# CANADIAN DRUGGIST.

DEVOTED TO THE INTERESTS OF THE GENERAL DRUG TRADE AND TO THE ADVANCEMENT OF PHARMACY.

Vol. 3. Publishing House, STRATHROY, ONT.

FEBRUARY, 1891.

{ 6 WELLINGTON ST. WEST, } No. 2.

## CANADIAN DRUGGIST.

### WILLIAM J. DYAS, - Editor and Publisher.

SUBSCRIPTION, \$1 PER YEAR, IN ADVANCE. Advertising Rates on Application.

The Canadian Druggist is issued on the 15th of each month, and all matter for insertion should reach us by the 5th of the month.

All cheques or drafts to be made payable to the editor. New advertisements or changes to be addressed

CANADIAN DRUGGIST, TORONTO OFFICE, STRATHROY, ONTARIO.

6 Wellington St. West.

#### SPECIAL REMINDERS.

We issue on the 15th of each month, therefore, Correspondence should reach us by the 7th. New Advertisements should reach us by the 7th. Changes of Advertisements should reach us by

#### Purchasing Patent Medicines.

THE sale of patent medicines must necessarily form an important part of the stock-in-trade of the retail druggist, but it is one of those lines which, perhaps, more than any other, requires great care and judgment in purchasing. Proprietary articles which have fallen into disuse and consequently never asked for, are the worst kind of "dead stock," for, with very few exceptions, the purchaser asks directly for the article wanted, such as "Smith's Sarsaparilia," etc., instead of asking the druggist to recommend one, consequently it does not pay to buy any article for which a demand has not already been created. Notwithstanding this fact, how frequently do we find the druggist loading himself up with a stock of goods, of which he may never make a single sale, and which stock he would gladly dispose of very shortly after, if he could, at one-fourth of what it cost him.

The great evil seems to be that business men are anxious to obtain a supposed advantage over their competitors (we say supposed, because what patent or proprietary article is there on the market to day that cannot be purchased in any quantity desired from the wholesale dealer) and, the delusion that any man can obtain the complete control of a medicine is too absurd for any practical man to admit. But this is practically the real reason, as has been too often exemplified. The man who offers complete control offers precisely

what he cannot give, and the purchaser will find this to his cost. we have the manufacturer, or his agent, who represents that, on condition of the purchase of a certain quantity of his goods, you will not only have the full control of your section but you will receive a handsome bonus of something on which he places a fictitious value, and perhaps at the same time promises liberal local adver tising either through the local papers or by house to house distribution of samples, etc. Many druggists have found themselves in this way loaded down with goods, which although they may have some medicinal value, still they must be only charged to the wrong side of the "profit and loss" account. The trade should therefore be constantly on their guard "promises are like pie crust easily broken," and too frequently the druggist finds that in his desire to get a little ahead of his neighbor in business, he may possibly in the supposed advantage find himself the worse off. Our advice, after practical experience, is, do not purchase until an article is properly advertised and the demand created then and then only will you feel yourselt astified in placing the goods in stock. The manufacturer who intends to deal honestly with the retailer must and will see first that the demand is created, and this can only be done permanently and effectually through advertising. This advice we know is somewhat too late for many who have suffered in this way some of them but very recently-but we trust it may be the means of deterring others for whom the trap has yet to be laid, and

#### Pharmacy in the West Indian Islands.

if any of them will profit by our admoni-

tion we shall feel that we have saved money to at least some of the trade.

Now that considerable interest is evineed in the export trade of this country, and that negotiations have been begun by the Finance Minister of Canada looking to a further increase of trade with the West Indies, it would be well for the wholesale drug and patent medicine trade to see that in the anticipated increase of business in that direction, their lines should be fully represented. The amount of exports in the drug line, outside of perhaps one or two patent medicine houses, is very small, but if the negotiations mentioned are brought to a successful issue there should be no reason why a consider-

able trade should not be done there. In order to give some idea of pharmacy in these islands of 5,000,000 inhabitants, we append a portion of the article which appears in the Chamest and Druggist of Dec. 27th. Speaking first of Jamaica, it

"The island is governed by a governor and legislative council, assisted by a Privy Council, local affairs being attended to by parochial boards. The arrangements for education are good. It is as well to note that Kingston is the only town of over 10,000 inhabitants. It has nearly 40,000, and Port Maria, Spanish Town, Montego Bay, and Falmouth, are the next in importance. As to pharmacy there is a law, passed in 1881, preventing all but those properly qualified from selling poisons. Certificates of competency are granted by the superintending medical officer, under whom are a number of medical practitioners of the "Island Medical Service" retained by the Government as district medical officers. The examination is held periodically at times and places decided upon by the superintendent, and candidates pay £2 entrance fee. Every candidate must show satisfactory evidence of having been engaged for at least three years in the study of pharmacy, one year of which must have been devoted to dispensing work under a qualified medical practitioner or licensed dispenser, and pass in the following subjects .---

(a) Reading and translating autograph English and Latin prescriptions and detecting errors and unusual and excessive doses.

(b) Dispensing prescriptions and writing legible directions.

(c) Recognizing the extracts, pill "masses, powders, tinctures, wines, outments, &c., of the British Pharmacopa ia, and spe ifying their doses and the ingredients comprising them, and the method of their manufacture.

(d) Recognizing the backs, roots, leaves, goins, resins, &c., used in medicine, and specifying the officinal preparations into which they enter, whence they are chiefly obtained, and the names of the plants that produce them.

(r) Distinguishing by sight and taste (not analysis) some of the chief chemicals of the British Pharmacopeia, specifying their doses, the method of their manufacture, their characters, and tests.

Provision is made for re-examination in cases of failure, but after repeated failures candidates are sent back to their studies for a year. The medical board have power to accept such certificates as the British "Minor" in lieu of their own. Those who obtain the license are called licensed dispensers, and are eligible for the public appointments as such, to which salaries of \$50 to \$60 a year are