

the fact college entrance in the United States is at a level one year below our senior matriculation, this course of studies is considered to parallel the Canadian standard. In Great Britain, effective from September 1965, all entering students are required to take a baccalaureate course of studies. Again considering the entrance level, in this case one year beyond Canadian senior matriculation, this training is of equivalent length to the Canadian standard.

We wish to draw the Committee's attention also to a misconception which appears to exist in some quarters that the present course of studies represents four years of professional training. In point of fact the equivalent of two years is made up of courses in general education and in basic physical, biological and medical sciences which provide an essential background to the professional courses. This background is necessary for a proper understanding of the nature and uses of modern drugs and we support the concept that, as our drugs have become more complex in nature, more specific in their action but at the same time more prone to side effects and adverse reactions, the pharmacist, as the expert on drugs, is becoming more significant in health care for what he knows than for what he does. This belief brings us into direct conflict with the interpretation presented to the Committee by Mr. Bass and which appears to view pharmaceutical services merely on the basis of the physical act performed in dispensing the prescription.

Safety Factors provided by Pharmaceutical Services

We submit to the Committee that the corner-stone of the legislation exemplified in provincial pharmacy acts and in federal drug regulations is the fact that drugs are potent agents and that both indiscriminate use and misuse can be hazardous. It is for such reasons that certain restrictions are placed on their distribution and that certain responsibilities have been placed upon the profession of pharmacy. The modern curriculum has been designed to create an expert on drugs, one who understands the physical, chemical, and biological properties of the drug and its structure-activity relationships, the biopharmaceutical aspects of the various dosage forms, and the pharmacology of drug actions, including undesirable side reactions.

Inasmuch as prescription drugs are not marketed as are other commodities, and to the extent that they thus are removed from unrestricted competition, and also because their servicing requires a substantial measure of professional time and care, such arrangement does make for a built-in additional cost factor. We believe that the matter of the amount of pressure that the pharmacists' remuneration for professional services rendered can withstand before a deterioration of safety standards sets in is one that merits careful consideration.

We have no hesitation whatever in placing our organizations firmly on record as opposing Mr. Bass's appraisal of the individual pharmacist's daily dispensing potential. Without necessarily discounting his contention that he has achieved a higher output by introducing assembly-line methods at his prescription counter, we believe that dispensing techniques do not properly lend themselves to this treatment.