SECTION ON EDUCATION AND LEGISLATION, AMERICAN PHARMACEUTICAL ASSOCIATION

MINUTES OF THE FIRST SESSION.*

CHAIRMAN FRANK H. FREERICKS: The next subject of the program is the report of the Committee on Patents and Trade-marks and Dr. F. E. Stewart, Chairman of that Committee, will give us the report.

REPORT OF COMMITTEE ON PATENTS AND TRADE-MARKS.

During the past year so much of importance has developed in regard to patents and trade-marks that the limits of one report will permit only brief mention of the same.

"PERPETUATING PATENTS BY TRADE NAMES."

Under the above caption the *Journal of the American Medical Association*, in its August 12, 1916, edition, editorially comments on the attempt of the Bayer Company, American representative of the Farbenfabriken of Elberfeld Company, to perpetuate "the patent on aspirin (acetylsalicylic acid)" by an extensive advertising propaganda in the newspapers, the purpose being "to identify the product with the so-called trade-mark (aspirin) and to this extent hamper competition after the expiration of the patent." The editor says: "Not content with seventeen years' monopoly the aspirin people are attempting to retain a hold on the market *in perpetuo* by associating the name of the company with the trade name 'aspirin.' There can be no better time than the present, therefore, for the medical profession to substitute, for the nondescriptive name 'aspirin,' the descriptive and correct name 'acetylsalicylic acid.'"

In this connection it is interesting to revert to the fact that during the time that Mr. Arthur Greeley occupied the position of chief examiner, your committee met by invitation at the U. S. Patent Office to discuss the subject of patents and trade-marks and their relation to pharmacy. Referring to the attempts to perpetuate monopolies of patented products after the expiration of patents by alleged trade-marks, Mr. Greeley said: "When Uncle Sam finds that patentees are using their alleged trade-marks as a string to pull back patents after their patents expire he will soon put an end to the practice."

The intent of the patent law is that the public, after patents expire, should have the right to compete with the patentees on equal terms, a thing manifestly impossible if the patentees are permitted to control the currently used names of these products after the patents expire.

This is made very clear by the discussion of the U. S. Supreme Court in the Singer Sewing Machine case (1895) which reads as follows:

"The result then, of the American, the English, and the French doctrine universally upheld is this, that, where, during the life of a monopoly created by a patent, a name, whether it be arbitrary or be that of the inventor, has become by his consent, either express or tacit, the identifying and generic name of the thing patented, this name passes to the public with the cessation of the monopoly which the patent created. When another avails himself of this public dedication to make the machine and use the generic designation, he can do so in all forms with the fullest liberty, by affixing such name to the machines, by referring to it in advertisements and by other means, subject, however, to the condition that the name

* Papers with discussion of the subjects will be printed apart from the minutes, hence only the title of the paper will be mentioned in the minutes. As far as possible reports of committees will be included in the minutes. These minutes are continued from p. 1093, October issue.

must be so used as not to deprive others of their rights or to deceive the public, and therefore that the name must be accompanied with such indications that the thing manufactured is the work of the one making it, as will unmistakably inform the public of that fact."

ARE NAMES OF SECRET MEDICINES TRADE-MARKS?

The question whether or not the names of secret medicines are trade-marks is again attracting attention, owing to its bearing upon the proposed "Goldwater Ordinance," now before the courts in the City of New York. According to *Standard Remedies* for December, 1915, "the courts will not protect the manufacturer of a proprietary article against the use of the name of that article by another who 'discovers and knows' the secret of composition." The only protection the proprietary medicine manufacturer can expect from the courts in this connection relates to the question of fraud. The courts "will protect the original owner of the name against such unfair competition as might result from simulation of the package, or against any affirmative act calculated to pass off the goods as and for the previously known goods."

"In other words, Mr. Smith has a preparation known by a trade name and manufactured under a secret formula or process. Jones, his competitor, 'discovers and knows' the secret of composition and can make the identical article made by Smith and call it by a trade name originated by Smith, and the courts will not protect Smith against unfair competition resulting from an 'affirmative act' calculated to 'pass off the goods as and for the previously known goods.' Jones may not dress his goods in imitation of Smith's and must even add some distinguishing statement showing that the article is of his own production, and is not the production of Smith, but the main point is, that Jones may, if he can duplicate the product exactly, call it by the trade name devised by Smith, by which name the trade is accustomed to call for it and to know it."

