## **EDITORIAL**

E. G. EBERLE, Editor

## THE WORLD WAR VETERANS' SECTION.

TEN thousand pharmacists were called from the paths of peace to the work of war. These men served in every branch and in all ranks. They are now going back to pharmacy richer by wonderful and soul-stirring experiences. No matter where they served or in what capacity, whether on the battle line, in the supply service, in Siberia, at Archangel, or in the United States, whether as pharmacists, as dispensers, as first-aid men, as medical supply officers, or as combatants, whether as privates or as officers, all these men will have in common the memory of the fact that when the liberty of the world was at stake they offered their lives to make that liberty secure.

How natural, therefore, it will be for these men to seek association with each other where the mutual memories may be shared of dangers experienced and of risks run, where they may tell each other of the long, dull monotony of routine work and of the fierce joy of battle, and where they may be sure of finding men whose interests are the same though their experiences may have been most diverse. An opportunity for bringing about just such associations is offered freely and without cost in the World War Veterans' Section of the American Pharmaceutical Association which was organized at the New York meeting.

Every pharmacist who served his country no matter in what capacity is invited to become a member of the World War Veterans' Section of the American Pharmaceutical Association without money and without price. By vote of the general association every World War Veteran who was a pharmacist or a student of pharmacy is invited to become a member of the Association without the payment of any initiation fee, and without any charge for the first year's dues. Surely every pharmacist who served in the war will welcome this opportunity to get into touch with fellow pharmacists who have also served.

Every reader of the Journal should bring this matter to the attention of all who have served either in the Army or the Navy and urge that they forward applications to the secretary of the Section, Captain W. D. Walters, care of the Wm. S. Merrell Company, Cincinnati. No special form is required and no financial obligation is imposed. Merely send a post-card stating the facts as regards service in pharmacy and in the war. No matter whether the service was in the medical department or outside, no matter whether it was as a teamster, a runner, a machine gunner, a hospital dispenser, a hospital orderly, or a medical supply officer, the mere fact that the applicant is a pharmacist or a student of pharmacy, that he served his country and that he has not been dishonorably discharged puts him into the class of men who have received this cordial invitation from the oldest pharmaceutical association in the world, to become an honored member without cost.

The World War Veterans' Section is the direct outgrowth of the work done by the Advisory Committee for Soldier and Sailor Pharmacists under the chairmanship of Frank H. Freericks, Cincinnati, Ohio. Over a thousand pharmacists have already been aided to return to civil life under favorable conditions by this Committee and the committee is still vigorously at work, placing in civil life men who are leaving the Service.

This invitation will bring into the Association a splendid group of young, vigorous and enterprising men who will undoubtedly exert a wholesome influence both upon the organization and upon pharmacy, and who, in turn, will undoubtedly be favorably influenced in their relations to pharmacy and their obligations to their calling through membership in the World War Veterans' Section, a section which carries in it the seed of wonderful possibilities for a most helpful and useful future.

Caswell A. Mayo.

## PHYSICIANS' AND PHARMACISTS' RESPONSIBILITY FOR THE SO-CALLED WORTHLESS AND SUPERFLUOUS MEDICINAL PREPARATIONS.

**B**EFORE a class of medical students the lecturer was commenting upon the subject of an elixir of the three bromides. He pointed out that since the bromine ion was the hypnotic ingredient of the salts entering the preparation it would seem that this prescription was irrational, as has been stated by the best medical authorities—that a solution of any one of the bromide salts would be as efficacious as the three salts combined; that the combination of bromine with the three different bases did not seem to have any special merit. One of the medical students of the class took occasion to inform the professor that in his part of the country an elixir of five bromides was most popular among physicians of his acquaintance.

The question naturally arises—where lies the responsibility for these unworthy preparations or drugs? Who should stand sponsor for them and why?

There is a small uninformed number of the medical profession who believe the pharmacists are responsible for the so-called irrational preparations, and some of the members of the pharmaceutical profession believe that they were brought into existence by physicians. Neither view is tenable. The fact is, most physicians and pharmacists are alike responsible for the popularity of these. The pharmacists, as a rule, will not pronounce upon the therapeutic value of any finished product. Pharmaceutical manufacturers frequently receive private formulas from physicians such as would not pass censorship but they do not pass upon their clinical value—whether certain ingredients in these compounds are considered by experts as superfluous, irrational or useless. We need some able and constructive criticisms of existing pharmaceutical preparations and it would seem as if, in this particular service, physicians and pharmacists might well co-

operate. On the higher lines and strata of the professions of Pharmacy and Medicine there is no antagonism, but the moment we descend into the commercial there is always friction and antagonism. Pharmaceutical science is worthy of the medical man's respect. Pharmacy is as much of an art and science as legitimate medicine. It is this fact the physician should recognize. It is true that it is not nearly as evident, for in the very nature of the retail drug business there is bound to enter a preponderance of commercialism that even the cheap doctor does not exhibit. If legitimate Pharmacy were absolved from this sin, which weighs upon it so highly, medical men would soon recognize the nobility and idealism of the profession. Let the best physicians come into contact with the best pharmacists and note results.

