ADDRESS OF THE PRESIDENT OF THE AMERICAN PHARMACEUTICAL ASSOCIATION.*

BY W. BRUCE PHILIP.

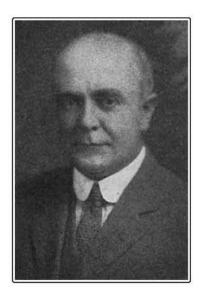
To the Drug World I extend greetings as President of the American Pharmaceutical Association at the 81st annual meeting in this eventful year of 1933. While the American Pharmaceutical Association shares the field of pharmacy with many other organizations, it is parent of them all. The works of each organization are well known among you and speak for efficiency and value so that I need only claim your time to give reports of the important happenings of the past year that touch the centers of our organization's existence.

My acknowledgment to many willing workers, in and out of committees, who have assisted in the accomplishments of the year's work cannot be couched

in phrases, my heart says them, but my pen fails to keep step with the beats of my heart, it dictates, however, that I may heartily and simply say, as President of the American Pharmaceutical Association, on behalf of the Association and myself—I thank you, one and all.

My experience in Washington fully convinces me that the American Pharmaceutical Association is more than fortunate in having its future headquarters in the Nation's Capital.

I have found, I say it after having watched numerous appointees, that a government official after a year or two of work in a bureau or department becomes fixed in his ideas, and prejudiced in his viewpoint, and more often than not, loses the broad understanding of the outer or business world. Herein lies a great danger and I want to impress upon you its importance, I may say



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the necessity for self-protection and of having representation near the governmental departments.

Only through persons with pharmacy backgrounds or representatives of an industry, who can have continual and frequent contact with governmental officials is it possible to keep viewpoints on pharmacy, and drug store problems unprejudicedly before them.

I repeat, constant contact is necessary, and vital.

LEGISLATION.

It must be remembered that now most of the new laws which limit and restrict pharmacy are having their origin in some government department, and that every month or two, sometimes weekly, yes, sometimes daily, government

^{*} Madison, Wis., August 30, 1933.

offices, such as the Pure Food and Drug Administration, the Surgeon General's office, the State Department, the Treasury Department, the Narcotic Division of the Internal Revenue Bureau, the Bureau of Industrial Alcohol, and various Sales Tax Units are making new regulations which affect seriously our business.

Every time the Government, through officials of a department, fails in a prosecution, there arises a desire in that department to change the law under which the case was tried and lost. The fact that proposed changes in the law might prove a great hardship is seldom considered. A slight change in wording of even a ruling provides loopholes for both convictions, and unhappily for technical violations which are embarrassing and expensive.

New laws, as framed by governmental departments, have two outstanding objectives.

First, to give the Department more prosecuting force and *second*, to increase the scope of the work and likewise the budget allowance of the department.

Therefore, I affirm that it is extremely necessary to have a representative (available in Washington at all times), not only do I recommend it for our own pharmacy profession but also advise it for every industry.

This process of educating of our government officials and keeping them informed, may I assure you from first-hand experience, requires diplomacy, knowledge of all facts and a willingness to listen, and a patience that must be cultivated to the nth degree. Not only must the heads of all departments be seen and talked to, but many subordinates must be repeatedly visited. It is well known that political appointees are often not in a branch of industry for which they have had previous training, and therefore, in order that a whole governmental department may understand all sides of any question over which they hold jurisdiction constant watchfulness is necessary.

When an understanding is reached with a governmental official, when an official finds after repeated interviews that the representative and his association are asking for nothing unreasonable, a friend is often won for pharmacy that is valuable beyond belief when the reputation of a member hangs on solely the probability of facts difficult to prove.

Pharmacy has these friends in Washington and by fair dealing we will keep them.

In these interviews there is no place for threats of any kind, even the possibility of intimidation by suggesting the using of Congressional influence cannot be properly resorted to.

On the other hand, a firm stand on the fundamental principles of pharmacy must always be taken. The government officials must know the numbers and the resources of those in pharmacy. Your representatives, whoever they are, must know the power and strength of their organization and unhesitatingly let the facts be known. Respect for organization must be won for an association, before that association's voice will be listened to and its strength valued.

