

title until we make use of our power, latent though it may be, to do something for the common good.

There is no lack of opportunity to exercise this sort of good citizenship. If there seems to be none, it is because we are so self-centered as to be blind to our opportunities. In advice about sanitation and methods of disease-prevention we should be able to do much toward assisting public health departments. It has been said by one of our own number that "no trade or profession of the present day presents greater opportunity for serving the human family by relieving suffering and causing the dissemination of useful knowledge than that of the pharmacist."

Apparently physicians themselves believe that the public needs information and have claims that those who possess the information have no right to ignore. Not long since an editorial in the Journal of the American Medical Association emphasized the people's right to a thorough education in the "essentials of public and personal hygiene and sanitation" and "to correct information about medical progress." Another physician writing recently says that "the education of the laity on medical matters is daily becoming a subject of wider interest and greater importance. Preventive measures are based in great part upon a thorough medical education of the public." Among those who are most likely to be asked to express opinions concerning medical questions, he includes the druggists and thinks that druggists who are asked for advice or to express an opinion as to the meaning or seriousness of any symptoms can be of much assistance to physicians, that he has done as much perhaps as the physician himself if he advises against the use of remedies that may be of doubtful value and succeeds in bringing the case to the physician's care.

INTRODUCTION TO THE REPORT OF COMMITTEE ON PATENTS AND TRADE-MARKS.

F. E. STEWART, M. D., CHAIRMAN.

In June, 1881, your chairman, then attending the annual meeting of the American Medical Association for the first time read before the section dealing with the *Materia Medica*, a paper entitled, "The *Materia Medica* of the Future," and in connection therewith he laid down as a declaration of principle the following resolution:

Resolved, That it is contrary to the spirit of the code of ethics for a physician to prescribe a remedy controlled by a patent, copyright, or trade-mark. This, however, shall except the use of a patent upon a process or machinery for manufacture. It shall also accept the use of a trade-mark if the article so marked is provided with a technical name, and a working formula, under which any person may manufacture and sell it.

This resolution was rejected by the Judicial Council on account of its exceptions, it being considered contrary to the spirit of the code of ethics for physicians to habitually prescribe, or in any other way endorse the commercial control of anything required for the prevention, cure or mitigation of disease. It is unnecessary to add that if the medical profession had been true to its obligations,

pharmacy and drug therapeutics would today possess much higher standing in the estimation of the public than at the present time.

Long before the advent of the modern manufacturing houses engaged in the pharmaceutical field the so-called "new remedy" business had its birth in the retail drug store, and was known as the "specialty" business. Many of the so-called specialties originated as favorite prescriptions by leading members of the medical profession. Some were labeled with descriptive names, others with semi-descriptive coined names which were generally adopted as proper titles. As a rule labels were provided with names of diseases and doses, frequently with circulars setting forth their uses, all intended for the convenience of the self-medicating public.

As long as this method of doing business was confined to the retail druggist it was not only considered legitimate, but proudly heralded as "elegant pharmacy," and the reputation of the pharmacist among the members of his guild was largely dependent upon the sale of his specialties. The medical profession prescribed them, the demand created thereby increased their sales, and the endorsement of physicians gave sanctity to the business.

But when the country became over-run with unlicensed practitioners parading as manufacturing pharmacists and chemists, who advertised similar preparations in the medical journals and sent out their detail men to interview the doctors, then a mighty howl went up from the retail druggists, and the Brooklyn Formulary, which afterwards became the National Formulary, was devised in retaliation. Shortly afterward a corresponding howl was raised by the doctors. They commenced to take exception to the methods of labeling, circularizing and advertising. Attention was called to the fact that physicians who prescribed this class of products, prescribed themselves out of practice, and sent their patients to the nostrum manufacturers for treatment. The advertisements were characterized as tissues of fraud, humbug and lies. Then it was discovered that some of these products were patented, others commercially controlled by registering their currently used names as trade-marks, and others by secret or semi-secret formulas and processes. These discoveries brought out the fact that the "specialty" business was only another branch of the so-called "patent" medicine business, the principal difference between them being that one class of products was advertised in the secular and religious press to fool the people, and the other class advertised in the medical journals to fool the doctors.

