## THE PROFESSION AND THE COUNTRY DRUG STORE.\*

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So far as this article is concerned, the phrase "Country Drug Store" is used for the purpose of comparison, and refers to those stores located in the rural sections, the small towns, the smaller cities and the suburbs of most of the metropolitan districts. These stores are selected because they are believed to be in the majority numerically, and as a result come much nearer serving the nation than does the real city store.

Professional Equipment.—The physical and orderly appearance of the country store seems to compare favorably with that of the city store. The stock investment, considering the population served, will in many instances be more varied and in larger quantities than the city store for the reason that the source of supply is usually further away from the country store, while it is close by for the city store, thus it may be beneficial to each. The country store perhaps stocking a greater quantity, may be able to secure discounts which would not be practical to the city store because of its inability to use such quantities. The operation of the country store looks upon the big city store as being the reward for supreme effort and professional ability. He thinks that the city stores all have big prescription business and have the equipment necessary to carry out most operations; but, have they?

It would seem that in country or city the average store has only such equipment as is necessary to get by with. There are seldom enough graduates; too frequently they are not accurate because they were bought for price. How many graduated percolation jars, tablet trituate molds, suppository molds, collapsible tubes, retort stands, filter papers, hot plates, homogenizers, mixing machines, will you find in the country or city drug store? If you locate a funnel the chances are that it is made of tin and is rusty from use and disuse.

The country drug store pharmacist lays a lot of oral stress upon the prescription end of the business when talking with a customer in an apparent effort to advertise, yet he has his prescription desk pushed into the dark corner of the store where it cannot be seen and where it can be used for storage room and will not have to be kept clean. It is usually of the one-man type store, meaning, of course, that the registered man in the store is usually the proprietor and it is not often there are two registered men in the store. These stores usually have a small amount of professional business; consequently they work from one part of the store to another. Their time is consumed in various and sundry ways so peculiar to the retail drug business, and as a result their professional interest is usually of the passive type. In other words, they are always going to do this or that, yet they seldom get around to it.

Ability to Promote Professional Work.—A close study of the country drug store with its registered man will reveal that he has had about the same standard training; has passed about the same type state board examination as has the city pharmacist. Basically his ability should be on a par with the city man. Naturally there are some who are misfits and have to be classed as poor. In most instances

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this is an individual matter and is no reflection upon the training received. Generally they do have ability and initiative, even though it may be latent.

Time Element Necessary for Professional Work.—The average country drug store usually has more time at its disposal than the city store with the continuous stream of traffic that must be handled. There are certain seasons of the year when general business for the country store is at low ebb, but we find that illness is no respecter of seasons and people get sick then as well as when the commercial aspects present a red glow from acceleration of a big sale that produces much traffic and less profit. There are many official and unofficial preparations that these country drug stores use that are simple, easy and economical to prepare. This is true also of the city stores, yet we find that so many of these stores prefer to pay a premium to the manufacturer on peppermint water. They are too busy advertising "Prescriptions a Specialty," to make a pound of ammoniated mercury ointment; a quart of phenobarbital elixir, or to fill a collapsible tube; to use an ointment jar for appearance's sake instead of an ointment tin; time does not seem to permit a little attention to the finished package that leaves the counter of the self-styled prescription expert.

Professional Remuneration.—The price for professional work has long been in the print and in the talk of the average association and among the individuals. We find a group who abhor the fact that we have no regular schedule for professional fees, while the majority seem to be indifferent to the matter. It is to be admitted that there are numerous times when it is impossible to reconcile the charges with what the quality should be. That there is a variance in professional fees in a number of different stores can be attributed to several factors, few, if any, of which would have any economic foundation. The city dweller usually classes the fees of the country drug store with the Jesse James Gang; the city pharmacist frequently bewails the fact that the country drug store is tearing down the professional structure with his disastrously low fees, therefore we find two extremes. Investigation will show they are practiced by the city stores as well as the country stores.

Manifestation of Ability.—From the foregoing it is possible some of you have decided this was an indictment of the retail drug business and that everything was wrong. This, happily, is not the case and can be easily proven by the fact that once or twice in a blue moon we do find a country drug store and what might be termed a country pharmacist who realizes that his professional training was a foundation upon which to build. We further find that he has built wisely because he realizes that the professional end of the business is the keystone to his success. We find this store right up to the minute in equipment, stocks and appearance. We find his finished prescriptions a credit to the profession of Pharmacy instead of the butcher shop. We find that this individual has taken an idea, added an ell, and made an ideal which he has taken as his objective with the hope that he will finally reach his Utopia and that in his travels he will be able to offer an incentive to others to follow.

Conditions like this are rare indeed, comparatively speaking. The fact that they are rare serves to show the possibility for development and also that it will not grow without constant attention to details that the average pharmacists overlook as being insignificant.

