## A PROPER COLLEGE OF PHARMACY COURSE THAT IS OF INTEREST TO THE COMMERCIAL DRUGGIST.\*

## BY EDWARD SPEASE.

It is perhaps presumptuous for me to assume that I can offer a course in Pharmacy that is completely formed and well balanced enough to deserve the term "proper" as outlined in the subject given to me, and it might be better to rewrite the subject thus—Some Ideas on Pharmaceutical Education that may be of Interest to the Commercial Druggist.

The above subject would further imply that besides the Commercial Druggist, there is some other kind. I shall not attempt to differentiate between the two.

While it is true that many noble men and women have given up their entire lives for the sake of ideals, I do feel that in the case of the retail drug merchant he should be so equipped that he can succeed financially. I do not believe that he is called upon to conduct his business at a loss, and the public receives better service if he be contented with his choice of life work.

In no other profession or business is the temptation greater to be dishonest, due to the lack of knowledge of drugs by the laity and, from early times, through more or less of superstition thrown about drugs and cures by charlatans, all business. To-day needs a knowledge of methods, and training is just as essential for the small merchant as for the large one.

Upon the editorial page of the July 1918 issue of the Bulletin of Pharmacy appears an editorial under the caption "The Survival of the Fittest." There are some very excellent thoughts inscribed, as well as a few that I can scarcely subscribe to. The worthy editor has limited his article to the "training of young men for the actual conducting of drug stores." I shall view my subject from that angle.

The major portion of the editorial is a plea for the teaching of biological pharmacy, and, that less time be devoted to the manufacture of galenicals and the microscopic study of crude drugs. In regard to the study of biological pharmacy, I believe, the writer's point is well taken. In my own school we are not giving this subject enough attention, and this is probably true of some other schools.

The problems that confront educators on this particular subject are largely due to their appreciation that a thorough training in both elementary bacteriology and chemistry should precede biologic pharmacy. This is impossible in the short time now allotted to pharmacy courses. It is true that a student, thoroughly grounded in salesmanship, can handle and sell biologics to the full satisfaction of the manufacturer if he reads their literature and handles them solely as merchandise. But here, I wonder if the true merchant should not know something of the quality of his merchandise? This same thought holds true for everything the druggist sells.

Should not the pharmacy student be trained in the method of manufacturing galenicals so that he can intelligently judge of those he buys, whether he should buy or make them and perhaps become a judge of the house from whom he buys?

<sup>\*</sup> Read before the Section on Practical Pharmacy and Dispensing, A. Ph. A., Chicago meeting, 1918.

A slight touch of microscopy might not be amiss in order that he may know how the manufacturer should judge his crude drugs, if for no other reason. I believe in the technical or scientific studies for the pharmacy student, if for no other reason than that he may talk intelligently to the physicians and customers. Is not the training he now receives intended solely that he may properly carry out the basic principles of salesmanship?

I also think that without commercial pharmacy the student is utterly unfit to be loosed upon the public. Let us teach him salesmanship, advertising, system, business methods, and the like, but let us not do so at the expense of his knowledge of the scientific side. Why can we not teach both? The professor who said that it is "universally conceded that there is none too much time" now for the teaching of pharmacy, stated a truth. Did it ever occur to you that there is a far greater number of things for the retail drug merchant to learn than for any other merchant?

The "chain" store hires its specialist for each line, or at least for similar lines, and especially for those lines that require specific knowledge for both buyer and salesman. Do you like to buy shoes of a merchant who does not know leather, or who is ignorant of the quality he carries? You may answer he carries standard brands, and the druggist should do the same. I ask, is the laity informed on standard pharmaceutical merchandise, and who should be the judge?

The physician to-day—or perhaps it would be more fair to say the physician teaching in the medical schools—says it is a mistake to teach the pharmacy student a knowledge of the therapeutic action of drugs, because he will counter-prescribe. Have any of you ever observed it to be the rule that mankind errs in ethics and honesty because of too much knowledge?

