PHARMACOPŒIAS AND FORMULARIES

THE BRITISH PHARMACEUTICAL CODEX. 1954*

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The British Pharmaceutical Codex, 1954, is the sixth edition of a highly respected, well conceived, and competently written reference book designed for pharmacists and physicians, the first edition of which was published in 1907 by the Pharmaceutical Society of Great Britain. Originally the Codex contained only general information on drugs in use in the British Commonwealth, and certain others of special significance listed in the pharmacopæias of France, Germany, and the United States. Each edition has reflected, in a measure, the status of drug therapy at the time of its publication, but until the appearance of the current revision, many drugs which must have been either in the late stages of obsolescence or actually obsolete were frequently included. It is gratifying that the 1954 Codex is apparently the result of a more thorough revision than had any of its predecessors.

Standards for the strength, quality, purity, and identity of drugs not covered by the British Pharmacopæia have been emphasised to an everincreasing extent in the later editions and particularly in the current edition. One of the most significant features of the Codex has been the development of clearly written objective appraisals of the actions and uses of the basic drugs for which monographs are provided. This information is especially valuable to the pharmacist.

One of the most difficult problems with which a revision committee of a book such as the British Pharmaceutical Codex or a pharmacopæia is confronted is to decide upon what drugs to admit to a new edition. Even when criteria are established, it is not always easy to adhere strictly to them. The principal basis of selection employed in the 1954 Codex required that each item admitted must possess therapeutic value or that it be an ingredient of a useful dosage form. One test of the first criterion for admission was whether a critical summary of the action and uses of a drug could show some degree of therapeutic essentiality. Another significant decision was not to include monographs on all the drugs that are still in use. The application of these criteria has resulted in the deletion of an impressive list of monographs of the British Pharmaceutical Codex, 1949. Included in this list are more than 250 basic drug monographs and nearly 400 formulæ for dosage forms. This apparently drastic action has eliminated many botanical drugs and essential oils that must have been seldom, if ever, used as drugs. In addition, many classes of products, such as the iron salts and quinine salts, have been reduced to a more realistic number. The Codex Revision Committee

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THE BRITISH PHARMACEUTICAL CODEX, 1954

exercised excellent judgment in the selection of monographs on approximately 70 basic drugs and 84 dosage forms not included in previous editions. New admissions include typical antihistaminics, antimalarial agents, sulphonamides, anticoagulants, radiological preparations, and antituberculosis agents. Thus organic synthetic medicinals constitute the major portion of the new admissions, with botanicals represented only by a monograph on Siam Benzoin.

The specifications for the new drugs appear to be quite adequate for the purpose intended. Many of the specifications in the monographs from the previous edition of the Codex have been revised by the adoption of identification tests and assays possessing a greater degree of specificity than heretofore. Specificity of identification tests is desirable, but not absolutely essential, because they are designed for application to labelled products. It is not always possible to devise specific assay procedures. It might be argued that the determination of nitrogen in disulfiram and total alkaloids in rauwolfia are not sufficiently definitive for determining the strength and quality of these drugs, but in these and in comparable instances the choice of an assay procedure is limited by the lack of availability of more adequate methods. When such assay procedures are considered along with other criteria of quality they serve adequately until more specific ones can be devised.

Nomenclature in the new edition of the Codex has undergone a major change since the publication of the 1949 edition. English has replaced Latin for the primary titles of all drugs, but Latin titles have been retained in a secondary position or as synonyms. In general, the style of the monographs and the arrangement of the text is quite similar to that used in the B.P.C. 1949. Part II, covering antisera, vaccines, and related substances, has undergone notable revision by the elimination of sera and vaccines which have largely been replaced by the antibiotics, and the addition of a limited number of monographs belonging to the latter category. In a similar manner Parts IV and V furnishing specifications for surgical ligatures and sutures, and surgical dressings, respectively, have been revised.

The formulary section, constituting Part VI, has been more extensively revised than any of the other sections. Many pharmaceutical preparations which have passed into limbo, such as decoctions, emulsions, extracts, infusions, liquors, and syrups, have been deleted. Many of these deletions represent preparations of basic drugs deleted from Part I. A few modern preparations have been added to the formulary section. Standards of quality have been provided for a much higher proportion of these dosage forms than heretofore. This has been made possible in part because of the availability of suitable specifications for the preparations admitted, which was not true of many of the preparations deleted.

Appendices are provided relating to such subjects as tables of equivalents of weights and measures, reagents, quantitative tests for arsenic and for lead, determination of alcohol content, and other comparable general information and tests. The section on isotonic solutions, formerly

THE BRITISH PHARMACEUTICAL CODEX, 1954

appearing in the formulary under injections, has been transferred to a separate appendix.

The magnitude of the task of revising and producing a book of standards and action and use information on a scope even approaching that of the Codex cannot be appreciated unless one has been engaged in comparable projects. The Codex Revision Committee particularly, and all who contributed to the work of revision deserve the gratitude of pharmacists everywhere. While the Codex is designed especially to fill the needs of pharmacists in the British Commonwealth, it deserves wider circulation as a useful pharmaceutical reference book. The Codex Revision Committee is to be congratulated upon the high degree of excellence achieved in the Pharmaceutical Codex, 1954, and the Pharmaceutical Society of Great Britain is to be commended for sponsoring its publication.

BOOK REVIEW

GEHES CODEX. Eighth Edition. Pp. xi + 927. Wissenschaftliche Verlagsgesellschaft m.b.H., Stuttgart, 1953. D.M. 75.00.

The eighth edition (1953) of Gehes Codex, edited by George Otto, replaces the 1937 edition with its supplements published in 1938, 1939 and 1949. It is mainly an encyclopædia of German medical specialities, over 13,000 of which are tabulated in alphabetical order. The information concerning each proprietary product comprises the published composition, the purpose for which it is recommended, the form in which the preparation is issued, the name and address of the manufacturer, and also of the distributor, if other than the manufacturer. A few preparations not of German origin are mentioned, but only when they are marketed by a German firm; this policy was not quite so pronounced in the earlier editions.

The information given about each product is that supplied by the manufacturer without additional comment. Sometimes the full composition is stated, more often the active ingredients only are mentioned and occasionally the composition is not disclosed at all.

In the preface to this edition, there is a useful list defining international and other standard units for drugs in current use in Germany and mentioned in various preparations in the book.

The book has been deliberately limited to medical specialities; such preparations as cosmetics and pest and parasite controls have not been included. This comprehensive book will be of immense value to German pharmacists, but its use outside Germany will be somewhat limited as most pharmacists dealing with foreign medical specialities would prefer a volume containing a smaller collection of currently prescribed products from various Continental countries.

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