Standard Remedies, a journal "published in the interests of the Manufacturers and Jobbers of Proprietary Medicines, Cosmetics, etc.," suggests that manufacturers of proprietary goods do not comply with the requirements of the New York Board of Health, in regard to publishing the formulas of proprietary articles on labels or registering them with the Board "lest they jeopardize their trade names by voluntary filing any information with the New York Board, whose right to demand the information may not exist."

However, this interpretation of the trade-mark law does not agree with the interpretation given to it by some of the law firms specializing in this department. For the purpose of calling your attention to the system which those law firms and their clients are attempting to build upon the trade-mark law, your Chairman addressed certain questions to one of the firms referred to, and received the following answer:

"In the case of the quinine suggestion which you make, we have this to say:

"If your company had first extracted the medicinal element known as quinine, and if you had coined the word quinine and applied it to this medicinal element, you would have had a right to call it a trade-mark and not a generic name. It would have been your perpetual property, and you could have prevented any one else from selling the same thing under the name quinine."

Under this interpretation of the patent and trade-mark laws, the discoverers of all of the alkaloids, glucosides and other active plant principles, the discoverers of alcohol, chloroform and chloral, in fact, the discoverers of every chemical substance could have patented the processes for making them and registered the names by which their products were currently known, as trade-marks; thus, by means of patents they would have been able to monopolize their manufacture and sale for seventeen years, and perpetuated the monopolies indefinitely by the exclusive commercial control of these names after the expiration of the patents. How can pharmacopœias, text-books, pharmaceutical and medical education be maintained under such a system as that? Yet, that is the system in one form or another which the so-called proprietary medicine trade, including the manufacturers engaged in the synthetic drug industry, is asking us to endorse.

The question again arises, what are we going to do about it? Many plans have been suggested, and there is much difference of opinion on the subject, even in your committee, the members of which have given it special study. Your committee last year called your

attention to the proposed revision of the patent and trade-mark laws devised by the committee on patent law revision of the Philadelphia Merchants' and Manufacturers' Association, adopted by that body and placed before the House Committee on Patents of the U. S. Congress at Washington in connection with the hearings on the Paige Bill. Most of the provisions of the proposed revision are included in the resolutions proposed by the Pennsylvania Pharmaceutical Association at its last annual meeting to show the attitude of that body on the U. S. patent laws. These resolutions, however, do not include the suggestion made by the committee appointed by the Merchants' and Manufacturers' Association in regard to trade-marks, namely: that an addition shall be made to Section 19 of the trade-mark law relating to what may be registered as trade-marks which shall include also, a definite statement as to what shall not be registered, including the wording of Circular No. 19, issued by the Librarian of Congress, stating that names of medicines, etc., are not subject to copyright. Section 19 of the trade-mark law would then read as follows:

(*a*) No trade-mark will be registered for a new article of manufacture, chemical substance, medicine or food, unless a distinctive name shall accompany the application, for the use of those who would compete in manufacturing and vending the same article and also for the use of the public in purchasing the same.

(*b*) No trade-mark will be registered for names of articles of manufacture, names of games or puzzles, names of substances, names of products or names of medicines.

The following resolutions were passed by the Pennsylvania Pharmaceutical Association at its last annual meeting:

RESOLUTIONS PASSED BY THE PENNSYLVANIA PHARMACEUTICAL ASSOCIATION TO SHOW ATTITUDE ON U. S. PATENT LAWS.

"*Whereas,* The pharmacists of the United States, owing to the European War, have been deprived of many of the chemical products used in medicine, and

"*Whereas,* The American public is obliged to pay extravagantly high and unjustly extortionate prices for the synthetic drugs and medicines they are obliged to buy from foreign holders of patents on medicinal products, and

"*Whereas,* The United States patent laws in granting product-patents instead of process-patents to foreign manufacturers are hindering instead of 'promoting science and useful arts' for which they are instituted, and

"*Whereas,* The synthetic chemical industry is primarily and basically dependent upon the dye-making industry, and as the dye-stuff industry cannot be successfully carried on without ample tariff protection and the liberation of the infant American organic chemical industry from the bondage of American patent laws, which favor priority and deter invention and progress and which accord American protection to foreigners which their native countries deny them, and

"*Whereas,* The present United States patent laws favor the creation of monopolies in this country by the citizens of Germany, France, Austria-Hungary, Italy, Japan and the Argentine Republic, which is denied the citizens of those countries by their own laws, and