Your chairman graduated from the Philadelphia College of Pharmacy in 1876, under the tuition of preceptors prominently identified with the "specialty" business, and, after graduation, went into the same business as a proprietor, later graduated at the Jefferson Medical College, class of 1879, sold out to one of the prominent manufacturing houses, entered the practice of medicine, and made an arrangement for receiving royalties for new materia medica products of his own introduction. His literature was reprinted from the medical journals by said house and widely circulated to the medical profession. The products were not patented, or "trade-marked," and full knowledge concerning their method of manufacture was published in the medical press, but in spite of such precautions to be ethical, immediately the leaders of the medical profession in New York took exception to this action upon the part of your chairman and the

manufacturing house referred to. As both had gone into the arrangement in good faith, both now united in an attempt to solve the problem presented by the so-called "new remedy" business.

The "propaganda for reform" agreed upon included the following:

First.—A published platform declaring the policy of the propaganda, and including the objections urged by the profession against the new remedy business.

Second.—The advocacy of the establishment of a national bureau of materia medica, or board of control, under the central government at Washington, provided with laboratories for materia medica research, and including government experts employed in the various government departments dealing with medicinal drugs, chemicals, or preparations of the same, and also including the physicians in the Army, Navy, and U. S. Marine Hospital Service engaged in research work.

Third.—The investigation of the materia medica of the world by said government bureau to ascertain what products were being used by the various nations, peoples, and tribes, with the object of adding the same to the materia medica collection in the National Museum, and whenever any product was discovered appearing to be worthy of further research, the same to be investigated by the laboratory and its claims proved or disproved.

Fourth.—The organization of a National Pharmacologic Society, representative in character, including members of the medical and pharmaceutical professions, and manufacturers engaged in the pharmacal and chemical industries, also editors and publishers of medical journals, the special object of the association being to co-operate with the bureau or board of control.

Fifth.—The free publication of working bulletins by said bureau or board containing all available information concerning each product undergoing more complete investigation, the same to be sent to clinicians throughout the country for the therapeutic test of said products, in the form of properly prepared and standardized preparations, to be furnished by the government without charge.

Sixth.—The publication of a monthly journal, an annual report, and a complete compilation of the results of work done in book form.

Seventh.—The abolishment of commercial monopoly of materia medica products except in so far as limited monopolies may be obtained by the proper application of the patent and trade-mark laws.

Eighth.—The establishment by the manufacturers of Scientific Departments manned by persons skilled in the arts of medicine, pharmacy and chemistry, including physicians, pharmacists, chemists, physiologists, botanists, bacteriologists, etc., such departments to be professionally organized as a part of said pharmacologic society, and working in co-operation with the bureau or board of control.

Ninth.—The introduction into the Pharmacopœia of methods for standardizing galenicals, thus extending and making more practical the work of the revision committee.

The results of this propaganda have been far reaching. The Smithsonian Institute endorsed the plan for an investigation of the materia medica of the world under governmental auspices. It was also endorsed by the Surgeons General of the Army, Navy and U. S. Marine Hospital Service, also by the Alumni Associa-

tion of the Philadelphia College of Pharmacy. It was discussed by the Philadelphia County Medical Society and approved by H. C. Wood and other prominent men in the medical profession both in civil and official life. The American Medical Association memorialized Congress on the subject in 1891. The A. Ph. A. in a set of preambles and resolutions endorsed the policy mapped out by our Committee on National Legislation in 1896 in relation to the commercial control of materia medica products. This act was in accord with the Richmond resolution. The Journal of the American Medical Association editorially endorsed a modification of the bureau plan presented by your chairman in April, 1901. Several of the large manufacturing houses adopted the scientific department idea, and also adopted the working bulletin system under that or some other name. The U. S. Pharmacopœial Convention increased the scope of its standardization work by introducing standardized galenicals in 1890, and made further additions in 1900. In 1901 a national pharmacy company was incorporated in New Jersey and organized in San Francisco, and a national bureau of medicines and foods organized to support it. This plan was cordially approved by the leaders in pharmacy and medicine on the Pacific Coast, but afterwards abandoned to take part in an organization under the auspices of the A. M. A., and A. Ph. A. The joint committee reported favorably but the plan was defeated, only to rise again in another form as the A. M. A. Council on Pharmacy and Chemistry.