A governmental official, even in a minor office, feels his power and often he respects only organized force. I am willing to say that the average member hardly realizes the extent of respect given in Washington to National associations, and I want to urge upon you all the importance of keeping up the membership and forces of organizations. It is not by any means a wrong use of power, but in

competition with government bureaucracy must be strong to hold its own. And here comes one of the reasons why the new Pharmacy Headquarters Building in Washington will be morally one of untold benefits to the profession.

THE AMERICAN INSTITUTE OF PHARMACY.

There is a great deal to be said about the American Institute of Pharmacy, which is the official title of the lovely, marble palace which in the very near future will house the office staff of the American Pharmaceutical Association.

It is ideally located in Washington on which is fated to become the best known street in the world; for when the programmed, expensive, grand and elaborate buildings that are at present being rapidly completed are finished on Constitution Avenue, no street elsewhere can compare with it, not in any city nor in any capital. If one were given a half a million dollars to-day he could not go out and buy a site equal to the one on which the monument to Pharmacy is located.

For the benefit of those who have not the privilege of being acquainted with the City of Washington, let me pause and explain that originally the avenues were arranged to radiate from centers. One was from the Capitol, another important one from the White House. Time has made many changes in the city's plannings and street traffic so that now the pivoting points are anything but convenient. Therefore, Constitution Avenue was selected as a solution. It has been developed as a wide straight thoroughfare, with a continuous row of new government buildings facing upon it. Our building has been strictly supervised by government agents, although privately owned. Last of these in point of position on Constitution Avenue is our own new marble palace, however its prominence is made more eminent by its very position, which is not the jumping off place, for rather it is at the turning place of travel, which leads to the nucleus of the whole designing and to the grandest of America's architectural achievements, the Lincoln Memorial.

From the steps of the building, as from the corner of a square one may look in two directions, at right angles, one to the other and see first the Lincoln Memorial in front, and then to one side along Constitution Avenue the Hall of Science Building and the massive governmental structures, while in the other direction, a stone's throw away runs the historic Potomac River. Where else could be found a more fitting place for our home. Upon these same steps will tred the feet of our pharmaceutical nation and the wise of our profession for many years to come.

In other parts of the program will be more detail descriptions of this masterpiece, nevertheless I cannot pass it without giving praise to some of those members of the Association who deserve our deepest gratitude for untiring work, as do Dr. H. A. B. Dunning, Dr. Samuel Hilton and Dr. E. F. Kelly. Almost unsurmountable obstacles have had to be overcome one by one.

I had the honor to be one of the speakers at the simple but appropriate ceremony on July 1, 1932, of the Ground Breaking Ceremony. Like several other presidents ahead of me, I had held hopes of dedicating the finished building to the glorious profession of pharmacy but that was not to be, as those guiding the destiny of this most important work have made haste but slowly. However, I plan to be present next year when it assuredly will be finished; for it is now fast reaching that state, and I am herewith inviting all of you to be there and to bring those with you who have the love of pharmacy warm in their hearts. It is not

too late for each of you to personally have a hand in furthering the project and to feel a part of it. I urge you to do your *utmost*.

THE CENTURY OF PROGRESS.

Those of you who visit the Century of Progress will find in the Science Building in the Pharmacy booth on the first floor a miniature model of this future home of the American Pharmaceutical Association. In that booth you will find many things that show the progress that pharmacy has made in the last 100 years and you will find there Dr. H. C. Christensen, a recent past-president of this Association. He has assembled the Professional Exhibit for Pharmacy and has given time, work and money to furthering it. It is unfortunate that more money is needed to finance the actual care of it until the close of the Fair, and I am asking that every one of you send a donation to Mr. Julius Riemenschneider at 2500 Broadway, Chicago, Illinois. Send at least \$5.00—make it \$500.00 if you can, but send something.

PHARMACY WEEK.

Pharmacy Week is a subject that deserves special consideration here in convention, and in the drug stores of our members, and the pharmacy colleges by the students, and in hospitals and wherever the art is practiced.