"*Whereas,* A patent on products creates a monopoly not only on the product itself, but on all subsequent improvements in process for the making of the same, thereby destroying the stimulus for improvements and discovery through research, and

"*Whereas,* The State of Pennsylvania, rich in minerals of both inorganic and organic nature, depends in a very great measure for its industrial development upon a properly ordered and organized chemical industry—Be it therefore

"*Resolved,* That the Pennsylvania State Pharmaceutical Association go on record in requesting the Congressmen and Senators from Pennsylvania to strongly support the pending Tariff Bill, affording protection to American industries, and

"*Be it Resolved,* That a Bill be prepared for introduction in Congress through a Pennsylvania Congressman asking a change in the United States patent laws discontinuing the patenting of products but recognizing only applications for patents on processes, and, finally,

"*Be it Resolved,* That these resolutions be printed in the Proceedings and that a copy of these be forwarded to the President of the United States, the members of the President's

Cabinet, the officials of the United States Patent Office, the Senators and Congressmen from Pennsylvania, the officers of the United States Chamber of Commerce, and every State business men's and labor organization in Pennsylvania, and also to the journals of the American Medical Association, the American Chemical Society, the *Saturday Evening Post*, the *Collier's Weekly*, and to the Hon. Congressman Paige and Hill from Connecticut."

The following resolution is suggested by Professor Stanislaus:

"*Be it Resolved*, That whenever any chemical, mechanical or medicinal product is protected by a patent issued by the U. S. Government to a foreigner, and that, after the product or appliance is introduced or popularized among the American people, but its supply to the American public is withheld, causing a shortage of that product and inconvenience and suffering therefore—that such patent be cancelled and its provisions nullified once for all time."

Your committee suggests that its report be referred to the Council for consideration, and that the Council be empowered to formulate a revision of the patent and trade-mark laws incorporating provisions suitable for promoting the science and arts of pharmacy, and protecting the public, the same to be published in the JOURNAL OF THE AMERICAN PHARMACEUTICAL ASSOCIATION for discussion, adoption by the Council, and presentation to Congress at an early date.

Before closing your committee calls attention to the following important action of the American Medical Association in regard to patents, taken at its last annual meeting:

"In 1914, the House of Delegates passed a resolution authorizing the Board of Trustees to accept, at their discretion, patents for medical and surgical instruments and appliances, as trustees, for the benefit of the profession and the public; provided that neither the American Medical Association nor the patentee shall receive remuneration from these patents. In order to make possible the desire of the House a substitute motion was offered and adopted at the last annual meeting (June 24, 1916) which reads as follows:

"*Resolved*, That the Board of Trustees of the American Medical Association may accept, at their discretion, to hold, to control and to manage, as trustees for the benefit of the people and the protection of the medical profession, such patents on chemicals, remedial or diagnostic substances, medical or surgical instruments or appliances, or anything whatsoever that may be used in the treatment of disease or infirmity and for which a patent may be issued, as the patentee may desire to convey to the American Medical Association for the public protection and benefit; provided that the patentee shall surrender all claims to remuneration from the royalties or otherwise on such patent or patents to the Board of Trustees of the American Medical Association, which Board of Trustees shall not exact from the manufacturer or producer under any such patent or patents, any royalty or other pecuniary compensation or return therefrom, unless, in the judgment of the Board of Trustees, the exaction of such royalty shall appear to be wise and just and for the better protection of the public or the medical profession."

It has long been held by the medical profession that persons interested in the sale of medicinal products, especially in relation to commercially controlled products, cannot occupy a judicial position toward such products, and therefore that what they say concerning them must be received *cum grano salis*. In other words, physicians engaged in the manufacture and sale of medicinal products place themselves outside of the professional pale, and therefore cannot be recognized as professional men. The above resolution recognizes this principle. This doctrine excludes pharmacy from recognition as a profession, and carried to its logical conclusion, would also exclude editors of those medical journals who accept advertisements relating to surgical instruments and therapeutic agents. It would likewise place the colleges of pharmacy in a position of teaching false ideals. It must be admitted that there can be no two codes of ethics in relation to such matters,—one governing the medical profession, and the other governing the pharmaceutical profession, for medicine and pharmacy are parts of the same science, mutually dependent as professions.

We hold that the position of the medical profession in regard to this matter is incorrect, but it must be admitted that the proprietary system with its secrecy and claimed ownership of the names of medicines is incompatible with the professional ideal of the medical profession,

and the same is true in regard to the patenting of materia medica products, except, perhaps, in so far as the patents relating to processes and machinery for manufacture are concerned.