It would seem that now since we are approaching the revision of our national standards such coöperation should be emphasized. One of the most difficult points that the committees of revision of the United States Pharmacopoeia and the National Formulary have to face is that which relates to the drugs and preparations that are to be included for the use of the medical profession in the treatment of disease. Different groups of physicians have various conceptions as to the value of these. One group is convinced that a given class or set of drugs gives excellent results in their practice. Another feels equally positive that the drug or preparation is of little use. It should be borne in mind that the function of the Pharmacopoeia is not to determine whether or not one physician or set of physicians shall be relied upon or made sponsors for these different sets of preparations. It should also be borne in mind that the primary purpose of the Pharmacopoeia is to provide standards which will insure uniform and reliable drugs and preparations. The selection of these should be placed in the hands of medical men and their value determined in their practice.

In order that the number of so-called useless and unwarranted drugs and preparations shall be eliminated or materially reduced, it is fair to assume that the members of the medical profession should have, probably, a ruling voice but, in our opinion, the object sought will be promoted very much more rapidly if a hearty coöperation is effected with the representative pharmacists. The pharmacist supplies what is demanded and, naturally, if he uses his business and pharmaceutical skill, he will create, improve and multiply preparations to meet his patrons' wants. He will promote his branch of Medicine to the extent of his business and scientific ability. If he has the guidance and cordial coöperation of the medical profession he will do this with much more intelligence than he otherwise would. We should get rid of the idea that pharmacists are responsible for the multiplication of these so-called unworthy preparations. The medical profession should not be unwilling to bear part of the responsibility for their continuance. Physicians continue, in spite of everything, to prescribe preparations which the Council

on Medical Education proclaim to be worthless and superfluous, stating that they obtain favorable clinical results. Certainly one very desirable result would be obtained if a coöperation between pharmacists and physicians existed—it would remove, to some extent at least, the prejudice which now exists between the two professions which tends to restrain and retard effective coöperation and coördination in the aim and end previously indicated.

The American Medical Association has opened the way and made progress in the direction named, having pronounced its own point of view, which should be duly recognized. It is natural that the point of view of the American Pharmaceutical Association differs from that of the former association, and the pharmacists' views should also be respectfully considered.

As to clinical evidence, Rule 5 of the Council on Pharmacy and Chemistry of the A. M. A. states: "To be acceptable, the clinical evidence must offer objective data with such citation of authority as will enable the Council to confirm the facts and establish the scientific value of the conclusions drawn," etc. This rule would be helpful in the coöperative work.

As to unscientific and useless articles, Rule 10 of the Council should be expanded and made more definite. A basis might be discovered whereby one could more definitely determine whether an article or preparation is unscientific or useless.

Rule 10 reads as follows: "The use of articles which are unessential modifications of official or established non-proprietary articles is unscientific and serves no useful purpose. \* \* \* \* \* This includes mixtures containing an excessive number of ingredients; those which contain substances of no probable therapeutic assistance to each other; those of no therapeutic value. The combination of two or more remedies in a mixture must be considered contrary to scientific medicine unless a distinct reason exists for such a combination," etc.

It should be added that a paper upon this subject was read before the American Pharmaceutical Association by Prof. L. E. Sayre and was published in Volume VIII, No. 5, of This Journal. The debate which followed the reading of this paper was participated in by Dr. Bernard Fantus who stated, in substance, that it was to be hoped that the physicians would meet the pharmacists as they ought to. He further said: "You know doctors have quite a way of being autocratic in the sick room and they get to feel that they have the right to be autocratic in all respects, and many of us here, I suppose, including myself, are opinionated. The fact Hippocrates discovered and published, that experience is fallacious and judgment difficult, is so true of medical practice that the opinion of any one physician or any number of us, on such questions as the desirability of certain preparations, should not be regarded altogether too seriously. I am convinced that pharmacists could be of great help to physicians in their learning about the value of preparations."