Every pharmacist knows that it is impossible to properly buy, preserve and compound drugs without some knowledge of their general therapeutic effect. The true fault with pharmacy to-day is lack of education. Our schools have sometimes made the graduate feel that he is completely educated, when he has only touched the "high spots." Our schools and our profession have not kept pace with the times.

Pharmacy is a broad subject, and we must view it so. Too many of us have single-track minds. Have our schools, our professors, our jobbers, our manufacturers, and, yes, our physicians, constantly recognized the fact that they best serve the public, and consequently themselves, by looking after the retail drug merchant? In my opinion they have not all done so. I do not want to be understood as antagonistic to the drug manufacturer, but I am trying to look at this subject from the broader viewpoint—that of the public.

Is the public best served by the manufacturer selling directly to the physician? I say no. The physician forgets his therapeutics, if he ever was taught any, and "dishes" out the genteel proprietary sold him by the manufacturer. The manufacturer also stocks up the druggist with them. These two stocks are duplicated, and the public suffers from old merchandise, from fitting the drug to the case, from a lack of intelligent prescribing; and the druggist suffers from loss of business, and the dead stock which remains on his hands.

The same condition may prevail in biologics; does it? Would it not be better to have the retail drug store as the depot for medical supplies, both drugs and biologics, and thus have one stock to furnish a number of physicians rather than

to have a stock in each physician's office? Would the public not have better service and fresher supplies according to this plan? As it is now, the manufacturer's salesman in a locality is the depot for the physicians' supplies.

This seems to me a mistaken policy for the manufacturer to pursue. Will it not eventually kill the business of the pharmacist; thus materially injuring the business of the manufacturer? Will the physician ever be trained so he can compound his own drugs, or should he rely entirely on those compounded by manufacturers? As stated before, this form of compounding will never be for each individual patient. Right here is where the public is not best served. In my opinion it is a short-sighted policy on the part of the manufacturer, as his desire to sell much merchandise to-day may kill his market for to-morrow.

The public will some day demand an accounting. Will the retail drug merchant go, and will his drug line revert to the doctor and his sundries and specialties to the department store? I rather doubt this sort of adjustment. The public is accustomed to go to the druggists for merchandise and drugs of quality. They prefer to buy remedies for minor ills directly from the druggists. Our schools must come to the front and save the retailer. How? By more education to help him cope with business conditions, and, the knowledge we can give him will help him to triumph over his difficulties.

To do this, we must elevate our standards. We must bring high-school graduates into pharmacy; we must kill schools maintained for financial profit and equipped merely to advise the sale of manufacturers' specialties. We must lengthen our courses. Two years is sufficient time for the scientific subject for the retail merchant. Two years more should be spent in salesmanship, advertising, accounting, investments, business law, insurance, business organization, and courses in economics, English, and even psychology. Why not courses that show the selling points of a toothbrush, of what it is made? The same of hand brushes, cigars, rubber goods, and the numerous other sundries. Let these last be the "high spot" courses; not the scientific ones. Let us teach honest merchandising, and not just the best way to "put over" on the customer a package of anything that persistent advertising has put on the shelf.

In this connection I should like to call to your attention the courses outlined in the catalogue of the School of Pharmacy of the University of Washington. I cannot agree that the colleges are "stubborn," but must insist that too much stress has been given by the propagandist that the school of pharmacy is passé. The school should also prepare students for analytical pharmacy, manufacturing, entrance into medicine, and for lives of scientific work; but with these things this paper is not concerned.

I urge that druggists now in the retail business should make it their concern to see that the pharmacy schools make better clerks and better future pharmacists. This can only be accomplished by a broader educational training, a longer period of preparation, and by combining the schools with the universities where the services of the proper teachers may be obtained.

I firmly believe in commercial pharmacy and likewise feel that education as well as training is essential to good merchandising.

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