

CORRESPONDENCE

PHARMACY'S POSITION UNDER REGULATED COMMUNITY MEDICINE.

Dr. George Urdang, of Berlin-Wilmersdorf, Germany, *Honorary Member* of the AMERICAN PHARMACEUTICAL ASSOCIATION, replies to parts of the article by P. J. Callaghan, published in the April JOURNAL, pages 333-334, as they apply to Europe and, particularly, to Germany.

He states "that the first modern social security legislation was created in the latter part of the 19th century. It is not a fruit of socialism, but opposition—the intention of this legislation, as shown by the Imperial message of November 17, 1881, was to supersede the increasing socialism by an extensive official social care." The leaders of socialism gained very quickly decisive influence in the health insurance and in a relatively short time most of the officials of the largest and most important groups of the German health insurance bodies, of the "Ortskrankenkassen," were socialists. They tried to realize in these positions their political ideas and the drawback of generalizing the community medical treatment and especially medication, so often lamented, had here its origin.

"The statement, that the quality of medical care rendered under such systems is far below the average quality in this country, is only conditionally correct. Such practice was always more of a danger than a fact and it was only the exception and at no time a rule when a person with a serious ailment would go on the outside for treatment.

"Naturally in all countries having health insurance the physicians economize in prescribing for the insured."

Dr. Urdang refers to his book in collaboration with Dr. Adlung, "Compendium of the History of German Pharmacy," published in 1935. The authors listed restrictions on physicians' prescriptions, explained the relations of physicians and pharmacists, and possibilities of restrictions, proposed and tried. The following are given by Dr. Urdang:

"1. The doctor's obligation to prescribe only medicines or substances, listed in so-called 'Arzneiverordnungsbücher.'

"2. The delivering of medicines by departments of the local health insurance bodies.

"3. The establishment of own health insurance pharmacies or the partnership of health insurance bodies of private pharmacies.

"4. The establishment of own manufacturing establishments for preparing remedies for organizations.

"5. Terms of reference for economical prescribing.

"6. The liability of the physician for all remedy costs exceeding a fixed amount within a fixed time for every insurant.

"7. The obligation of the insurant to pay a fixed part of the costs of every prescription in order to interest the insurant in low remedy costs."

In further explanation Dr. Urdang states:

"The lists of medicines or substances allowed to be prescribed for insurants by the physicians, introduced only in Germany, were removed after 1933.

"The delivering of medicines by departments of the single local health insurance bodies has been introduced principally in Germany and in Austria. In both countries it has been restricted in the last few years. In Germany it always was confined to the so-called 'freigegebenen Arzneimittel,' *i. e.*, the remedies allowed by law for the sale in the free trade outside the pharmacies.

"Own health insurance pharmacies exist in Poland, some Baltic countries and in some parts (cantons) of Switzerland. In most European countries the establishment of such pharmacies is forbidden.

"The partnership of health insurance bodies in private pharmacies is generally illegal. It is according to the public protest demonstrations of the Belgian pharmaceutical association in Belgium. The pretended private owners of the pharmacies in question are often men of straw and in reality employees of the health insurance body. Similar conditions exist in Switzerland.

"The establishment of own establishments for preparing remedies and of organizations for wholesale have been tried in Germany and in Austria. In Germany these trials after long struggle between the pharmacists and the health insurance bodies became stigmatized and are more or less illegal. They were stopped entirely after 1933. In Austria the situation is not clear. There has

been created in the time of socialistic government an official institution in order to regulate the prices for medicines used for insurances, the so-called 'Heilmittelstelle.' This institution acts as manufacturer and as wholesaler.

"It is evident that the establishment of own pharmacies and even in connection with establishments for wholesale, by the health insurance bodies, is considered as pure socialism. The principal axiom of the socialism, the elimination of the private activities and the taking over by a community, is here realized.

"Terms of reference for economical prescribing have been introduced in several countries. In Germany they are obligatory and their transgression is punishable.

"The liability of physicians for all remedy-costs exceeding a fixed amount within a fixed time for every insurant and the obligation of the insurant to pay part in the remedy costs are legal in Germany.

"In England physicians and pharmacists are paid in round sums. The English pharmacist receives for every simple medicine 3 pence, for every compounded one 5 pence and, additionally the costs for the ingredients.

"Doubtless, there are many and partly incisive restrictions for the medical care within the European health insurance, some being a fact, some being a dangerous possibility. Only the one mentioned by Mr. Callaghan—the delivering of remedies by the physician, is not included. The statement 'that in the European plan medication is furnished by the physician' and 'the pharmacist is left entirely out of the picture' is not correct."

"The functions of the physician and the pharmacist are, in the European health insurance, separated and so here is given a very important chance for the pharmacists in countries without such general separation.

"As an inquiry, organized by the pharmaceutical association of Switzerland, 1935, has shown, in Europe the full liberty of delivering of medicine by the physicians exists, excepting in some Swiss cantons, only in England. Here the introduction of national health insurance has not accepted the axiom of this liberty. Remedies for insurants in England are only delivered by pharmacists.

"The reason is evident and has the same validity in all countries of the world. A conflict between the physicians' duty and his profit is to be avoided. The physician should be interested exclusively in the treatment of the insurants and by no means in the profit for the medicine. In the United States the physicians have quite the same liberty of delivering medicine as their English colleagues.

"Pharmacy and its proper function, the providing of medicine, tend in the countries of the old European continent to more and more legal restrictions to larger liberty; in England and the United States, it is just the reverse. Should it not be possible that all of them learn from each other what to do and what not?"

"The health insurance may as well be the ascent as the descent of professional pharmacy in the United States. What it will be, depends on the activity of the American pharmacists, on their professional integrity and recognition of all possibilities of this subject."

EDITOR'S NOTE: The editor has endeavored to present the views of Dr. Urdang and he acknowledges that he may not have interpreted all of the communication of Dr. Urdang correctly. The latter has communicated his views in a spirit of helpfulness and the valuable article by Mr. Callaghan shows the importance of the subject.

UNIVERSITY ANNIVERSARIES.

Heidelberg celebrated its five hundred and fiftieth anniversary recently, and on June 30th, of this year, the University of Göttingen celebrated its bicentennial. The latter institution has been a great influence during periods of development of pharmacy. A number of American pharmacists are alumni of the university.

The "*Deutsche Apotheker-Zeitung*" has been publishing a series of illustrated historical contributions on German pharmacies in German Museums. In an issue before us there are illustrations of pharmacies of about the 18th Century and earlier. They are from Braunschweig, Ulm, Nürnberg, Düsseldorf, München, Darmstadt. The editorship of these historical articles is under the direction of Dr. Fritz Ferchl, well known in the publication of the German Apotheker—Kalender.