

EDITORIAL NOTES

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BETTER RECOGNITION AND UTILIZATION OF PHARMACISTS IN THE BRITISH ARMY.

It is gratifying to note that the efforts of the British Pharmaceutical Society have met with a degree of success. England and the United States act along related lines of thought in many things and this may be an encouragement for us. The American Pharmaceutical Association and the National Pharmaceutical Service Association are continuing their efforts for better recognition of pharmacists in the U. S. Army.

Army Council Instruction No. 8 of the British War Office under date of January 3, 1919, reads as follows:

CLASSIFICATION AND EMPLOYMENT OF PHARMACISTS AND DISPENSERS.

1. All pharmacists and their assistants and dispensers serving in the R. A. M. C. will in future be classified as:

(A) *Superintending Pharmacists*, (B) *Pharmacists*, or (C) *Dispensers*.

2. (A) *Superintending Pharmacists* and (B) *Pharmacists* will only include those who are:

(i) Registered as pharmaceutical chemists or chemists and druggists in Great Britain. (Major or Minor qualification of the Pharmaceutical Society of Great Britain.)

(ii) Registered as pharmaceutical chemists in Ireland. (Licentiate of the Pharmaceutical Society of Ireland.)

3. The Officer in charge R. A. M. C. Records will verify the qualifications of each man claiming to be a pharmacist and will make the necessary entry on the soldier's documents accordingly.

4. (C) *Dispensers* will include the following:

(i) Those men who have passed the R. A. M. C. examination as dispenser in accordance with Standing Orders, R. A. M. C.

(ii) Those who hold the diplomas of the Society of Apothecaries of London or of Dublin as apothecaries' assistants.

(iii) Those who are registered as chemists and druggists or as druggists in Ireland.

(iv) Those who have been engaged in dispensing medicines for a period of not less than three years [see par. 5 (iv)].

5. Verification of the qualifications of men to be registered as dispensers will be carried out as follows:

(i) By reference to the entries on attestation papers.

(ii) By production of the certificates issued by the licensing body.

(iii) By reference to the official Register of Chemists and Druggists and of Druggists in Ireland.

(iv) By inspection of testimonials from previous employers, and, if considered necessary, by an oral and practical examination conducted by an officer of the R. A. M. C., assisted by a pharmacist.

6. All pharmacists on being posted to the R. A. M. C. will undergo the usual recruits' training at the R. A. M. C. Reserve Training Centre at Blackpool, and will then be posted to the larger hospitals at home, where they will undergo a two months' course of instruction in the duties of a N. C. O. in charge of a dispensary and in the regimental duties of a N. C. O. of the R. A. M. C.

7. The Officer i/c the hospital to which pharmacists are posted for training will arrange for them to be examined at the termination of their course as to their knowledge of the methods of accountancy in the receipt, issue, and dispensing of medical stores, etc., and as to their capability of undertaking the general duties of a N. C. O., R. A. M. C. He will forward a report of the examination to the D.D.M.S., with a nominal roll of those pharmacists whom he considers in all respects fit for subordinate charge of a dispensary.

The D.D.M.S., if he concurs, will forward the names of those recommended to the Officer i/c R. A. M. C. Records, who will have them registered as superintending pharmacists and cause the necessary entries to be made in their documents. These superintending pharmacists will then be considered as available for the subordinate charge of a dispensary,

and will be posted as required by the D.D.M.S. for the Command or District, or by the D.G.M.S. or D.M.S. of the Force in which they are serving.

8. In the event of a pharmacist being unfavorably reported upon the termination of his training, the Officer i/c the hospital may arrange for his further instruction for a period of two months and re-examination, or he may report that he is unsuitable to be employed as a superintending pharmacist. If he considers, however, that he is suitable for employment in dispensing duties although not capable of subordinate charge, he will submit a report on the matter to the D.D.M.S. for transmission to the Officer i/c R. A. M. C. Records. In this case the soldier will remain recorded as a pharmacist, but he will not be eligible for employment as a "superintending pharmacist."

9. In the event of a pharmacist being considered by the Officer i/c the hospital as quite unfit to be employed in the dispensing of medicines, a special report will be rendered by the latter to the D.D.M.S. for transmission to the W.O.

10. All pharmacists serving in the R. A. M. C. at the present time at home and abroad will, unless they are employed on other specialist duties, be posted to hospitals for instruction and examination, but the period of instruction may be curtailed at the discretion of the Officer i/c the hospital. Reports on each pharmacist should be rendered as in paras. 7, 8 and 9.

11. In all hospitals of 100 beds and over a superintending pharmacist will be placed in subordinate charge of the dispensary, but the other personnel employed therein on dispensing duties may be either pharmacists or dispensers.

12. A dispenser who has, prior to the date of this A. C. I., passed the examination for dispensers in accordance with the Standing Orders, R. A. M. C., will, if otherwise suitable and recommended by the D.D.M.S., be eligible for the subordinate charge of a dispensary.