It is safe to assert that the combined manufacturing houses of the United States engaged in the pharmacal and pharmaco-chemical industries publish and distribute to the medical profession at least fifty tons of literature annually relating to their products. This probably represents two or three million or more separate working bulletins, pamphlets or circulars. The question is, are these publications disseminating truth or error? If truth, then the publication represents a work most beneficial and salutary. If error, then these houses are misleading the medical profession, exploiting the sick for gain, and are guilty of a heinous crime against humanity.

The object of the scientific department idea referred to in this report, with its working bulletin system for the distribution of scientific literature concerning the newer materia medica, the same to be published under the censorship of a bureau or board of control, representing the several interests involved, is in line with the professional society idea in which individuals contribute the results of their experience and observations for the benefit of the profession, and submit their contributions to the censorship of their peers, who censor the same in organic capacity. The literature of contributors to the professional societies, describing results obtained from original research, may be copyrighted, but the results of their investigations are freely given to the profession. Progress in the science and arts of medicine is thereby promoted because each member of the profession who does his duty uses the knowledge thus contributed and publishes the results of his observations also, thus verifying or disproving the findings of the original contributors.

The object of the patent law is to promote progress in science and useful arts. This object is now being defeated by the way our patent and trade-mark laws are being interpreted and applied in the protection of alleged materia medica inventions. As not over one-tenth of one percent of the alleged new

remedies commercially introduced during the past thirty years and protected by patents and so-called trade-marks have proved of sufficient merit to justify the experiments upon the sick entailed, it is evident that these laws have been misinterpreted and misapplied. Is it not about time that we as physicians and pharmacists enter our protest against such travesty of law? And in making this protest, could we make it more effectively than to adopt a plan for directing this great commercial propaganda, employed for creating a demand for these alleged new remedies, into proper educational channels for the circulating of accurate information concerning them, by establishing a censorship over the publication of this literature—a censorship voluntary and representative in character on the part of the manufacturers, and co-operative on the part of the medical and pharmaceutical professions?

Place the professions where they can properly co-operate by making the propaganda professional in character and there will be quick reciprocity on the part of professional men. But the professions cannot co-operate with a plan for using the professions and the public for selfish purposes.

Finally, the professional ideal of pharmacy includes autonomy on the part of the profession. Without autonomy there can be no profession of pharmacy. We have our professional schools, press and societies, but are lacking in the essential qualification necessary to gain for the vocation recognition as one of the liberal and learned professions, namely, autonomous censorship and control over the publication of literature relating to the introduction of new materia medica products to be used by the medical and pharmaceutical professions. Such autonomy is secured in the publication of information relating to the older materia medica by the Pharmacopœial Convention and its Committee on Revision. Why not establish a similar board of control for the censorship of literature relating to the newer materia medica?

From the above statement it will be seen that the question of patents and trade-marks as applied to materia medica products is entirely subsidiary and dependent upon questions of materia medica standardization, professional autonomy, and medical and pharmal education and license. Some of these questions are:

Who shall practice medicine and pharmacy, licensed practitioners duly qualified by education and license from a board of examiners, or unlicensed practitioners who have set up as manufacturers and are practicing at wholesale at long range and without diagnosis?

Who shall control the teaching of therapeutics as applied to the newer materia medica?

Who shall decide questions relating to the preparation and standardization of these products?

How shall the patent and trade-mark laws be so applied as to promote progress in materia medica science, advance the legitimate practice of the arts of pharmacy and drug therapeutics, and protect the public from the errors of dishonest commercial exploitation?

How shall charlatans and pretenders be prevented from availing themselves of the protection of these laws in carrying on a dishonest commercial business parading under the guise of scientific pharmacy and chemistry?