A good many of our pharmacists are taking Pharmacy Week for granted, or are leaving it to be taken care of by committee work, and are not backing it as a live opportunity to advance the better part of our industry.

The late Dr. Robert J. Ruth started a new epoch in Pharmaceutical History, and Dr. Anton Hogstead is ably carrying the work on, however, Pharmacy Week must have more universal support.

I could point my finger to dozens of drug store windows which during Pharmacy Week were decorated with cigarette cartons. Is there so much glory in smokes and so much profit in them that true pharmacy and valuable drugs are forgotten by druggists? It cheapens any drug store to utilize its windows for such displays, but more especially is it reprehensible during Pharmacy Week. Dr. Ruth saw with distress the cheapening of our window space and his endeavor was to bring up before the public a true picture of the advancement of the arts of pharmacy much as the Century of Progress Fair is doing in numerous ways, and so to advance the spirit of the attempt to better pharmacy I hereby appoint every pharmacist as a member of an auxiliary committee to help out in Pharmacy Week the Centralized Committee, and I ask President-Elect, Dr. Robert L. Swain, to reappoint these helpers.

With your permission I shall announce a name that I have coined for those drug stores in which there is no Pharmacy Week window from October 10th to 17th. They are "wazernots" and we of the profession are not proud of them.

UNIFICATION OF THE NATIONAL ASSOCIATIONS.

Associated as I am at Washington with many representatives of organizations, I have been repeatedly asked why druggists have two national associations, the American Pharmaceutical Association and the National Association of Retail Druggists.

You perhaps know the answer, why there are two organizations but still that does not prevent the query voicing a live subject. The subject of the amalgamation of the two organizations, with preferably a central office in Washington deserves careful consideration. Not long ago one president of a State Association made the subject an issue in his presidential address. He argued that education, legislation and professional and commercial pharmacy might well be welded into one organization.

There are many members in both organizations who would favor a unification of the American Pharmaceutical Association and the National Association of Retail Druggists, their arguments are for more reasons than just for the saving of dollars and cents. I feel it incumbent upon me to report this very plausible union, as it is reiterated in almost every governmental department that I visit. For my double position has taken me into all of these departments at some time as a representative of first one organization and then the other.

I have always looked at the two national organizations as though they were chums who were out to do a big needed task. Many times their paths have crossed though scarcely ever have they duplicated work and at all times where it has been advantageous for a common interest they have joined hands and forces and have battled a common enemy. It is to be hoped that no false love will ever take one from the other or that no siren will, by the magic of golden coin, lure either of them into a state of discord and trouble, nor spoil the harmony now existing between the two.

If a time ever comes, be it to-day, or next year or in the distant future, that the now separate organizations join and travel forward as one, I shall wish them well. Until that time arrives I trust that neither will leave the path of service and that they will each become strong mutually and fully understand each other.

PHARMACY AND DRUG STORE.

The Drug industry is undoubtedly slated to accept many changes in the near future.

I believe that one of the most constructive steps in the furtherance of establishing the exact status of a drug store will arrive with a new definition of the words *drug store* and *pharmacy*.

With that end in view I offer as a constructive suggestion two definitions, which of course to be legal in the forty-eight states would have to be enacted into law in each of them.

A *Drug Store* is to be an establishment wherein less than fifty per cent of the stock, or in which the sales of less than fifty per cent of the items are public health service items. In such a *drug store* prescriptions will be neither received nor dispensed, although it shall be at all times under the direct supervision of a fully registered pharmacist. Only package medicines may be sold in such a drug store.

A *Pharmacy* is to be a professional establishment wherein over fifty per cent of the items in stock, and in which over fifty per cent of the sales made are of public health service items. A pharmacy shall be at all times under the direct supervision of a fully registered pharmacist, and in it only pharmacists shall have the right to compound and dispense prescriptions and medicines.

At the same time of designating drug stores from pharmacies or shortly after-

ward it will be possible to take one step further and say that *pharmacies* shall be owned ONLY by fully registered graduated pharmacists.

This would supply an honest basis for a Pharmacy Ownership Law, and I dare to tell you, after years of study given to the subject, both from a legal and pharmaceutical viewpoint, that something of this kind will be the only basis upon which we can have our nation recognize the pharmacy ownership principle.

