

## Pharmacy in England.

German Competition In Surgical Instruments—A Physician dispenses a fatal dose of Strychnine for himself—A Monopoly of the word "Medical" Sought for—Now Examiners of the Pharmaceutical Society—Tea Tablets.

(From Our Own Correspondent.)

There is just now something like a flood of German instruments and sundries being introduced to the drug trade in England. Clinical thermometers are being offered in nickel cases at \$40 per dozen, which is surely "rock bottom." Besides this there are binaural stethoscopes selling at prices fully 50 per cent. lower than only a few years ago. The patent of a well-known firm of manufacturers of seamless enemas having expired, there are any number of imitations on the market. Most of these it is quite incorrect to describe as "seamless." They certainly appear so on a cursory inspection, but closer examination shows that it is only the heavy enamelling on the surface that hides the seams. In addition to these, the antiseptic era of surgery has proved a fine opening to the German instrument manufacturers, and these goods are being largely manufactured in one solid piece of steel, or in such a manner that they can easily be taken to pieces and sterilized. All the leading hospitals are adopting sterilizers or autoclaves, by means of which instruments, bandages, etc., can be effectually sterilized by heat. Some of these pieces of apparatus are very elaborate and very expensive. The large-sized sterilizers are fitted with safety valves, tubalures for thermometers, etc., and frequently cost as much as \$50 to \$100. Simple copper cases for scalpels, small aseptic knives, etc., are made so that they can be placed over a Bunsen burner and heated to redness. As the scalpels and knives are made of solid steel, very effective sterilization can thus be assured, whilst no deterioration takes place. One of the greatest drawbacks to the use of antiseptic and germicidal solutions, such as corrosive sublimate and sal-alambroth, was the corrosion of the instruments. Sterilization by heat is quite as effective, and without this serious drawback. With regard to the cheap clinical thermometers alluded to above, it should be noted that these catch lines are frequently of very inferior quality. The inaccuracy of clinical thermometers is notorious, and an examination of a number a few years ago indicated that the graduation was so incorrect that readings were frequently more than a degree or two out. *The Lancet* recently raised a protest against "half-minute" clinical thermometers. These quick reading thermometers are misleading, according to *The Lancet*, as the mere opening of the mouth to introduce the instrument reduces the temperature so much that, at the expiration of half a minute, the full temperature is not restored.

The accidental death of a doctor in London is reported as being due to his inadvertently taking an overdose of a strychnine mixture for neuralgia. He

was a particularly handsome man and always immaculately dressed, and yet it was not his first mistake in dispensing. It is related that some time ago he was observed rushing hatless from his surgery in order to overtake a patient. It transpired that he had doubled the quantity of medicine, but forgotten to alter the dose. With regard to his last fatal error, by which he lost his life, it is exceedingly probable that he had the whole of the strychnine dissolved in a glass measure ready to put into the mixture bottle. He was called away from the dispensing counter for a moment and on his return raised the measure to his lips and drank the contents, thinking it was a measured dose from the medicine bottle. He lingered for nearly an hour, and his death was most painful, owing to the continued tetanic spasms, which, in spite of medical assistance, were uncontrollable. It is surely the irony of fate that the deceased doctor was the author of an article, published in a medical journal only a year or two ago, advocating the advantages of a special and distinctive bottle always to be employed for poisons.

A precious bill has just been introduced by the British Medical Association, in order to secure the monopoly of the word "medical." Thus it is laid down as a penal offence for any one, not a legally qualified medical man, to assume, use, or take the title medical practitioner, medical specialist, medical dispenser, medico-herbalist, medico-electrician, and so on. The penalty, therefore, which a pharmacist would incur if he should dare to call himself a medical dispenser (which is just what he is), or his pharmacy a medical hall, is the liability to imprisonment for twelve months. It need hardly be said that there is not the remotest chance of the bill ever being passed by Parliament, but it is a fine specimen of the cool assumption of some of our notoriety hunting medicos. It must be admitted that the medical profession suffer considerably from the illegitimate practise of medicine by persons totally unacquainted with the subject. But a body that cannot agree to let nurses be properly examined and registered without showing a degree of jealousy, which has made it a laughing-stock, is hardly to be encouraged in the endeavor to secure anything further in the way of a monopoly.

The introduction of professional examiners on the Examining Board of the Pharmaceutical Society has had no appreciable effect on the number of passes and failures. It is rumored that Professor Green is particularly severe, although it is not stated whether his own students at Bloomsbury Square, with whom he is immensely popular, experience the same severity. The character of the examinations cannot fail to be improved by the addition of these professors to the Board, and they are naturally more in touch with students, and understand the requirements which a student should be able to satisfy better than pharmacists who have left

their schooldays long behind. The new examiners include Professor Percy Frankland, F.R.S., of Mason's College, Birmingham, and Professor McLeod, of Cooper's Hill College, who will take chemistry at the London examinations, and Professor J. Gibson, of the Heriot Watt College, at Edinburgh. Professor Green, D.Sc., M.A., of the society's school, and Mr. A. C. Seward, M.A., Lecturer and Examiner at Cambridge University, will take botany in London, and Professor Patrick Geddes, of University College, Dundee, will examine in the same subject in Edinburgh. The Pharmaceutical Society is certainly fortunate in obtaining the services of such eminent men, as the emolument is not large. Travelling expenses are, of course, allowed, but the fees are only \$16 per diem, and the examinations now only run into some twenty days in the year.

Some time ago I mentioned the introduction of compressed tablets of tea by Messrs. Burroughs, Welcome & Co., and there is no doubt that they have "caught on" with the public, and particularly with the travelling section. Special care is taken to select the tea leaves and remove the mid-rib, after which it is crushed and compressed. When infused in a cup of boiling water, preferably by means of a patent straining-spoon, a capital cup of tea is produced in a few moments. I understand that Messrs. Burroughs, Welcome & Co. have had to have special tabloid machines erected for the purpose, and the demand for the tablets is sufficient to keep four or five constantly going. The latest idea, introduced by the Terrabona Company, is decidedly novel, and a step in advance. They have introduced packets of tea, milk, and sugar combined, and the ingredients, sufficient for at least three cups of tea, are enclosed in a gelatine wrapper. The use of the gelatine covering is still further claimed as a novel improvement, as it is stated to precipitate the tanning from the tea. This latest novelty is put up in packets, to retail at two cents each, and supplied to druggists at \$2.16 per gross, and it is claimed that it will prove a boon to tourists and travellers. The invention is duly protected by patent, and as an attractive novelty will doubtless command a ready sale.

**SALUBRIN**, a specialty prepared in Switzerland and recommended as a strong antiseptic and haemostatic, is said to consist of about 2 parts of acetic acid, 25 parts of acetic ether, 50 parts of alcohol, and 23 parts of water. It is used as a dressing for wounds.

**SUBLIMOPHENOL**.—By bringing together equal molecules of mercuric chloride and potassium carbolate, and gently heating the solution, a brick-red precipitate, which passes through yellow to white, forms, consisting of a mixed chloride and carbolate of mercury. This has been termed sublimophenol. Washed, dried, and dissolved in boiling alcohol, it forms, on cooling, colorless crystals.