Is it not apparent then that we need some kind of bureau or board of control or society, representing the several interests concerned, in which the autonomy

of the medical and pharmaceutical professions can be vested in relation to the newer materia medica just as they are now vested in the U. S. P. Convention and its committee of revision in relation to the older materia medica—a bureau or board working in co-operation with the professions and manufacturers for the promotion of the common good and public welfare? Can the American Pharmaceutical Association take up the work and secure the aid of the manufacturers in establishing a home for the Association with proper laboratories and facilities? Ought the work to be assumed by the Pharmacopœial Convention at its next decennial meeting? Or would it be a better plan to have the work taken out of the hands of the professions and assumed by the Federal Government? Upon the answers to these and other questions relating to professional autonomy is dependent the answer to the patent and trade-mark question.

There seems to be so much misunderstanding in regard to the object of the "propaganda of reform" advocated so persistently and consistently since 1881, that your chairman feels it incumbent upon him to make this preliminary statement.

REPORT OF THE COMMITTEE ON PATENTS AND TRADE-MARKS.

The question of patents and trade-marks in its relation to medicine and pharmacy is far more complex and comprehensive than the superficial student realizes.

The physician and pharmacist have already been granted a monopoly of medicine and pharmacal practice. This grant was given in exchange for services of a highly altruistic character. There is no justification for either calling, except to the extent that the practitioner is able to prevent disease, relieve suffering, and heal the sick; and the function of the pharmacist is to prepare medicine for the physician to use, also to meet the demands of the public for medicine for self-medication so long as these demands are within reason.

Why should the government grant to the ignorant and venal manufacturers and dealers in drugs the right to the exclusive sale of certain materia medica products on the ground that they are "new and useful inventions and discoveries" in the treatment of the sick, and thereby create and foster great medical monopolies conducted in an unfair competition with the medical and pharmaceutical professions, and in a manner inimical to the public health?

In reply to this question we are constantly confronted with the answer: "What are you going to do about it?" If the medical and pharmaceutical professions would get together and ask Congress to do something about it, it would soon be done. As stated by one of our prominent senators: "Congress is always ready to listen to the advice of the learned professions, especially in regard to legislation concerning the practice of these professions. That is what Congress is here for. But we as legislators can do nothing until you, as professional men, agree as to what you want done."

Contrary to the general impression, the inventor does not possess a natural right to the exclusive use of his invention. The right, when it exists at all, is a creature of statute and grant, and subject to the conditions imposed by the

statute and the grants. The government is under no obligations to grant inventors the exclusive right to their inventions or discoveries. The object of giving such grants is to promote progress in science and useful arts.

Is the patent system now in vogue, as applied to medicine and pharmacy, promoting progress in the science of *materia medica* and in the arts of pharmacy and drug therapeutics? When it is considered that thousands of alleged new remedies have been introduced during the last thirty years and not one-tenth of one per cent of them has proved of any special therapeutic value; when it is considered that this introduction represents hundreds of thousands of useless experiments upon the sick by physicians in private and hospital practice, and many times that number by the self-medicating public, it is evident that the question may be properly answered in the negative.

Why should *materia medica* products be patented at all? Apparently the only persons who have profited from these patent grants have been the manufacturers of the patented products and the medical journals accepting their advertisements. It is well known that, as a rule, these advertisements are misleading. In no line of business is the principle underlying the motto "*caveat emptor*," (the purchaser beware) been worked to such an extent as in the introduction of alleged new remedies by advertising.

The system has debauched the medical and pharmaceutical press, has seriously injured medical and pharmacal practice, has thrown pharmacy and medicine into disrepute with the public, and has proved a serious detriment to the public health. The medical press itself would be far better off under a system of open competition between manufacturers of new *materia medica* products. Take diphtheria antitoxin for example, it is an open product, consequently there are a number of manufacturers each contributing to the advertising columns of the medical journals. Adrenalin, on the contrary, is a closed product controlled by a product patent and for seventeen years there can be but one brand of it and therefore only one advertiser. Why should we sacrifice the professions of medicine and pharmacy, and the public health for the advantage of the manufacturers of questionable therapeutic novelties, and medical journals subsisting upon their advertising patronage? Why should not the system be wiped out altogether?