There are druggists who, in their stores, fill on an average only one prescription a day. They may put up a fight against such regulating, as a matter of fact, they are using the professional part of their stores, because of its very respectability, to encompass an unlimited field, which field should be narrowed down to stricter limits.

I have only to call to your attention the fact that the word *pharmacy* has never been applied promiscuously as the word drug store has, and that those merchandising establishments which have commercialized the profession, and which have in some instances gone as far as they could to wreck in the eyes of the world, and of every one who reads their advertisements, or sees their window displays, the high standing of the drug store, have only used and abused the word drug store. They do not *claim* to be a pharmacy. It is time that the profession takes cognizance of the aptness of the two terms.

I suggest that it is time that we in the profession of pharmacy let those who have cheapened and abused the name drug store take it. Let us reserve for Pharmacy a name that means skill, art, science, health, service, education and professionalism.

When, by law and regulation a strictly new meaning is put upon the word *pharmacy*, then and then only will such establishments measure up to the high standards of professionalism that are enjoyed by doctors and lawyers. Then will we have something for our college of pharmacy graduates to strive for.

PHARMACY AND THE NRA CODE.

On July 27, 1933, the President of the United States, Franklin Delano Roosevelt, wrote into his Recovery Blanket Code in Section 4 of the National Recovery Act that the Labor laws did not apply "to registered pharmacists or other professional persons employed in this profession."

History was very definitely made in that sentence.

Are we going to entrench this position of the profession of pharmacy so that it can never be torn down? Are we not, as pharmacists, going to live and serve our communities as professionals?

The American Pharmaceutical Association has for eighty-one years supported the profession of pharmacy and it still will continue to do so.

As modestly as I may, I shall tell you that I presented the cause of pharmacists, and that I asked that they be exempted from the so-called Blanket Code if and when it should be issued. Although I was discussing hours and wages I was acting at that time in my capacity as Counsel for the National Association of Retail Druggists, nevertheless, I was President of the American Pharmaceutical Association, and most vitally interested in the ethical and professional side. I am more than thankful that I had the opportunity to carry on the work of the worthy presidents who have gone before me. I know of no act in my pharmaceutical career that gives me greater satisfaction.

Because pharmacists sell merchandise, other than health items does not in any way prevent them from remaining or being still professional. It is rather accredited to their ability or education that often they are able to carry on the two lines of selling at the same time, provided, that they are practicing the profession of pharmacy as defined by the laws of the several states.

It is not unusual for strangers in towns and cities to go first to drug stores for articles. There is no hesitancy in entering any drug store, inasmuch as they are always classed as respectable establishments. To this extent the title Drug Store on a sign is an asset.

LIQUOR PRESCRIPTIONS.

I, as your President, backed by the Council offer no apology for the stand taken by the American Pharmaceutical Association that beer has no place in a drug store.

It is not a question of morality, nor of personal privilege but that the past history of beer or the sale of it at retail is not one that fits in with the dignified practice of pharmacy.

If a saloon was to have put in a drug department we would be more than annoyed; then why should a drug store put in a saloon.

Respectfully I say beer is cheap, and that we are fast approaching a time when the drug store will lose its respect in the community and be judged by its cheapest product. Up to the present day the drug store has been judged on the merits of its most precious privilege—that of filling prescriptions and handling wares for the sick and injured.

If the privilege of filling of prescriptions is in any way taken from pharmacy little will be left to us. The licenses of pharmacists makes the privilege of filling prescriptions theirs and theirs alone.

Recently there have been repeated efforts made to have certain prescriptions for liquor filled at wineries and bonded warehouses or from stocks of liquors kept in other places than in drug stores.

Now it must be remembered that druggists did not ask for the privilege of filling liquor prescriptions, it was thrust upon them by the Administration, and the Prohibition Act, and its Enforcement, and now, after we have stood the abuse and ridicule of it, commercially minded interests are trying to switch it. As long as liquor is dispensed as medicine by physicians for the alleviation of pain and disease, the druggist should demand that they alone dispense it. When liquor is sold without a prescription then and not before will there be any right to place it elsewhere than in a drug store.

