

subject, however, indicate that there are some who would pursue exclusively the practice of pharmacy if those who are most interested in merchandizing would be willing to discontinue the pharmaceutical departments of their stores, and there are, doubtless, many druggists who would welcome the opportunity.

There was about a balance of arguments, pro and con, relative to the practicability of the proposition. The majority admitted that if it was possible to effect such a change pharmacy would acquire its professional standing and the druggists would attain a higher degree of proficiency and more general success in the business world. In other words, it was acknowledged that there was a degree of incompatibility under present conditions which interfered with the development of both pharmacy and the drug business.

The suggestion was made that because of the present status of the drug business recognition was not forthcoming to pharmacy by the establishment of a pharmaceutical corps in the U. S. Army. On this question the consensus of opinion was that there were many qualified American pharmacists, that their work conclusively proved this, and there was no expectancy of commissioned rank except for those pharmacists who could meet the requirements proposed in the Edmonds Bill.

Cicero said, "Certain signs precede certain events;" someone else has paraphrased this: "Great events have sent before them their announcements."

E. G. E.

PHARMACY IS AN "ESSENTIAL SPECIALTY" OF ARMY MEDICAL PRACTICE.

LET us be frank. The "lion in the pathway" of securing the establishment of a Pharmaceutical Corps in the U. S. Army is Surgeon General Gorgas, who has consistently and persistently opposed the movement for the establishment of the corps, the crux of his objection being that the practice of pharmacy in the Army is a non-essential specialty. (See Memorandum of War Department, February 13, 1918.)

There is, of course, a ready and complete answer to this. If pharmacy, which is a branch of therapeutics, is essential in civil life, it is equally essential in Army life. If the 150,000 physicians of the country require 50,000 retail pharmacists for civil medical practice, as they do, and if it is necessary for the 48 States of the Union to have pharmacy laws for the protection of the public against the serious dangers of incompetency in the compounding of drugs and poisons, as they have—surely the men of the Army deserve as skilled pharmaceutical service as they received at home, and this they do not get. There is no commissioned rank for pharmacists in the Army and no adequate pharmaceutical service.

We believe that the Surgeon General stands practically alone in his attitude. The American Medical Association, which stands for the medical profession of this country, has earnestly and enthusiastically urged the commissioning of pharmacists in the Army because "it would be but simple justice to the pharmacists themselves, because the usefulness of the Medical Corps will be greatly augmented, and lastly, and most important, because the efficiency of the Army demands it." And we are confident that if the matter of establishing a Pharmaceutical Corps in the Army was referred by vote to the men in the field there would not be the slightest doubt of its establishment.

The pharmacists of this country have repeatedly approached the Surgeon General on the subject of a Pharmaceutical Corps for the Army, but he is apparently adamant in his opposition. Why? "Is it because he is preëminently a sanitarian and not a therapist, and is more sympathetic to preventive medicine (of which sanitation is a branch) than to curative medicine (of which therapeutics and pharmacy are branches), as his establishment of a Sanitary Corps in the Army, while opposing the establishment of a Pharmaceutical Corps, might imply?" "Or is it"—and we believe this—"because he does not know and can not visualize the possibilities of an adequate and properly systematized pharmaceutical service in the Army?"

Possibly, also, he fears that if a Pharmaceutical Corps were established the Medical Department would be swamped by a large number of inadequately trained pharmacists when only a relatively small number of highly trained men would be needed.

But these objections are minor. The big, vital question is: "*Are trained pharmacists essential for the better protection of the health and lives of the men in the service?*" and there can be no doubt on this question in the light of the experience of our allied armies abroad with their pharmaceutical corps and the wonderful work the latter have done.

We believe that Surgeon General Gorgas—for whom we have the highest respect as a scientist and as a man—is honest and sincere in his opposition to a Pharmaceutical Corps, but he has been ill-advised, *looking towards the future needs of the Army*. The pharmacists of this country do not want a Pharmaceutical Corps as *pharmacists*, but as American citizens, and because they know that American Pharmacy can be made most helpful to the Medical Department.

The Military Surgeon (August 1918, 207) estimates editorially that there are 115,500 physicians in the United States available for all purposes, being 80,000 under 50 years of age; and states that "we are probably not suffering this moment from lack of medical officers, as there are 25,000 of us, but, should volunteers fail, we soon would be in dire need of them to supply our rapidly increasing forces." The ratio of medical men in the regular Army has been 7 to 1,000 of

military population. This war is more destructive of medical men than any previous war, and if prolonged will require 15 per 1,000. (In the British Army the ratio is now 19 per 1,000) or 75,000 for five million troops or, practically, all the active medical men of the country!

In the light of these facts it seems to us that the Surgeon General could exhibit no greater prescience than to conserve the medical forces of the country by utilizing properly trained pharmacists as medical assistants in first aid, as laboratory technicians, and in releasing medical men from non-medical duties, as well as in technical pharmaceutical work.

As Torald Sollmann (*Journal A. M. A.*, August 10, 1918) so well says, in his article on "Pharmacology in the War"—"It is the problem of the war for a country to meet and to defeat not only the human enemy, but the forces of nature. Severe necessity arises in many forms, in many new garbs. That, however, brings out one of the compensations of the war. *Necessity is the mother of invention, of conservation, of efficiency. The happy-go-lucky ways of peace no longer suffice. Every form of human endeavor is forced to the supreme effort.*"

American Pharmacy stands ready to make the supreme sacrifice, if needs be. Why ignore it?

J. W. ENGLAND.

AMENDMENT TO REGULATIONS, UNITED STATES PUBLIC HEALTH SERVICE.

No. 4.

TREASURY DEPARTMENT,
BUREAU OF THE PUBLIC HEALTH SERVICE,

Washington, July 16, 1918.

To Commissioned Officers, Acting Assistant Surgeons, Pharmacists, and Others concerned:

Paragraph 87, Regulations of the United States Public Health Service, approved March 4, 1913, as amended June 19, 1914, is hereby amended to read as follows:

Par. 87, Pharmacists, when on duty at United States marine hospitals or quarantine stations, shall, when practicable, be entitled to quarters, necessary household furniture for same, subsistence (as allowed previous to Mar. 4, 1913), fuel, light, and necessary laundry work, and when on duty at stations where there are no quarters belonging to the service, they shall be entitled to commutation therefore at the rate of \$40 a month for quarters, fuel, and light, and \$60 a month for subsistence and all other allowances.

RUPERT BLUE,
Surgeon General.

Approved:

L. S. ROWE,
Acting Secretary of the Treasury.

Approved

WOODROW WILSON,
The White House.