

Journal of Pharmaceutical Sciences



JULY 1974

VOLUME 63 NUMBER 7

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The *Journal of Pharmaceutical Sciences* is published monthly by the American Pharmaceutical Association at 2215 Constitution Ave., N.W., Washington, DC 20037. Second-class postage paid at Washington, D.C., and at additional mailing office.

All expressions of opinion and statements of supposed fact appearing in articles or editorials carried in this journal are published on the authority of the writer over whose name they appear and are not to be regarded as necessarily expressing the policies or views of the American Pharmaceutical Association.

Offices—Editorial, Advertising, and Subscription Offices: 2215 Constitution Ave., N.W., Washington, DC 20037. Printing Offices: 20th & Northampton Streets, Easton, PA 18042

Annual Subscriptions—United States and foreign, industrial and government institutions \$50, educational institutions \$50, individuals for personal use only \$30; single copies \$5. Subscription rates are subject to change without notice. Members of the American Pharmaceutical Association may elect to receive the *Journal of Pharmaceutical Sciences* as a part of their annual \$55 APhA membership dues.

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EXTREMISM IN THE PURSUIT OF DRUG ABUSE PREVENTION

In recent years, sociologists and others who have an interest in criminology, the court system, and the judicial process have increasingly been questioning whether society, in its effort to protect and safeguard the rights of the guilty, may at the same time be intruding upon the rights and privileges of the innocent. The purpose of this editorial is to note that a similar and parallel problem appears to have developed within the health-care complex relative to drugs and medication.

The situation can be described quite succinctly by quoting a portion of a letter which was published in the March 11, 1974 issue of the *Journal of the American Medical Association*. A frustrated physician from Owensboro, Kentucky, wrote:

"Hey, out there! Somebody listen to me. I'm getting sick and tired of these restrictions on the drugs I prescribe for my patients. Sure, I know we have a drug problem in this country, but I'm not a part of it, and my patients are not and the pharmacists are not.

"Why can't I phone in a prescription for a few sleeping pills any more? Why must my patient be required to come to me for a new prescription for nerve pills each time he runs out? How much worse is it going to get? And finally, who is doing all this?"

On a more personal basis, we had an experience ourselves during this past winter flu season in which attempts to obtain a bottle of an exempt narcotic cough syrup met with no success in a number of local pharmacies. The pharmacists on duty at these pharmacies refused to dispense the requested cough syrup despite offers of identification and despite the fact that the request was being made by a local resident.

When asked for an explanation, these pharmacists, without exception, indicated that their refusal to dispense the medication was a personal decision and it did not reflect policy dictated by some manager, owner, or corporate employer. These pharmacists also indicated that their actions were due primarily to their fear of entrapment by zealous government narcotic officers, and only partly to prior experience with drug abusers. No matter that a family, including small children, was suffering and was being kept awake much of the night due to incessant coughing.

In essence, therefore, it seems that the laws which have been developed and the manner in which these laws are being enforced with regard to drug addiction have become so radical and extreme as to inhibit the proper functioning of health-care practitioners and to preclude satisfying legitimate medication requirements of law-abiding citizens.

There is no question but that drug abuse constitutes a very serious problem for a portion of the population. As such, suitable efforts must be made to control and eliminate this problem. In our opinion, however, when such controls and practices extend to the point that they prevent suffering individuals from obtaining appropriate and necessary medication—not to mention interfering with duly qualified health personnel in the discharge of their professional obligations to the public—then the pendulum has been permitted to swing much too far to one side. What obviously is needed is a reassessment of the obligations of government to meet adequately the needs of all elements of society.

Edward G. Feldmann