Pharmacists, be on your guard. See to it that the word prescription is not made a byword and in any way synonymous with a case of liquor, the purchasing of which is made by but forwarded from some warehouse to the home of a consumer.

Recently an effort was made to have the Attorney General of the United States modify his decisions so that a wine prescription could be filled at wineries and bonded warehouses if a registered pharmacist was employed there. A combined resistance was made by all officers of the American Pharmaceutical Association and by the National Association of Retail Druggists, and by many State

Pharmaceutical Associations, and a vigorous protest was registered against prescriptions being filled outside of the premises of a bonafide drug store.

I am sorry to include so much concerning liquor in my address, but it is a force to be reckoned with at this time, and needs the very prominence that I am giving it.

This month a plan was brought to my attention which proposes that drug stores have a coöperative liquor store house and that the retail druggist's permit be amended to include the address of the warehouse in it. Then when a prescription is to be filled for a *case* of wine or liquor, the pharmacist will phone to the coöperative liquor warehouse and have the liquor delivered to the consumer. This is still a danger—a danger even if a revised plan is substituted, whereby the liquor would be sent *via* the drug store to the consumer.

NATIONAL FORMULARY AND UNITED STATES PHARMACOPŒIA.

In the pharmaceutical world the five most important letters in the alphabet are National Formulary and United States Pharmacopæia. They stand as land marks and as authority in our professional world.

Even though druggists have moved Salt-mouth and Tincture bottles from the front of their drug store to the back room, yet some cry their eyes out when a formula passes from the United States Pharmacopæia into the National Formulary. Nevertheless, it is in the scientific and pharmaceutical path of progress for the United States Pharmacopæia to become more and more a book of simples, and to define drugs and chemicals, and for the National Formulary to be a book of formulas.

It is the old graduates who suffer when a beloved formula is transferred. They love the old remedies, mixtures and concoctions, the very names of which are not even whispered to the on-coming generation of physicians.

There is a great justification in each revised form that the United States Pharmacopæia passes through. As always it is being compiled by the combined efforts of the government, medical scientists and pharmacists, all skilled in standardizing our newer medicines, and preparing them from crude drugs and chemicals.

It is well that the formulas for the centipede-like chemicals are passed to the National Formulary here to be revised by our own master pharmacist.

Those of you who are afraid that prescriptions will no longer be written for more than one ingredient have little to worry over, if prescriptions are written and pharmacy kept in its own channels.

In connection with the United States Pharmacopœia and National Formulary, I want to ask the deans of Pharmacy Colleges to give me undivided attention.

It is of utmost importance that every student know the National Formulary thoroughly. Each must know the formulas in it, and be able to bring them to the attention of the physicians who most frequently send prescriptions to a drug store in which he is employed. And do not let us cloud the art of the pharmacists, nor spoil the picture, by talking about cheapness or price.

Every student should know that the National Formulary is controlled by *pharmacists* and that it is made to serve physicians in the practice of medicine.

CODE OF RETAIL DRUGGISTS UNDER THE NATIONAL RECOVERY ACT.

Now rather far down in this address because in point of chronology it is so recent, comes my report of the happenings of the Code of Retail Druggists under the National Recovery Act, and of the position that the American Pharmaceutical Association has taken in this most far-reaching and unprecedented business upheaval. It is old news to say that the President of the United States dictated that each Industry should make a Code, and later declared that if an Industry did not respond and make a code, one would be made for it.

Pharmacy, as a two-sided industry, has professional and commercial interests to look after. Indeed I must say that these are very much intertwined, and therefore a code satisfactory to every one presents a very complex situation. Modestly I say that it is providential that I, your President, am located in the Nation's Capital, and fortunate that the office of the Secretary of the American Pharmaceutical Association is located in nearby Baltimore, and more than opportune that my successor, President-Elect, Robert L. Swain, is so close in Maryland. It is impossible for me to put into this address but few of the multiplicities of complications which have confronted Retail Druggists in preparing a code.