Most foreign countries prohibit the patenting of *materia medica* products, but as a rule permit the patenting of processes and machinery for their manufacture. Germany has been one of the leading countries in this respect. But now Germany will probably modify its patent law to be in line with the United States patent law, so that all of the arguments based upon the example of Germany will, in that event, fall to the ground.

Fortunately the advertising fraternity are waking up to the menace threatening the advertising business due to the misleading character of advertising in general. "Printer's Ink," the well-known organ of the advertising fraternity, is advocating a Bill for the prevention of misleading advertisements. This bill, or legislation founded thereon has already been enacted in several of the states, and it is hoped that it will be universally adopted by all of the states of this Union.

The Shirley Bill, recently passed by Congress, has for its object the suppres-

sion of misleading advertising in so far as it relates to foods and drugs in interstate commerce. If these laws are properly enforced the result will be to make the advertising of medicines as now carried on by some manufacturing houses exceedingly unprofitable, both as to reputation and financial returns.

One of the most important points in regard to the patenting of materia medica products for the protection of the commercial introduction by advertising is this, namely: materia medica products cannot be properly introduced by advertising. The only way they can be introduced in such a manner as to promote progress in the science of materia medica and the useful arts of pharmacy and drug therapeutics is by the co-operative investigation of experts in the various branches of knowledge upon which materia medica science depends.

The services of experts in pharmacognosy, pharmacy, pharmacodynamics, therapy dynamics, and pharmacotherapy are required for their introduction. It is necessary to develop a knowledge of their source or genesis, physical and chemical properties, methods of selection, preparation, reservation, compounding and dispensing, and also a knowledge of their comparative value in relation to the older products of the materia medica used for similar purposes. This in turn requires co-operation between the laboratories of the universities, government institutions and manufacturing houses engaged in the legitimate pharmaceutical and chemical industries. Therapeutic verdicts concerning new medicinal products can only be obtained by the co-operative investigations of many competent observers extending over years of time, and conducted under conditions of environment sufficiently differing as to climate and nationality so as to eliminate the personal equation. It is manifest that this is an altruistic work in which all co-operate for the common good, and that the results of the co-operative work belong to the professions of medicine and pharmacy, and to the public, and do not belong to individuals for their exclusive use. Why should we permit individuals, firms and corporations to monopolize common property for personal gain?

Taking the above facts into consideration, it would seem that the American Pharmaceutical Association should consider the subject of materia medica monopoly from the point of view of the public, and not from the narrow and selfish viewpoint of individuals. As before mentioned, pharmacy and medicine have lost caste because of the narrowness and selfishness of the professions themselves, and the only way to restore public confidence in physicians, pharmacists, and medicines is for the professions to unite with the legitimate pharmaceutical and chemical laboratories in an appeal to Congress for the proper legislation on this subject.

Mr. Bodemann, member of our Committee, calls attention to the fact that our present patent law as applied to materia medica, not only "does *not* encourage scientific research, but absolutely forbids it; that is to say, if you find a way to make a certain product and then patent it, I am not allowed to make the same product even though I may have discovered a better way for so doing."

This undoubtedly is true, and your chairman has since 1889 continually called attention to the fact in his reports, in literature, and in his reports as Chairman of this Committee, and Chairman of a Special Committee on National Legislation.

What shall be the character of this legislation? This is an important question, and apparently it will be very difficult to harmonize the conflicting interests involved. Several excellent suggestions have been made, one of the latest of which emanates from Joseph England, Secretary of Council of the American Pharmaceutical Association, and a member of the Committee on Patents and Trademarks. Mr. England suggested at the recent meeting of the Pennsylvania State Pharmaceutical Association, after listening to the report of the Committee on Patents and Trademarks, that said Association should appeal to Congress for the modification of the patent law, giving the Commissioner of Patents the right and authority to suspend or abrogate a product patent, or any materia medica product if an inventor of an improved process for its preparation shall apply for a patent therefor.