Respectfully submitted,

F. E. STEWART, *Chairman.*

Members of Committee on Patents and Trade-marks:

F. E. STEWART, *Chairman.*
S. L. HILTON.
W. BODEMANN.
F. H. FREERICKS.
J. W. ENGLAND.

THE CHAIRMAN: I will entertain a motion to receive the report and have it take the usual course.

Moved by L. E. Sayre, seconded by Wm. C. Anderson, that the report be approved and that it take the usual course.

Motion carried.

THE CHAIRMAN: The report of the Committee contained a recommendation, that the matter of the revision of our patent and trade-mark laws be referred to Council and that the Council be requested to draft suitable laws. Shall it be referred to Council? Shall the Council be requested to draft or have drafted such suitable patent and trade-mark laws?

WM. C. ANDERSON: It appears to me that it would be much better to place this work in the hands of the Committee on Patents and Trade-marks to draft the necessary laws. They probably are in closer touch with this subject than the Council. Therefore, I would move that this particular recommendation with reference to taking up the work of preparing these laws be placed in the hands of our incoming Committee on Patents and Trade-marks.

Seconded by L. E. Sayre.

THE CHAIRMAN: Do I understand that this motion is intended as a substitute for the recommendation from the Committee—that it be referred to the Council? The Chair will so entertain the motion—as a substitute. It is suggested that the Committee on Patents and Trade-marks undertake to draft suitable laws.

F. E. STEWART: I am perfectly willing to accept that substitute. My only idea in putting it in the report was that I felt that the Chairman was so prejudiced in favor of what he thinks the proper thing to do, that he does not want to force the Association to accept what he has to say. I saw several of our friends who have been down in Washington and know what we are up against. We are up against powerful opposition on the part of manufacturers of chemical substances. These are men whom I do not wish to criticise, men who are as earnest and well-meaning as we are. It is merely a difference of opinion. I think, therefore, that we will have to come to the point where there will be some compromise, all sides will be heard and we hope whatever is done will be of such nature as to protect the public, pharmacy and medicine, the science of medicine, etc. That is what we are here for and that is what we are trying to do.

I have had this up for several years, as you know. I have conferred with President McKinley; the Judge of the Court of Errors, of New Jersey; Bates, of New York; Daniels, of Baltimore; the most eminent patent lawyers in the country, and I speak from the knowledge gained on this Committee for so many years.

THE CHAIRMAN: It seems to me that this substitute motion is really correct in every respect, because the Committee is existing for the very purpose of doing such things.

I want to accept this opportunity, as a member of the Committee, to say that the report as made, possibly, carries a suggestion that it—that is, the Committee—advises some change in the patent and trade-mark laws which would prevent the use, and the exclusive use, of coined names by a manufacturer of proprietaries or any other article; and, insofar as the report may convey that impression, I, as a member of the Committee, want to say that I do not agree with that tendency of the report.

I believe it a duty to voice my sentiments with reference to that at this time, that the proprietor of any article of which he alone knows, or originally knew alone, the formula and method of manufacture, should have the right to coin a name and should have the exclusive right for all time thereafter to use that name. I want to go on record as so expressing my views as a member of the Committee.

L. E. SAYRE: That is a very important point, and the Chairman of this Section requested that in my report on Drug Reform I should discuss this point.

(Substitute motion carried.)

THE CHAIRMAN: The next report is that of the Committee on Drug Reform. Professor Sayre is the chairman of that Committee.

REPORT OF THE COMMITTEE ON DRUG REFORM.

Your Committee on Drug Reform, which has grown by official authorization into what may be termed a standing committee, or its equivalent, begs leave to report that during the past year some progress has been made in one direction especially, which may lead to favorable results. Your Chairman, who is an associate member of the Kansas Board of Health, was asked by that Board to make a report to that body as to the present status of "patent medicines." This action by the Board was made in order to confer with your Chairman as regards any action the Board might take with regard to the control of such agents as might be fraudulent, those that would be in violation of the provisions of the Shirley Act and those that might be sold in violation of the antinarcotic law, etc. Your Chairman made this report to the Kansas Board. In it he referred to the work of the American Pharmaceutical Association relating to the subject, particularly that of the Commission on Proprietary Medicines, to the action in New York City, to the Canadian law relating to proprietary medicines, to the British Parliamentary Committee Report relating to the whole question of secret medicines and proprietary articles and mail-order medicines, to the patent medicine question, as dealt with in the American Pharmaceutical Association's report referred to and to the voluminous literature relating to this whole subject of which, it was stated, there was enough to fill a good-sized library.