Possibilities for Improvement.—Many of the possibilities for improvement of the conditions mentioned lie within the reach of the individual, but these same individuals must in some manner be awakened. There are a great number in Pharmacy who are not interested in the professional side, and nothing can be done to interest them. There are many who are interested but apparently do not know how to proceed. This group seems to have lost faith in the profession or their ability; maybe both. This group keeps a so-called prescription department for selfish reasons. They prefer to throw a prescription together, extract the money from the customer to keep him from going to an establishment where they do care for prescriptions and make an honest effort to prove it by the work they turn out. In a case of this nature and based on economics taught before the days of "New Dealers," this type store would be better off to discard the Prescription Department and in many instances so would his customers.

It would not be wise to waste time, effort and money trying to show the abovementioned type stores the possibilities that exist. The second group could in many instances be helped, but the third group, those who are actually interested and who are trying, is the group to help and in so doing the torch you hand to them will help light the way for the others.

When we speak of professional interest in the country drug stores, there are many who immediately think of a prescription when, as a matter of fact, there are quite a number of things that can be included in this category. There are so many preparations that have to be made before a prescription can be turned into a product for consumption, and many of these operations the country drug store can carry out with the time he has at his disposal and with a financial saving, in most instances. To mention a few other factors, there are biologic stains, dyes, ampoules, sterile solutions, the supplying of dispensing physicians and veterinarians. These are often overlooked because of the barrier of hate that we have built up against these practitioners. In short, there are about as many ways and methods of improving our professional business as there are ways and methods of dodging the issue.

Support Necessary for Improvement.—A good bit of this lethargy referred to seems to have become a habit due to the fact that the average country pharmacist has been taught by trade magazines and manufacturers how to cut prices on commercial items and thereby dispose of stagnant merchandise or increase his turnover. But this same individual is absolutely lost in the wilderness when it comes to advertising professionally. Various trade magazines suggest many types of advertising schemes. A few of the manufacturing pharmaceutical houses offer a series of professional ads if the country store will agree to purchase his merchandise exclusively. The few truly professional magazines that exist seldom, if ever, offer a suggestion for professional advertising, much less offer any practical copy. Rather, they seem to lean to the problems related to pure science and extensive research which, it must be admitted, have their place.

Hospital pharmacy in coming out in the open through several of the professional magazines has helped materially the condition of the country store because they have in so many instances dealt with practical issues, and the country pharmacist needs just such encouragement, the type that is plain and smacks with so much sincerity until he knows that it is for his own welfare and not that of some greedy manufacturer or high-powered advertising organization.

There should be an organization to whom the country pharmacist could appeal

for professional advice. It should be so organized that it would coöperate with the colleges of pharmacy, the state boards and the state associations to sponsor professional clinics where matters pertaining to their needs could be practically demonstrated. More actual demonstration and less theory would be mighty helpful. This organization should be in a position to lend assistance with professional advertising and literature pertaining to the profession designed for the physician and the public. They should be in a position to gladly give time and effort to the several U. S. P. and N. F. State Committees to the extent that their work could be more uniform, their services worth more to the physician and the pharmacist, and the cost of such operations more within reason.

## CONCLUSIONS.

The organization at present that seems to be best able to handle this situation is the A. Ph. A. It has the age, the experience, the organization, the necessary contact with agencies interested in a publication with a reader acceptance. Within the organization there are, or should be, individuals with the intelligence to promote and carry out such work.

The A. Ph. A. could easily use the support of more retail pharmacists. It can get them by putting forth efforts that will convince the country pharmacists that they have something besides scientific data to offer them. It would be useless to spend money and time through the Journal of the A. Ph. A. or other means in trying to sell all the pharmacists in the country or city on the professional end of the retail business because it is extremely doubtful if 25% of the so-called retail drug stores are worth trying to save for Pharmacy. Socialized medicine, if developed in any form, will probably necessitate a change in our present-day methods. The biggest change will be making the change from our old way to a new, and it will be the hardest. In short, many of us will die hard. To say the least, it should be a means whereby Medicine and Pharmacy could and would be more closely welded in their activities, politically and professionally.

The new drug and cosmetic laws, when finally amended and regulations issued, will have a decided tendency to slow down traffic for the many stores who are fighting for turnover. This should open avenues for the professional associations and the professionally-minded pharmacist to build professionally and to make more money in his effort. With the advertising claims of the medicine houses held down to a minimum, who is going to sell the debunked merchandise? And there are many so-called specialty items that should be classed with the so-called patents.

What is going to become of the so-called ethical pharmaceutical manufacturers who load up the country drug store and then load up his only avenue of disposition, the physician? What is this organization doing about it?

The opening exercises of the 110th year of the New York College of Pharmacy, Columbia University, were held in the auditorium on September 27th. Dean Ballard, speaking for the faculty, extended a welcome to the classes, emphasizing that the pharmacy men as students in Columbia not only must uphold the standards of scholarship required of the students in other schools of the University but must also share in the extra collegiate activities. To secure correlation of several courses in the pharmacy program with the corresponding courses in the University it has been necessary to have the opening date coincide with that of the Columbia term.