

Most physician's fail to recognize the pharmacist's position in such matters. They do not seem to realize that a certain amount of advice to the public is naturally expected, and morally legitimate and proper. The public demands a certain amount of advice and council from neighbors and friends, including the pharmacist. His advice is properly sought as to a convenient cathartic, the use of sweet spirit of nitre for a slight cold, or arnica for a bruise, etc.; also, as to the probable seriousness of certain symptoms, and necessity for securing medical attendance without delay; likewise advice concerning the proper disinfectant for unsanitary household conditions, etc.

Such advice by the pharmacist is surely legitimate and for the general good. He does not lose his right as an individual by being a pharmacist, and an individual would do the same from any acquired knowledge or experience. If there were no pharmacists, the public would probably in such matters depend as a rule upon the advice of less educated persons, or take their chances with these household remedies; not resort to the physician and pay a fee. As long as the pharmacist confines his advice to simple ailments or conditions, and sanitation, he can do much good, prevent much self-injury by the public, and do much toward educating the latter to have a higher regard for the services of a physician when such are required.

The pharmacist of to-day by means of the modern college of pharmacy curriculum, is also educated and qualified as to be capable of giving most advantageous first aid to the injured, pending the arrival of a physician, thus making the latter's efforts more fruitful in good results, and often saving life.

But the pharmacist who goes outside the lines of propriety and reasonable service to the public, and, without the physician's training or skill, attempts to supplant him by making physical examinations, or treating severe or serious conditions, is guilty of a crime against the patient and the physician, and, if for a re-

muneration, also before the law. Such a course is sure to ultimately result in disaster.

Educating the pharmacist as a physician, as proposed some two years ago by a prominent New York pharmacist, would gravely complicate the situation and surely tend to degrade both pharmacy and medicine. The pharmacist educated as a physician would be unnecessarily educated for pharmacy, and would soon cease to be a pharmacist. His pharmacy would soon become a dispensary; true pharmacy would be more and more neglected by him and the true exponents of both medicine and of pharmacy forced to take issue against him. This is a day of specialties. Pharmacy and medicine have each of them so broadened and deepened, and become so comprehensive, as to require the unceasing energy, interest, and devotion of the practitioner of either of them, in order for him to be a true and proper representative of that profession. To attempt to ride two horses at once is invariably to court disaster, particularly if each requires one's whole attention.

Respecting these complaints regarding substitution, it is evident that substitution is a crime against the patient, the physician, and the pharmaceutical association, of which crime he who thoughtfully considers the matter cannot unconcernedly be guilty. Upon a strict conformity to the provisions of the prescriptions oftentimes depend the successful career of the physician, and the pharmacist, and the salvation of the patient. Honor and self-interest demand that these considerations be not ignored.

The pharmacist who recommends a patent medicine or specialty, the constituents of which are unknown to him, assumes a great risk and is likely to some day most uncomfortably see the error in such procedure.

Medical favoritisms by pharmacists are usually unwise, and the criticizing of one physician's prescriptions and treatment in a case in the interest of a physician friend or favorite, is most reprehensible, and quite a serious matter in case of a rupture