It is gratifying to state that this report of your Chairman was cordially received and that it resulted in the passage of a motion by the Board of Health that a committee be appointed, representing the Board of Health, to confer with the Kansas Pharmaceutical Association, asking that body to appoint a committee to confer with the Board of Health to consider the question of proper regulation of the sale of patent medicines, such as would be in line with public welfare and incidentally helpful to both the professions of pharmacy and medicine. The Kansas Pharmaceutical Association appointed Mr. Floyd Tilford, of Wichita, chairman, Mr. A. E. Topping, Overbrook, and your Chairman as their conference committee and empowered them to act for the state association. The committee attended the last meeting of the Board of Health in Topeka, Kansas, June 2, 1916, and as a result of the action of the Kansas Pharmaceutical Association and as a further step for work, after hearing the report of the above committee the Board of Health passed a resolution that a committee of three, representing the Board, should be appointed to confer with the pharmaceutical committee with a view of devising plans for further procedure in meeting the questions under consideration.

This movement to coöperate is gratifying. It is, as stated by one of the members of the Board of Health, the first attempt made at coöperation between pharmacy and medicine by their organization in the Middle West. Unless such coöperation is established there is likely to be a growing misunderstanding between the two professions, becoming still deeper than now obtains. This need of coöperation is emphasized by the attitude and language of not only pharmacists and many physicians but by many public men who are equally concerned in public welfare. As to the pharmacist, he feels keenly the attitude which groups of physicians are seemingly taking in assuming that they are the arbiters of all that pertains to medicine, pharmacy and health in general, under the guise of advancing medical science and public good. I am only reiterating what pharmacists and some medical men high in the profession say, that medical men cannot, with confidence, pass upon every pharmacological subject, neither from training nor experience. This is particularly true of the practising physician who cannot qualify as an experimental pharmacologist. The pharmacologist, moreover, must modify his conclusions by the experience of the clinician. The business of the expert pharmacist is to correlate the experience and findings of the expert physician and clinician and, in this capacity, his judgment must be taken into account in rendering a final decision. To say that medical men can qualify both as experts in diagnosis and in the minutiæ of the preparations and therapeutic action of drugs seems rather inclusive and monopolizing. I am sure that the thoughtful physician does not assume the attitude that pharmacists are incapable of coöperation with his profession.

I am quoting the pharmacist who makes a claim for fairness when I say he feels that pharmacy does not stand to medicine as servant to master, but as a collaborator and colleague. His profession has its mission and its function as clearly defined as medicine itself. He insists, therefore, that when matters in which it is directly concerned that it be consulted and be given due recognition.

I am voicing a sentiment of more than a small group of physicians and pharmacists when I say: It is felt that there is a tendency on the part of a group of medical men to ignore all other skilful scientists and to pass final judgment by themselves. A situation of this kind, it is said, cannot continue. The physician should accept his therapeutics even from other source than one. Interpretations cannot be made by the physician only. It is wrong for any member of the profession of medicine to control and monopolize drug regulation or be a law unto himself as to the quality of drugs and preparations he dispenses, ignoring standards under the plea that *his* particular *clinical requirements* are satisfied. The dispensing doctors' offices in Kansas are no longer immune from drug inspection, but there are those who take the stand above stated, defying the application of the pure drug section of the law because, as one prominent medical official stated, "No physician can be held to such law, as he *does not sell* the products he buys and gives to his patients."

Many prominent pharmacists and some medical men admit that there is a place for some of the so-called patent medicines as household remedies. If the formula is clearly printed and if excessive statements as to curative properties are not made, they ask, why should they be prohibited by medical legislation? Naturally it seems to the pharmacist that there is entirely too much of the feeling of paternalism on the part of the doctors which leads to monopoly.

There has been, of late, too great a tendency on the part of medical men and medical organizations to monopolize a host of subjects, from engineering to sociology, not directly concerned with the routine practice of medicine. This has been done, and legislation has been secured under the guise of promoting the so-called public health. It is felt that this contract is too large an undertaking for any one set of men. It tacitly assumes a superiority which is not warranted by facts. It is claimed that because of this condition there must be a reaction and a sane and healthy reaction between the two professions. It is hoped that the relation which has been entered upon in Kansas may become firmly established and may continue to spread to the mutual benefit of pharmacists and doctors, taking their places as mutual collaborators in the sanitary science and in all departments relating to public welfare. These are words, in substance, not of a pharmacist, but of a medical man devoting his time to medical science.

