

he is brought face to face with the question before us—and which, under such circumstances, assumes a grim aspect—What constitutes a drop?

As it is not practicable, for obvious reasons, to abolish the use of the term "drop," and substitute minim, universally, it is exceedingly important that some instrument should be adopted by the Pharmacopeias as the only official drop former, and the drop formed by this instrument should invariably be the quantity signified whenever the drop is directed or intended by the manufacturer or prescriber, or measured by the dispenser.

No further argument is needed to illustrate that the proportioning of doses by drops, formed in the present unofficial, indefinite, "as-you-please" manner, is not only productive of confusion, but may, on the other hand, lead to falling far short of, and on the other reaching dangerously beyond the desired effect.

What then—it is repeated and emphasized—what, then, constitutes a drop? Or what shall be adopted as the official drop-former?

It is needless to add that when this matter shall have been authoritatively settled, the prescriber will be able to substitute preciseness for vagueness in proportioning his dose of liquid poisons, the prescription druggist will be able to know instead of guess at the quantity of such poison wanted, and human health and life will be safer at the hands of both.—*Registered Pharmacist.*

Medical Men and Pharmacy.

THE practice of medicine and pharmacy combined, as is frequently the case in this country, is detrimental in many ways both to those who carry on such practice and to the public. Originally an apprentice to an apothecary served five years; this was afterwards reduced to one year, the other four being devoted to a compulsory curriculum after registration as a student before he could present himself for his "pass" examination. Now the Apothecaries' Hall only requires a three-months' course of pharmacy and dispensing, and the conjoint Board of the Royal Colleges of Physicians and Surgeons requires no stipulated time to be devoted to the subjects of pharmacy and materia medica, or even to chemistry. All that is necessary is that the schedules are signed to the effect that the student has received instruction in the different subjects to the satisfaction of a teacher, who, for pharmacy, may be a member of the pharmaceutical society. As there is no examination in practical dispensing, I fear the work is generally done in a very perfunctory manner, and that the knowledge gained of this subject is, in many cases, the minimum.

As it is much more important for a surgeon to know a sharp knife than to know the varieties of iron ore, so a physician ought to be acquainted with the medicinal preparations he prescribes, rather than with the crude drugs from which they are obtained. He should not be like the med-

ical student, who, parrot-like, said of gum arabic, "it is soluble in alcohol and insoluble in water, or the reverse, but I am not sure which."

It is proposed that the compulsory course of medical study be extended to five years; but as these subjects—chemistry, pharmacy and materia medica—may be studied prior to registration as a medical student, I think a course of six months' practice under the eye of a pharmacist would be of great service to the embryo medical practitioner before commencing his hospital career. The courses of chemistry and materia medica might be taken simultaneously, and probably under the same teacher.

If the coming race of medical practitioners receive no practical training in pharmacy, they will have no confidence in prescribing, because they will never have known their medicines. They will thus become a prey to advertising manufacturers of ready-made mixtures and specialties in place of making use of official or official preparations. With the B.P. more under the influence of pharmacists, as I expect in future it will be, and our Unofficial Formulary entirely under our own control, I trust in future we may be able to set before prescribers a better array of preparations than they have hitherto had.

If the medical licensing bodies do "throw physic to the dogs," quackery will become more rampant, as the public will have medicines, and have them "elegant" or agreeable to take. Not only so, but the public demands also to have them convenient for use, and in a stable and portable condition. The division of labor tends to perfect the processes of elegant pharmacy. The irresistible fact must be acknowledged, not only in pharmacy, but in all the arts and manufactures, that though the making of preparations in a wholesale manner may in many cases be detrimental to retailers' interests, yet if it be for the public weal, the practice will be irrepresible. The age of boluses is past, and the polypharmacy of former times will not go down in the present day.—Extract from Mr. Martindale's Presidential Address, British Pharmaceutical Congress.

The Ownership of the Prescription.

This question has been settled by law in New York, Massachusetts, and a few other States. They all give the prescription to the druggist. Some time ago a judge of a court in Berlin, Germany, gave a similar decision. The text of the decision from the judge of the supreme court of one of our States is as follows: "The question before the court seems to be very simple, indeed. A patient applies to a physician and receives from him certain advice, for which he tenders a fee. The physician hands a piece of paper to the patient, purporting to be a written order for certain goods called drugs, which order is filled by a merchant or apothecary. The payment of the fee and the delivery of the goods or drugs, terminates

the verbal contract, and the druggist keeps the prescription as an evidence that the contract has been fulfilled, as far as he is concerned. The druggist can, if he so please, on his own responsibility, renew the drugs, for he is but a merchant, and has a perfect right to sell drugs to any one and in any shape. He need not keep the prescription, nor is he bound to give a copy, but should error occur, he has no protection in case of suit."—*The Pharmaceutical Era.*

Borax and Chloral.

THE growing practice of ordering "borated chloral," or a mixture of borax and chloral, for certain throat affections has induced a French pharmacist, M. Dujardin, to publish a note calling attention to the fact that the product supplied will vary with the temperature at which it is prepared (*Bull. Gen. de Ther.*, July, p. 91). When the solution is made in the cold, as the borax is without perceptible action on chloral at a low temperature the latter will remain intact in the solution. With the application of heat, however, the two compounds will react, and chloroform will be liberated from the chloral and may remain in the liquid. Should the liquid be allowed to boil a few minutes, the whole of the chloral would be decomposed and the resulting chloroform would volatilize. M. Dujardin therefore recommends that if in making this preparation heat be used to dissolve the borax, the solution should be allowed to cool before adding the chloral.—*Pharm. Journ.*

Sierra Leone Druggists.

THE British West African Colony and Sierra Leone is a place where the public have a proper sense of the dignity and importance of the pharmaceutical craft. It is also a suitable locality for putting a man's faith in his principles to a practical test. This is what the acting Governor reports in his review for the year:—"A draft of 'The Sale of Drugs and Poisons Bill,' which was printed, but not presented to the Legislative Council, was viewed by the public generally as limiting the influence and practice of the druggists, and it was accordingly unfavorably received. A small party of American missionaries arrived in the colony in the early part of the year with the view of proceeding due east into the interior. They tried to live in Freetown as the natives do, and, being believers in the faith-healing doctrine, they objected to medical treatment. It was only to be expected, therefore, that they would be struck down with fever, and in less than a month after arrival three of them died."—*Chemist and Druggist.*

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