

We accept no responsibility; they take the chances, which frequently end in a subsequent consultation of a regular physician.

5. Were we to prescribe and fail to cure, which would most likely be the case, what a name we would soon have! and what is more serious, our medicines and wares would partake of the same reputation—no account all round.

No! dicker with outside things the pharmacist has learned does not pay. Consequently, we say of all such, *hands off*. To summarize, I am confident that whatever is prescribed over the counter would be of little value to the physician—not more than \$10 annually from each store. Those who seek drug store advice, as a rule, have no money to pay a physician, and often the medicine is furnished gratuitously, mainly to save bothering the doctor, hence an economy of forces all round. If it be true, as often said, that physicians, with all their knowledge and skill, are found frequently groping in the dark, how preposterous then is it to bring such an accusation against the druggist, who is so little acquainted with the physiological action and therapeutics of medicinal agents! On this score it is impossible for the pharmacist to antagonize, to any extent, the physician's work and usefulness.

Second. As to Repeating Prescriptions.—There is no doubt but that the regulation of this is solely under the physicians' control, and the pharmacists will only too gladly co-operate with them at any time, provided it be so desired, in crushing out the supposed evil. We frequently hear persons say when handing us a box or bottle: "*The doctor told me to get this medicine renewed.*" We can do nothing but obey, for we invariably take it for granted that the physician's wish is only being complied with. Would it not be considered, under such circumstances, the height of presumption—nay, arrogance, to do other than as requested?

Whenever the medical profession is ready to stop all prescriptions from being repeated, let it be so expressed by word or writing, and the pharmacists, in a body, will gladly see to its enforcement. While most of us are in the business for a living, we are not regardless of the interests of others, and will at all times go to the extreme to serve the sick or to please the physician, even though the pay involved be minimum.

No! the trouble is with the doctors, but they wish to charge it to the druggists. They have only to say to Mr. A. or Mr. B., under no circumstance is this prescription to be repeated, and also write same on the blank, and that will end the matter. The secret, however, of not enforcing such an heroic remedy lies in the censure that the physicians would incur. They have little unanimity among themselves, and, as all possibly would not come into such an agreement, those observing it would suffer a loss of custom, because such a digression would be bound to offend some, inasmuch as the laity has so long

been accustomed to no restrictions. Such then would employ; when needed, other medical advisers who did not observe the new regulation, and this would be to the disadvantage of those advocating its adoption. For this reason the onus of results is assigned to the druggists.

As an outgrowth from these two complaints, where will matters end? It is to note the tendencies more than anything else that this article is written.

Several months ago the writer was sent by the publishers a complimentary copy of a popular text-book on materia medica. This now, at the present time, is the latest work on the subject, and is supposed for the next few years to control the destinies of the medical students in our various schools, and what the impression upon the younger physicians is likely to be, as gleaned from some of the pages of this book, regarding pharmacy and pharmacists, it will not be difficult to predict. Let us read for a few moments some of its advice:

"It is doubtless a fact familiar to every observer that the old-time confidential relations between the professions of physician and pharmacist have almost passed into oblivion. In fact, the tendency of pharmacy nowadays is towards the position of a mere money-making trade instead of in the exalted direction of a profession. The indiscriminate renewing of prescriptions, the open sale of quack nostrums and homeopathic pellets, the readiness with which counter prescribing is indulged in, the insinuations too frequently made over the drug counter in reflection on physicians, and many other similar practices have caused the non-combatant profession to regard the average druggist with suspicion. If physicians boldly took the dispensing of medicines more into their own hands many of these evils would soon eliminate themselves from the drug stores."

It further advises physicians putting up their own prescriptions, citing England as a country where it is still in vogue, except in large cities, and also reminds us that as *Homoeopathy* does this, so should *Allopathy*. Thus continues:

"With a small stock of reliable fluid extracts, and an equally moderate supply of gelatin-coated pills and compressed tablets from the best houses, physicians could checkmate the unscrupulous practice of many druggists to a great extent, save their patients many dollars, and retain many a dollar for their own pockets which under the present system goes to their ENEMIES, etc."

Now, is not this nice language to be in a text-book by an eminent physician, supposed to know whereof he writes? How much more generous it would have been of him to have ameliorated our shortcomings and to have given us clever advice, thus trying to bring the two professions nearer rather than farther apart! Such writings in some cases reflect upon themselves, but often, as probably in this instance, they do damage—incalculable injury, and what is worse, the druggists

are powerless to answer such an untruthful tirade or satire so as to have effect with the medical students. The latter see but their own books and writings, consequently ours seldom ever reach their close inspection, and they will only learn faulty assertions by sheer experience, and that extended over a long time.

Again, some few weeks ago, came under my notice an article in *The Medical Progress*, entitled "Shall Physicians Dispense Their Own Drugs?" in which we are in many instances wrongfully accused, thus:

"The druggists substitute, treat minor ailments, cut off physicians' income. Formerly a physician could not dispense his own drugs if he did a large practice, but modern pharmacy has come to his assistance, and this is possible, independent of the druggists. If necessary, the physician can employ a drug clerk. The hope of reforming druggists who prescribe is vain. The physician must look in another direction for relief from this infringement. Unless druggists are content to live by their business and quit usurping the place of the physician, they may soon expect to see a certain place in every physician's office occupied by a line of drugs, etc."

This is a little milder and teemed with better discretion all around.

Again, we noticed in a recent editorial from *The Medical News*, entitled "Physicians Should Dispense Their Own Medicines," quite a number of their characteristic reasons, thus:

"1. Chemical and pharmaceutical science and art have reached such perfection that it is now possible to do so.

"2. It saves the patient money and trouble.

"3. The ordinary character finds it hard to pay for simple advice.

"4. In emergency cases and in severe forms of acute diseases, time is saved and the disease more effectually withstood by the immediate administration of the needed remedy.

"5. The accidents of prescription writing and of prescription filling are lessened while at the same time (with proper care and watchfulness over laboratory preparations) the efficacy and physiological effects of drugs are assured.

"6. It will lessen the evils of hospital abuse, drug-store doctoring, the system of druggists' commissions to physicians, and of counter prescribing."

We have enumerated sufficient sources of authority to show that the subject is, just now, receiving by the medical profession more than a passing notice. Now, there is not truly an argument in any of these citations which cannot be masterly and successfully confuted, but time nor the space in this article will admit of the undertaking. Enough, in comment, is said when pharmacists are reminded of the purpose and intent of the medical fraternity, so that "by being forewarned we are forearmed."

There is however, nothing for the pharmaceutical profession to do but to await developments. Let us, therefore, go along in the even tenor of our way, being