There is no question but that the prejudice and condition referred to applies to a faction only and not to the whole profession of medicine, but there should be no occasion

for its existence at all. On the higher planes of professional work, pharmacists and the physicians have no difficulty in coöperating. When the lower levels of the two professions are reached we find more pronounced disturbing elements and growing prejudices. If state boards of pharmacy and medicine, state pharmaceutical and medical associations, and the national associations could bring about greater coöperation these prejudices and elements of discord would entirely disappear. Let it be emphasized again that the foregoing is a reiteration of what the writer hears from pharmacists and some physicians.

In the execution of the Shirley Act where many delicate questions must be settled, it is the opinion of the writer that physicians of proven ability, knowledge and experience may certainly be able to testify as to the merits of a given drug or preparation. But, acting on this theory in the administration of a law, which involves the question of merit of remedial agents, it is a question in his mind if it would not be fair to adopt these decisions of physicians with some sort of ratification by a jury of physicians and pharmacists, of proven ability, knowledge and experience in their departments of knowledge. This procedure would at least lead to harmony and more progress in the work of correcting evils which the law aims to remove. It would stimulate research in the right direction on the part of the pharmacist; stimulate him along broader lines of investigation and in every way be helpful in the direction of public good.

This movement on the part of the Kansas State Board of Health, your Chairman considers, is one of the best steps which it could possibly have taken in the direction it aims to work, namely, a direction toward which there will be coöperation rather than antagonism from a well-rooted prejudice. The general public, too, will, I am sure, welcome this coöperation. It is for public interest, after all, that these things are done.

In passing your Chairman wishes to say that: In provision 8 of the Modern Pharmacy Laws to be proposed for this association's consideration—a provision which recognizes the advisability of pharmaceutical and medical authorities coöperating in the execution of drug laws, meets with our approval. We have an example in the Revision Committee of the United States Pharmacopœia.

As a most valuable contribution for the Committee on Drug Reform, your Chairman has received from his associate, E. N. Gathercoal, the following, which is quoted verbatim:

"I desire to submit the following remarks on the subject of *patent medicine control:*

"The valuable and exhaustive report presented at the 1915 meeting by the Commission on Proprietary Medicines brings before the general body of pharmacists this question: What are *we* to do about the patent medicine evil?

"Restricting the term 'patent medicine' so as to include only nostrums sold under a copyrighted name and of which the ingredients or formula is not divulged, there are no pharmacists or at least very few who will not agree with me that, in one sense or another, there *is* a very formidable patent medicine evil.

"From an ethical standpoint no pharmacist should dispense any medicine or so-called medicine with the formula and ingredients of which he is not conversant. From a moral standpoint no pharmacist should sell any medicine or imitation medicine that, used according to directions by the patient, may result in injury or harm. From a commercial standpoint in a great many drug stores, the patent medicine business is the least profitable of almost any line in the store.

"The typical patent medicine manufacturer is not trained scientifically, and really knows nothing about medical treatment nor the scientific preparation of medicines. He is in the business from a purely commercial standpoint to make the medicine (?) as cheaply as possible, advertise it as extensively and as glaringly as possible, make it habit-forming if possible, and exploit it to the public to the last possible limit, caring nothing for the consequences to the retailer or consumer.

"The average patent medicine (1) is of slight medicinal value; (2) is often habit-forming; (3) has greatly encouraged self-medication; (4) is greatly over-priced; (5) has markedly lowered the profession of pharmacy in the minds of the public; (6) has but little trade value to the pharmacist.

"Shall pharmacists then take the stand that patent medicines must be eliminated altogether or that only the 'bad ones' should go? Shall this elimination or restriction be left

to the legal powers of the national and state governments, or to the great medical associations, or shall pharmacists themselves take an active part?

"There is no doubt that the government, in the interests of the general public, will still further restrict the distribution of the more dangerous and worthless patent medicines.

"The American Medical Association has conducted an extensive investigation and a publicity campaign against patent medicines, largely, I am sure, from a purely public-welfare standpoint.

"Theoretically, all trade-marks or protection of formulas or processes in connection with the preparation and sale of substances for medicinal use should be discontinued. The physician, ethically at least, does not attempt to protect his discoveries in medical science. Neither should the pharmacist, as a professional man, attempt to do so.

