

LABORATORY
OF THE
INLAND REVENUE DEPARTMENT
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Headache Powders.

OTTAWA, December 6, 1911.

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Deputy Minister of Inland Revenue.

SIR,—I beg to submit herewith a report upon one hundred and fifty (150) samples of patent or proprietary medicines, purchased throughout the Dominion as Headache Powders, in April of this year. Each sample has been worked in duplicate, using two of the dozen powders usually supplied in a package. The report therefore represents three hundred (300) distinct analyses.

In most cases the duplicates are very similar, as regards the content of the potent drug; indicating thereby care in their preparation. In a few instances, the duplicate powders show considerable variation in the amount of the potent drug contained.

The last collection of articles of this kind was made in June, 1905, and the results of their examination are contained in Bulletin No. 113. At that time thirty samples (30) were examined, and all but two (2) were found to contain acetanilide (Antifebrin); as the effective component. This drug continues to find the greatest vogue in these powders, and is found in one hundred and eighteen samples (118) of the present collection; in a few cases associated with phenacetin, but usually alone, as the effective component of the powder. Phenacetin is present, as chief ingredient, in twenty-four samples, (24) while eight (8) samples contain aspirin (acetosalicylic acid) a drug which is not scheduled by the Proprietary or Patent Medicine Act.

The drugs chiefly used in these powders are known to the medical profession, to pharmacy and to chemistry by other names than those by which they are known to the public. Acetanilide and Antifebrin are the popular names of the first named drug; but phenylacetamide and acetyl-amidobenzene are technical synonyms. Phenacetin is also known as para-acetphenetidin or para-oxyethylacetanilide. When declaration of the presence of a drug is made on the label as required by Section 7 of the Proprietary or Patent Medicine Act, this is for the purpose of informing the public, and it is reasonable to expect that the common name of the drug should be used. To employ a synonym of technical import only, is as effectively to disguise the presence of the drug as the omission of the name altogether for most people. I would suggest that a departmental ruling be made so as to make compulsory the employment on the label of the commonly accepted names of drugs. I would also draw attention to the fact that the