13. Where the duties of a superintending pharmacist are being carried out at the present time by a female dispenser, and the Officer i/c the hospital is satisfied that the duties are being satisfactorily performed, the present holders of the appointment may be retained.

14. A superintending pharmacist, or N.C.O., R.A.M.C., qualified as in parag. 12, other than a civilian, appointed to the subordinate

charge of a dispensary will be granted the acting rank of sergeant with pay while so employed, and in those hospitals where three or more pharmacists or dispensers are employed he will be given the acting rank of staff sergeant with pay.

15. No increase of establishment is authorized by this A. C. I., and these ranks will be included in the total ranks of staff sergeants and sergeants in those units for whom a War Establishment exists.

16. In the case of hospitals for which no War Establishments exist, these ranks will be held supernumerary to those authorized by the Officer i/c R. A. M. C. Records for the company on the strength of which they are borne, but will be included in the total of other ranks authorized for the hospital or other formation in which they are employed.

17. In those cases where the number of hospital beds on the establishment is less than 100, but the dispensing duties for out-patients are sufficiently important to justify the appointment of a superintending pharmacist, the D.D.M.S. of the Command will submit the case for consideration to the W. O. or to the G. O. C.-in-C. of the Force abroad.

18. In the event of there not being sufficient pharmacists available in the Force or Command, application should be made to the Officer i/c R. A. M. C. Records through the usual channels.

19. Superintending pharmacists will only be included in drafts for service overseas when specially ordered by the W. O., but when units are mobilized for service overseas and dispensers are included in the establishment, a superintending pharmacist should invariably be detailed as the senior except in the case of field ambulances, where dispensers only should be posted.

20. Dispensers may be ordered overseas at the discretion of the Officer i/c R. A. M. C. Records.

METHODS OF STERILIZING HYPODERMIC INJECTIONS.

The following list, in tabulated form, was prepared by Lesude and appeared in the *Schweizer Apothecker Zeitung*, and we have rearranged the matter from a reprint in *The Pharmaceutical Journal and Pharmacist* of January 18, 1919, p. 34.

(a) Sterilizable in the autoclave at 115° for fifteen to twenty minutes:

Adrenalin, sodium benzoate, brucine sulphate; iron, guaiacol and sodium cacodylates; caffeine; sodium cinnamate; cocaine hydrochloride; salts of codeine; creosote; eucaïne; sodium formate; gelatin (twice or thrice); guaiacol; heroine; holocaine; lactic acid; magnesium sulphate, salts of mercury with mineral acids; salts of morphine; novocaine hydrochloride, salts of pilocarpine; salts of quinine; non-phosphatic sera; strychnine sulphate; stovaine.

(b) Sterilizable at 100°:

Salts of aconitine; adrenalin; alypin; apomorphine hydrochloride; salts of atropine; brucine; sodium cantharidate; cantharidin; cinnamic acid; colchicine; duboisine sulphate; emetine hydrochloride; galy; potassium, sodium and iron glycerophosphate; hyoseyamine hydrochloride; ludyl; methylene blue; narceine hydrochloride; nirvanin; salts of physostigmine; quinine cacodylate; scopalamine hydrochloride.

(c) Sterilizable by Tyndallization (four to five times at 60° to 70°):

Aristol; chloral; curare; ergotinine; hectine; hectargyre; lecithin; sodium nucleinate; oils.

(d) Sterilizable by filtration through a Chamberland filter:

Calcium glycerophosphate, organic extracts isotonic salt solution; therapeutic sera; tuberculin; vaccine; mineral waters; yeast.

(e) To be prepared with aseptic precautions:

Crystalline aconitine; arsacetin; collargol; cholesterin; all colloids; cryogenin; crystalline digitalin; electrargol and all electric colloids; ichthyol; most mercury salts with organic acids; medicated oils; protargol; salvarsan; neosalvarsan.

BENZYL ALCOHOL AS A LOCAL ANAESTHETIC.

The application of benzyl alcohol, phenmethylol, as an anaesthetic is credited to Dr. David L. Macht, of the Pharmacological Department of Johns Hopkins University. It is reported to be very much less toxic than cocaine and possesses the advantage of being without some of the unpleasant reactions peculiar to cocaine.

According to press reports the local anaesthetic properties of benzyl alcohol were accidentally revealed to Dr. Macht while he was experimenting with benzyl benzoate. He happened to taste a minute particle of the benzyl alcohol and found that his tongue had become completely anaesthetized. There was

a slight irritability and this was followed by a sensation of numbness, coolness and hardness, very much like that caused by a cocaine solution. A series of careful experiments followed and the anaesthetic properties of the benzyl alcohol were amply established. The results were so satisfactory, in fact, that the use of the chemical was commenced at the Johns Hopkins Hospital. The discovery came at an opportune time last spring, when the supply both of cocaine and novocaine was short and prices had been sent to unprecedented figures by the government demand for war uses.