"If 'patent medicines,' of all kinds, were thus done away with only betterment would result to pharmacy, to medicine and to the public welfare. Thus the physician, pharmacist, chemist, etc., would freely contribute, as at present, newly acquired scientific knowledge to the public. The pharmaceutical manufacturing houses would continue to offer, as at present, their full line of pharmaceuticals, including many valuable combinations of medicines which could bear a special, but not trade-marked, name, and be sufficiently protected by the firm's name. The retail pharmacist could continue to sell, as at present, a full line of ready-to-sell medicines, either prepared by himself, or for him by a pharmaceutical manufacturing concern.

"All concerned in the good of medicine should work hard to have the patent and copyright laws so changed as not to include under their action any medicinal agent. Then the ideal conditions outlined above might soon be realized.

"Notice, however, the word 'theoretically' in a preceding paragraph. *Practically*, what can the pharmacist do to-day with this problem? He can do as many thousands of pharmacists are doing now—ignore patent medicines—drop as many as possible from his stock, especially the notoriously harmful or worthless ones—relegate the few he must have to the rear of the store—allow no patent medicine advertising in his store—advertise his own preparations—educate the public to the evils of patent medicines—align himself with the other interests that are endeavoring to eliminate patent medicines."

It is needless to say your Chairman endorses his associate's views, except perhaps his recommendation in regard to trade-marked articles, which is worthy of further consideration. False claims and secrecy should not be tolerated. Eliminate secrecy and false claims and you eliminate not only patent medicines, but most all undesirable medicines.

The following letter was received from the third member of this committee:

JERSEYDALE, MARIPOSA COUNTY, CALIFORNIA.

MY DEAR SAYRE:

I have practically decided to quit the A. Ph. A. for the Society of American Bacteriologists of which I have just became a member. By that I do not mean that I have given up pharmaceutical and medical work. For some years my work has, however, been along bacteriological lines (Food and Drug Bacteriology largely), for which reason I am joining in with the bacteriologists.

Have no additional suggestions to offer on Drug Reform. . . . Will you suggest that some one else be appointed in my place, on Drug Reform Committee?

Yours very truly,

ALBERT SCHNEIDER.

Trade-Names.—One of the questions proposed for your Chairman's discussion in this report is the following: Are the exclusive ownership and coined names for chemicals, drugs and preparations, objectionable, and should they be subject to limitation and restriction?

The restaurant waiter seems to be a law unto himself when he calls for "Adam and Eve in the Garden" on an order for two fried eggs. Quite often the pharmacist in the coining of names for medicinal agents seems equally regardless of the laws of euphony.

Glancing over current medical and pharmaceutical literature I find, of medicinal articles seeking commercial recognition, the following examples of coined titles: Abican, Brobor, Caciblen, Darpin, Endotin, Filudine, Gomenol, Hexa-co-sal-in, Iodex, Jubol, Koyol, Lecebrin, Med-o-Lin, Nose-Ions, Orsedan, Phecolax, Resor-Bisol, Seng, Thaxos, Urodonal, Virol,

Whiteruss, Xanal, Yogurt, Zemacol. This is simply an alphabetical list, one name for each letter of alphabet, selected from a list of about 500 unofficial articles that have been mentioned in current pharmaceutical and medical literature, and not a part of the Unofficial Remedies published by the Council on Pharmacy and Chemistry of the American Medical Association. This latter list, however, is not exempt from combinations, masquerading names which have seemingly little medical or pharmaceutical significance: for example, Larosan-Roche. One might go on almost indefinitely in multiplying these unpharmaceutical and unchemical terms.

It would seem that some kind of constructive legislation, within the professions, should be made by mutual agreement of medicine and pharmacy in coöperation with manufacturing chemists with a view of regulating titles of remedial agents. The combined effort of these bodies should bring about some desirable reform. Our recognized system of titles seems to be about as follows:

(*a*) Titles which express concisely the composition of the compound, as, for example: Acetanalid, Benzanalid, Ethylene-diamine, etc.

(*b*) Titles embracing euphonic combinations of different syllables of names of the bodies entering into the composition of the remedy; for example: Tann-Albin, Amyloform, Salipyrine, etc.

(*c*) Coined euphonic titles which are frequently of Greek or Latin origin and partake of descriptive character. These, in a way, describe either the uses, properties, or physical character of the compound; for example: Pyoktanin (pus destroyer), Thalline (referring to gum color produced by oxidizing agents), Iogen (compound, slowly producing free iodine), etc.