The effect of this plan would be quite similar to the effect of the clause in the German patent law which places the burden of proof in cases of infringement of process patents upon the inventor of the alleged improvement, forcing him to show that his process is in fact an improvement upon the original process for the preparation of the drug in question.

The question of trademarks is largely a question of interpretation of law. Trademarks used to distinguish between brands of well-known articles of commerce, each provided with a name of its own for proper classification and use in medical and pharmaceutical literature, is to be strongly commended. But the scheme for creating a monopoly by registering as a trademark a coined name and afterwards using it, not as a brand mark, but as the name of the article itself, is to be strongly condemned. Any person has a perfect right to make and sell any article of commerce provided he knows how to do so, also to deal in it under its currently used name. If it were true that the first commercial introducer of an invention acquires thereby a proprietary right in the product, or in the name of the product, there would be no necessity of a patent law granting him the right to the exclusive use of his invention, for he would already possess such a right by nature, and the laws would be so formulated as to protect him in his natural right. Moreover, the right to the exclusive use of the invention would be perpetual in character, and in its enforcement powerful monopolies would be created, unlimited in time and possessing privileges far more influential than any granted by the patent law. If the world had started in this way every art would now be subjected to monopoly and inventors would own the world; the rest of us would be their slaves.

The trademark law does not recognize any such scheme as the one described. In fact, the trademark law does not attempt to define what is meant by a trademark. This has caused much misunderstanding on the part of the Patent Office and the courts. Not many years ago one of the leading members of the Illinois Bar, in defending a case before the Supreme Court of the United States, asked the court for a definition of the trademark. He said: "I have searched the literature on this subject for a definition and found none," and he requested the court "for the sake of the Bar, the Bench, and the commercial interests of the country to define the word, trademark." The court did not respond to this appeal.

Fortunately many of the recent decisions of the Supreme Court have cleared up

mooted points in relation to the patent and trademark systems. In 1895 the Supreme Court decided that the names of patented products could not hold as trademarks after the patents expire. This was decided in the Singer Sewing Machine case. More recently the Supreme Court decided that the patentee has no right to dictate as to what article should be used in connection with his patented article. This was decided in the Mimeograph case, and referred to in our report last year. Still more recently the Supreme Court decided that the patentee has no right to dictate the price at which his patented product shall be sold by the purchasers. This was decided in the Sanatogen case, Bauer et Cie, of Berlin, Germany, co-partners, being the signers of Letters Patent of the United States, dated April 5th, 1898, No. 601995, covering a certain water-soluble albuminoid known as "Sanatogen."

Finally as to the names of unpatented products, there has been a large number of decisions to the effect that the name of an article does not belong to the person who christens it, but to the article itself as a common noun. Any person has a right to make an article, has a right to manufacture and deal in it under its currently used name. It is to be hoped that this question will come up before the Supreme Court in a clearly cut case when the court can decide this question once and for all.

Another point in this connection is that relating to the defense of trademarks. The courts require that persons desiring to defend their trademarks shall come into court "with clean hands." This they cannot do when they have been guilty of misstatements on labels or in literature relating to the products in question.

The Supreme Court of the United States in the case of Worden versus California Fig Syrup Company, threw the case out of court because the claims made by the manufacturers of the original product were not substantiated by the facts, and although the competing manufacturer used labels so closely imitating the original as to deceive the public, yet the defendant had no status in court and lost the case.

It is our desire as a committee to impress upon the profession the necessity of conforming our methods as pharmacists and manufacturers of materia medica products with professional and scientific requirements, so that we may receive the endorsement and co-operation of the medical profession. While it is true that a large number of physicians are utterly indifferent on the subject, and do not care what course is pursued by the pharmaceutical profession and manufacturers, yet, medical scientists are quick to draw the line between the altruistic work of the medical profession and the commercial methods of those engaged in the materia-medica-supply business. One of the reasons why the medical profession is indifferent to the course pursued by pharmacists and manufacturers is because they consider us outside the pale of professional life, and therefore it is a matter of indifference to them what course we pursue. Let the physician patent his therapeutic inventions or surgical instruments and he is ostracized by the fraternity because he has violated the principles of fraternity and professionalism upon which medical practice is founded. But it is not expected by them that persons engaged in commerce will conduct their vocations in harmony with the beneficence and liberality which is supposed to characterize the medical

profession. If we wish to secure professional recognition we can only do so by becoming professional men.