To sum them up briefly will be sufficient, for I fancy that before I shall read this address most of the difficulties will be surmounted and the results will be quite universally known. So far, and as a consequence of the combined efforts of druggists, in the furthering of their ever-ready health service to the Public, they have been successful in keeping professional pharmacy and pharmacists excluded from the Commercial Codes. While on the other hand the strictly commercial side of pharmacy has been incorporated in a code for the consideration of the President of the United States and his authorized agents in the endeavor to reëstablish prosperity.

It is not likely that we will get all that we desire, nor that business conditions will seem ideal under it, but I do not hesitate to assume that very soon druggists will be able to adjust themselves to new conditions, whatever they turn out to be.

Strangely enough the Retail Druggists' Code has been framed to care for four classes of workers in drug stores.

- (1) The registered professional druggists who are excluded from it.
- (2) Those working in drug stores and handling needed health service for the public over long periods of daily servitude.
- (3) Delivery boys, engaged in delivering medicine.
- (4) Those who must accept the same hours as workers under other codes in industries which parallel them.

It is not possible to give at this time the ultimate hours and wages and conditions which will be allotted to each. When, during this code making, the AMERICAN PHARMACEUTICAL ASSOCIATION was called upon to help the National Association of Retail Druggists in solving code problems, it responded.

At no time has the American Pharmaceutical Association endeavored to usurp the field of the National Association of Retail Druggists in drafting the code. Opinions by officers of the American Pharmaceutical Association were freely given wherever it was thought they would be helpful. Your Association went

that far and no further. What the future of Pharmacy will be under the final code approved by the Administration of the National Recovery Act is difficult to prophesy.

As I said earlier in my address, it is fortunate your new home will be in Washington and that your next President lives nearby.

The professional side of pharmacy under any code will be looked out for at all times by the American Pharmaceutical Association. The National Association of Retail Druggists in attending to the adjustment code will be supported by the American Pharmaceutical Association when it needs help on any commercial or administrative problems.

So that there can be not the least possible doubt about my position, my policies and my actions, I want to distinctly state that I have acted in three different capacities during these times of strife. Sometimes it was as the President of the American Pharmaceutical Association, again it was as the attorney-counsel for the National Association of Retail Druggists and at other times I was just W. Bruce Philip, proprietor and part owner of a retail drug store, Philip & Philip, in Oakland, California.

I have found it extremely difficult to divorce the person from the offices that I hold, in the minds of some prejudiced individuals, nevertheless I have expressed my honest opinion at all times, and I, for one have answered all questions that have been asked me, in my respective capacities. I have not joined in any one of my three capacities, any drug organization wherein I would have to be bound with the by-laws which say, "every member must obey all rules made by a board of directors."

I have been criticized because I have not joined one of these, but I hold fast to the American principle that I have a right to stand on my own honest convictions, and I still consider it best to support the two great organizations which separately and together have long labored for the good of Retail Druggists. Whenever needed, the American Pharmaceutical Association has rallied to the support of the National Association of Retail Druggists and repeated by the National Association of Retail Druggists has espoused the ethics of the American Pharmaceutical Association. It is fitting to say that with due regard for all this backing, I again reaffirm the stand that I took three years ago and again I say, "the Retail Druggist must look out for himself."

SALES IN A DRUG STORE.

It is a new idea to me that restrictions on the use of alcohol can be blamed for what a C. & D. correspondent describes as the retrogressive nature of pharmacy and its degradation to mere shopkeeping, and I am disposed to think that he attaches an exaggerated importance to views expressed by earlier correspondents, who appear to me to be unduly pessimistic about the future of general pharmacy. The practice of pharmacy is not a trade, though associated in shops with the trading operations included in the business of a chemist and druggist. As I conceive of the occupation which is properly described as pharmacy, it includes no sales or trading operations, so that it cannot possibly degenerate into mere shopkeeping or the sale of goods of one kind or another. I have practised pharmacy and carried on business as a chemist and druggist in the same shop; but it never occurred to me when sales were brisk that I was being degraded as a pharmacist, or that there was anything retrogressive about what I was doing when handing goods over the counter and receiving payment.—Xrayser in Chemist and Druggist, September 9, 1933.