(*d*) Other titles of arbitrary character seemingly devised to secure trade control and as far from the article represented as is "Adam and Eve in the Garden."

We have no desire to underrate the value of this class. Many of them are said to be only a rehash (excuse the word) of well-known agents disguised by the coined name. The *name only* is under consideration. By bringing into line titles of all remedial agents with some adopted system of nomenclature, it would be not only a benefit to the public and professions interested, but would be of uniform value to all concerned. It would harm no one but offenders of ethical standards for whom this association is not seeking to legislate.

It is taken for granted that the discoverer of a new medicinal agent has certain unlimited rights. Upon what theory can any restriction or limitation be based? An attorney would show here a complicated problem no doubt, but from the point of view of a layman it would seem that the most conspicuous theory upon which any restriction may be constructed is that based on the welfare of the public and the professions interested, aside from all pecuniary considerations, but these latter cannot always be ignored. The public and the professions have unlimited rights as to their patronage of such agents and the cordiality of this patronage may be expressed in terms which may be agreed upon. It is the duty and privilege of the professions to express themselves in a channel such as is suggested: To construct a system of nomenclature by which all remedial agents may be better known and more readily identified. In this day of food and drug control it would be in harmony with public demand. It would aid those who are striving to execute the laws relating thereto, now on our statute books.

Your Chairman would therefore recommend that some measures be taken to bring about, by every possible means, a greater uniformity in the coining of names for medicinal compounds. A proper committee to serve in this capacity would surely meet the hearty approval and coöperation of pharmacists working for ends for which this association is established and maintained.

It is an encouraging feature of the times that manufacturers of so-called patent medicines are becoming aware of the demand for open formula and are endeavoring to meet it, and are also eliminating habit-forming drugs and modifying their statements in advertising.

L. E. SAYRE, *Chairman.*

Moved by M. I. Wilbert that the report be accepted and that it take its usual course. Seconded by I. V. S. Stanislaus.

Motion carried.

THE CHAIRMAN: Next is the report of the Committee on National Legislation. Mr. John C. Wallace is the Chairman of this Committee, and will read his report.

REPORT OF THE COMMITTEE ON NATIONAL LEGISLATION.

Your Committee on National Legislation submits the following:

Little has been done in this form of legislation of interest to the trade.

The Supreme Court has ruled that Section 8 of the Harrison Act applies only to persons required to register under the Act, and it is likely that an effort will be made to amend the law, in order to strengthen it at this point.

Price protection is still before Congress and under existing conditions is not likely to be enacted at this Session.

Postal Regulation.—The Post Office Department has refused to give any relief in relation to the mailing of poisons. A bill has been prepared under the direction of the National Association of Manufacturers of Medicinal Products; known as the Doremus-Kerns Bill and as H. R. No. 17,396—and S. No. 6834—and introduced in both the House and Senate—amending Section 217—of the United States Criminal Code, and if enacted, will give some relief to the existing conditions. The Committee would suggest that the members get in touch with their senators and representatives and solicit their support for this measure.

The General Revenue Measure is before Congress. It is very voluminous and many amendments have been made. It is hoped that in its final passage Section B will be omitted, at least that portion which applies to the drug trade.

Senate Bill No. 6592, introduced by Senator Shafroth, of Colorado, provides that on and after January 1, 1920, the weights and measures of the Metric System shall be the legal standard weights and measures of and in the United States.

The Committee has at all times coöperated with National Association of Retail Druggists and National Drug Trade Conference Committees.

(*Signed*) JOHN C. WALLACE, *Chairman,*
S. L. HILTON,
CASWELL A. MAYO,
J. H. BEAL,
CHARLES HOLZHAUER.

Moved by Wm. C. Anderson and seconded by J. Fred Windolph, that the report be received and that it take its usual course.

Motion carried.

The following papers were read, discussed and referred to the Publication Committee: "An Experience Meeting," by Philip Asher; "A Plea for a Permanent Professional Tenure of the Pharmacist" (both of these papers were published in the October number of the JOURNAL; the former, pp. 1107–1110; the latter, pp. 1094–1101).

NOMINATIONS FOR OFFICERS.

R. A. Kuever, of Iowa, was nominated for chairman, and as associates, A. W. Linton, of Washington; H. V. Arny, of New York; John Culley, of Utah. C. B. Jordan, Indiana, was placed in nomination for secretary.

The session was then adjourned.