges, the growth of specialties, the chain store, cut prices, etc. These are problems enough to discourage the most optimistic among the older professional pharmacists. There is no panacea for these ills; pharmacy or no one group is responsible for this appalling array of problems facing the retail pharmacist of to-day.

Each difficulty, however, has its solution, and leadership in pharmacy is arising, ready to grapple with each problem in turn and furnish the answer. The dispensing doctor is largely an economic development. The Committee on the Cost of Medical Care intimates that up to a certain point this is justified but beyond it, the doctor must turn for help to the skilled dispensing pharmacist.

Certain it is that this development has given many pharmacists an opportunity to manufacture the products used and to detail and sell them to the doctor and, if the retail druggist is alert to his opportunities, he may often be the one to supply the doctors of his neighborhood with the drugs they dispense. Retailers often overlook this opportunity. Often it is the chance to do some manufacturing. Here, especially, the retailer has the advantage if he uses it, of supplying doctors with products which are free from the danger of subsequent proprietary exploitation, after the doctors have sufficiently introduced them. Physicians are becoming increasingly conscious of the use to which they have been put in this respect in the past.

Group practice offers real scientific opportunity to highly trained pharmacists. Every such group needs a well-equipped professional pharmacy as a unit in the organization. Here is no loss to pharmacy but a new field for development. The pharmacists entering this field must bring education, culture and scientific training of a high order, but a place is assured for those who can measure up to its possibilities.

In these large centers of medical service we see a number of pharmacies being established which reflect the best traditions of the profession. They are frequently referred to as ethical pharmacies but preferably as professional pharmacies and a limited number of these will continue to be the pride and ideal of all of us. May I again suggest that the same standards and very similar equipment and stock may be assembled at little added cost into a professional section of any drug store if the pharmacist is interested. He can thus reëstablish an atmosphere to which the public will respond and where they will come with confidence to have prescriptions filled, to buy sick-room necessities, medicines and supplies for the home; help for the eradication of insect pests, efficient antiseptics and disinfectants and many other items associated with the maintenance of health.

The hospital, too, must, more and more, use highly trained pharmacists who perform services of outstanding importance in the well-organized hospital. Proper planning and organization in this part of the hospital program has repeatedly



demonstrated a saving, in cost of drug supplies, many times in excess of the installation and maintenance of costs of the department.

Pharmacy must actively cooperate with medicine in developing this program and seeing that it is a requirement of every first-class hospital in the country. Here lies one of the greatest fields for professional pharmacy in the future.

Pharmacy has been unable to understand the reasoning which, a few years ago, swept the teaching of therapeutics from the majority of the medical colleges of this country. True, the new departments of pharmacology were expected to supply this need and perhaps so drastic a move was necessary to free the schools from the continuance of teachings no longer accepted by the new group who demanded physiologic evidence of every therapeutic claim.

Happily this extreme view is passing; more tolerance and greater wisdom has come and medicine still accepts a large and important group of therapeutic agents and is teaching the doctor how to use them scientifically and with results.

Pharmacy also has a real lesson to learn from the doctor; and unless it is learned the future pharmacist, however thoroughly trained to-day, will soon find himself out of step with the times. Medicine has intensively adopted the policy of keeping up-to-date by means of graduate schools, short courses in the latest developments of medicine, unbelievably helpful lectures and demonstrations at every Association meeting, local, state and national, and almost one hundred per cent membership and attendance. When is pharmacy ready to adopt a similar program? It is the answer to many of pharmacy's problems of to-day.

How about the specialty? These must not be condemned as a class. Many of the most dependable remedies of to-day were developed through the stimulus and the financial return made possible by the specialty. Other so-called specialties, however, are a menace to medicine and pharmacy and again the solution is largely in the hands of the retail pharmacist. He is supplied with the Pharmacopœia and the National Formulary, these are intended to provide standard remedies of every type, up-to-date, complete, efficient and palatable, a reliable preparation for practically every therapeutic need. Every recent survey of prescriptions and a study of the formulas and catalog of physicians' supply houses prove that the official substances are still used far in excess of any other therapeutic agents.

If every retail pharmacist, or if 25 per cent of them, were awake to this situation, they would be detailing the doctors of the country with official preparations and samples, and specialties would be less a factor.

As to chain stores and cut prices I believe the answer is sound business education. The independent pharmacist, adding personality to a business efficiency equal to that of the chain, need have no fear of competition.

The future of pharmacy is bright if we are willing to pay the price. Integrity, thorough training, happiness in the service of humanity, and willingness to work. This combination will insure a successful future to any pharmacist.

As the recipient of the Medal this year, I am not unmindful of the honor it conveys but much more am I impressed by the sense of added obligation it places upon its recipients. To justify the judgment of friends, to lend distinction to the memory of a great man, and to serve pharmacy as he served it, is a goal and a stimulus for intensified effort."—E. FULLERTON COOK.

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