The medical profession does not consider it contrary to professional usages for medical authors to associate themselves with publishing houses for the publication of copyrighted books, and it is probably true that there would be no objections to physicians associating themselves with pharmacists and manufacturers for the production of materia medica products protected by process patents and brand names provided the products themselves and their proper distinction or currently used names are left free for introduction to science by the way of the educational channels of the profession. But we cannot expect endorsement for any plan whereby the products themselves and their names are commercially controlled and the educational machinery of the profession converted into a great advertising bureau for the exploitation of alleged new remedies by advertising.

To Recapitulate: 1st. That products and names of products should be free so that the products themselves as to their course or genesis, physical and chemical properties, methods of preparation, preservation, compounding and dispensing, and methods of applying them in the treatment of the sick may be impartially discussed in the medical journals, societies and colleges without forcing those who discuss them to advertise any one's special make of products. This will protect the educational machinery of medicine and pharmacy and secure the co-operation of the medical and pharmaceutical professions in the introduction of the products to science, thereby popularizing them without expense to the manufacturers.

2nd. Brands of products and the names of the brands should be commercially controlled by the manufacturer; that the advertising should be directed to creating a demand for the brands; that the manufacturers or commercial introducers who spend their good money in advertising may be protected in their investments.

3rd. Advertisers should be forced to tell the truth in their advertising and not permitted to create a fictitious demand by misleading statements, thus injuring their competitors by acts of unfair competition in trade.

In conclusion, we wish to again call attention to the suggestions several times made in previous reports of this committee, and the Committee on National Legislation, regarding the advisability of establishing some kind of Board of Control representing the medical and pharmaceutical professions and manufacturers engaged in the legitimate pharmacal and chemical industries, the same to work in co-operation with the universities, medical schools and colleges, government laboratories, and Patent Office for the proper introduction of materia medica products to science and brands of the same to commerce, and the proper application of the patent and trademark laws to materia medica commerce.

One of the first subjects for such a Board of Control to take up would be that of materia medica nomenclature for the purpose of making rules to be adopted by the manufacturers who affiliate themselves with the Board. The rule in regard to nomenclature should be one to protect the manufacturers by having the Board coin generic names for each product manufactured under the censorship of the Board, thus protecting the commercial interests of the manufacturers and

introducers on the one hand, and materia medica science and the practitioners of the medical and pharmacial arts on the other.

The suggestions of Mr. Frank H. Freericks, of our committee, should also be considered. He recommends a conference between representatives from the different pharmaceutical associations similar to the National Drug Trade Conference which has been held with reference to Federal narcotic legislation. In order to bring such a conference about, or to have the matter considered by the existing National Drug Trade Conference, it was suggested by Mr. Freericks that the A. Ph. A. upon the recommendation of this committee, vote on the subject.

The special subjects offered for discussion are as follows:

1st. The suggestion that the A. Ph. A. memorialize Congress by asking for a repeal of that portion of the patent law which permits the patenting of materia medica products, or substances used in the treatment of the sick.

2nd. The compromise suggested by Mr. England regarding the suspension of product patents by the Commissioner when improved processes are devised for their production.

3rd. The advisability of establishing some kind of a Board of Control representing the medical and pharmaceutical professions, manufacturers, medical and pharmaceutical colleges, the press, and government laboratories for the adoption of proper rules in relation to the introduction of materia medica products to science and brands of the same to commerce; said Board of Control to work in co-operation with the Patent Office in an advisory capacity.

4th. An expression of the Association in regard to the proper application of the patent and trademark laws in relation to materia medica inventions.

5th. The suggestion of Mr. Freericks in regard to a special conference or consideration by the existing National Drug Trade Conference.

Respectfully submitted by the Committee:

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J. W. ENGLAND,
F. E. STEWART, M. D., Chairman.