

result ; and although it was very properly suggested that an unusual dose of any poisonous substance should always be explained by some well understood mark or symbol, it is impossible not to feel that in this, as in most cases, there is something to be said on both sides. We must remember that great responsibilities devolve on those who are empowered by law to dispense medicines, that the issues of life and death may depend on the slightest slip or mistake, that they may be at any time held liable for serious consequences. On the other hand, we are all of us liable to error, and in our younger days many of us have, no doubt, inadvertently put on paper some hurried combination of drugs in dangerous quantity, which, if made up as written, might have caused an inconvenient or even fatal result. It is clear, therefore, that the deliberate reading over and consideration of our prescriptions by skilful and highly practised dispensers, may be of essential service in correcting mistakes which carelessness or ignorance not unfrequently brings about. And although the British Pharmacopœia was not originally intended in any way to regulate dosage, although information on this score was only added to its second edition "in compliance with a generally expressed wish," and although these directions are not authoritatively enforced by the Council, and "the practitioner may rely on his own judgment and responsibility in graduating the doses of any therapeutic agents which he may wish to administer to his patients," the very fact of the doses being appended at all gives them an official sanction which it is clear was not originally intended. But these directions, such as they are, constitute all which the druggist has to rely upon for information or support under doubtful and exceptional circumstances. Supposing he is called upon to give over into inexperienced hands a bottle of medicine, which his *vade mecum* tells him is far too strong, and supposing at the same time that he is unable to communicate with the prescribing medical man, he is undoubtedly placed in a position of some perplexity. Grant also, however, that the doctor whose prescription is either rejected *in toto*, or mutilated in some way, and the patient whose interests may be gravely imperilled by such a line of action, are possibly sufferers both in reputation and in health, and the evidence begins to point pretty plainly to the necessity for some alteration in our present system. I do not suppose I can be singular in my experience in having had prescriptions referred back to me for supposed correction, because I have ordered doses which are well known to be necessary for the proper development of the action of a special drug. Thus, on one occasion when I ordered succus conii in  $\zeta i$ . doses for acute chorea in a girl of ten, the dispensary prescriber considered it his duty only to give a drachm, and on my next visit pointed out with some concern what he naturally believed to be a mistake. Here no harm was done, for the patient afterwards getting her proper dose was rapidly cured, and the dispenser hailed with satisfaction this addition