NARCOTIC "MUSTS" ISSUED TO THE NEW YORK DRUG TRADE.

Commissioner Frank Richardson has obtained suggestions relative to enforcement of the New York Narcotic Law, and after analysis of them has prepared a summary which has been mailed to New York druggists. They follow:

An apothecary is compelled:

1. To register with the Department of Narcotic Drug Control before he can purchase, possess, sell, distribute, or dispense cocaine, opium or its derivatives.

2. To use official triplicate order forms in purchasing narcotic drugs.

3. To require from the physician an order on an official order form before furnishing narcotic drugs. He cannot accept in lieu of the order form the physician's official or unofficial prescription blank.

4. To keep a separate file of unofficial prescriptions for cocaine or opium or its derivatives for a period of two years.

5. When filling prescriptions on official triplicate prescription blanks to indorse on the face of the original and the duplicate—the date of filling, file number, his name and business address, and name of the person to whom delivered, if other than the person for whom the prescription was issued, and keep one duplicate on file for two years and mail the other to this department within twenty-four hours from date of filling.

An apothecary cannot:

6. Fill a prescription written on official triplicate prescription blanks later than four days from date of issue.

7. Sell hypodermic syringes or needles to any person other than a dealer in surgical instruments, apothecary, physician, dentist,

or veterinarian, except on the written order of a physician.

In all cases of apparent conflict with the Harrison law, the Federal law takes precedence.

The commission also has summarized the law for the benefit of physicians and will send copies to every doctor in New York.

COMMITTEE NAMED TO PLAN DRUG RESEARCH INSTITUTE.

Dr. William H. Nichols, president of the American Chemical Society, has announced the appointment of a committee on an estimate of cost and an outline of policies for the proposed National Institute of Drug Research. The committee consists of prominent chemists, biologists and pharmacologists and also representatives of the large interest, in manufacturing pharmacy, and includes specialists who are peculiarly fitted to cope with present-day problems relating to intoxicants and the dangers of drug addiction. Its personnel is as follows:

Dr. John J. Abel, pharmacologist, former president of the American Society for Pharmacology and Experimental Therapeutics, professor of pharmacology at Johns Hopkins Medical School, discoverer of the substance now known as adrenalin and an investigator of the action of alcohol on the body, Baltimore, Md.

Dr. Raymond F. Bacon, director of the Mellon Institute for Industrial Research, University of Pittsburgh, in charge of important researches on bread, fruit juices, coffee, and many lines of industrial chemistry, Pittsburgh, Pa.

Dr. Frank R. Eldred, chief of the scientific department of a prominent firm of manufacturing pharmacists and formerly chairman of the pharmaceutical division of the American Chemical Society, Indianapolis, Ind.

Dr. Charles H. Herty, chairman; editor of the *Journal of Industrial and Engineering Chemistry*, and former president of the American Chemical Society, New York City.

Dr. Reid Hunt, pharmacologist, president of the American Society for Pharmacology and

Experimental Therapeutics, professor of pharmacology in the medical department of Harvard University, a noted authority on the effects of poisons and alcohol upon the human body, Cambridge, Mass.

Dr. Treat B. Johnson, professor of organic chemistry, Sheffield Scientific School, Yale University, and specialist on compounds occurring in the human body, for which work he was awarded last year the Nichols medal for preëminence in research, New Haven, Conn.

Dr. P. A. Levene, chief of the department of biological chemistry, Rockefeller Institute for Medical Research, and an expert on proteins and enzymes and the chemistry of nutrition, New York City.

Mr. F. O. Taylor, chairman of the pharmaceutical division, American Chemical Society, specialist in the manufacture of drugs, Detroit, Mich.

Dr. Herty in a recent address before the New York Academy of Sciences outlined a tentative plan of the institute, the organization of which has been considered on a basis of \$10,000,000. The object of the institute will be to make a thorough study of the effect of various medicinal substances upon the human organism, to suggest greater means for curing the ills of mankind and to prevent the abuse of drugs through gaining a wider knowledge of their physiological effects.—*Paint, Oil and Drug Reporter*.

PROPOSED FLORA OF THE PHILIPPINES.

The Philippine Bureau of Science is planning to start the preparation of a new dictionary of plant names of the Philippine Islands and a critical enumeration of all known species in the islands, with an adjustment of the synonymy, in preparation for the final undertaking, a general flora of the Philippines. It may be possible to combine the Filipino names with the systematic enumeration, thus making a single publication that will include all the technical and local names credited to every plant in the Philippines.

OBITUARY

JAMES OSCAR BURGE.

J. O. Burge, honorary president of the American Pharmaceutical Association, 1916-1917, died at his home in Nashville, February 6, 1919. He joined the American Pharma-

ceutical Association in 1878 and during all these years was an untiring worker for its interests. The meeting of this organization convened in Nashville in 1913, and it was largely due to the efforts of Mr. Burge that