

# Preface

THE essays contained in this booklet were first published in the *Journal of the American Pharmaceutical Association* as part of the sesquicentennial celebration of APhA. Working with the editorial staff of the *Journal*, I helped to determine the topics and authors of the series, which was published during 2000, 2001, and 2002. George Griffenhagen contributed valuable input and selected appropriate illustrations from the APhA Foundation Archives.

After receiving requests from instructors, the Institute decided to colate the pieces by topic into a single booklet. Far from a comprehensive text (each general subject deserves its own book-length treatment) this set of essays instead serves as an introduction to six key aspects of pharmacy's history in the United States from 1852 to 2002: Practice, Science, Education, Industry, Organizations, and Governance. Composed by nine different authors, the essays sometimes overlap and repeat information, which reflects the interwoven reality of the complex pharmaceutical enterprise. Rather than edit out these redundancies, we have left them in so that each essay remains useful for teaching and reference purposes. Those readers looking for more comprehensive treatments of these topics are referred to *Kremers and Urdang's History of Pharmacy*, revised by Glenn Sonnedecker, 1976, reprinted 1986 by AIHP and *Pharmacy: An Illustrated History*, by David L. Cowen and William H. Helfand, 1990. For more bibliographic guidance, consult the end of Chapter 2, "Evolution of Pharmacy," in *Remington: The Science and Practice of Pharmacy* or the website of the American Institute of the History of Pharmacy ([www.aihp.org](http://www.aihp.org)).

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# Introduction

## American Pharmacy Before 1852

*by Gregory J. Higby\**

WHEN twenty men gathered in Philadelphia in 1852 to found the APhA, it was a turning point rather than a beginning. These pharmacists took a significant step away from purely commercial concerns toward the goal of achieving professional status for their chosen occupation. It would take decades of progress on several fronts for this goal to be reached. The short essays that follow describe six key areas of this development.

Much had happened in American pharmacy before 1852. Although few trained health care practitioners came with the first settlers to North America, the pioneers came equipped with home medical books and domestic (“kitchen”) medicine. As the colonies prospered in the early 1700s, towns grew in size to support businesses such as apothecary shops. In British North America, physicians ran most apothecary shops, combining medical and pharmaceutical practice. The boundaries between medicine and pharmacy were fuzzy at best.

Some eighteenth-century practitioners in the largest cities limited their trade to medicine making and selling. Druggists sold drugs and medicines wholesale to apothecaries, physicians, surgeons, and general store owners. They also dealt in the trade of patent medicines (nostrums), which grew in popularity throughout the 1700s. Almost all the drugs, chemicals, spices, and medicines they sold were imported from England. Few laws applied to pharmacy practice in the Anglo-American colonies and the free market regulated the scene until the 1870s.

The Revolutionary War interrupted trade with England and forced American druggists and apothecaries to obtain their goods through other channels. And while the old trade routes for importation were re-established at war’s end, the young United States did have in place a domestic network for the packaging and distribution of drugs and medicines. Most pharmacy, i.e., the compounding of medicines, was still done by physicians in their own

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“doctor’s shops” or by their apprentices. The number of non-medical practitioners of pharmacy was small and without a sense of group identity.

Change came to the American pharmaceutical enterprise in the early 1800s. Physicians in larger numbers attended medical schools and gained clinical experience in hospitals and dispensaries rather than with individual preceptors. In these settings, they learned to write out prescriptions for apothecaries to compound and dispense, thereby stimulating the growth of pharmacy. Indicative of this development was the publication of the Massachusetts Pharmacopoeia in 1808 as a state guide to drug standards. It defined the identity of drugs and preparations so that apothecaries could properly fill the prescriptions of physicians. A national convention of physicians authorized the first *Pharmacopoeia of the United States of America* in 1820.

The appearance of these books reflected both the growing amount of prescription writing and the medical profession’s increasing reliance on pharmacists. The number of pharmacy practitioners in urban areas reached the critical mass necessary for the establishment of local organizations such as the Philadelphia College of Pharmacy (1821) and the Massachusetts College of Pharmacy (1823). These colleges (the term being used in the sense of associated colleagues) established night schools for the instruction of apprentices and discussion groups on scientific pharmacy. It was an exciting time with alkaloidal chemistry adding new potent drugs to the *materia medica*. The young American pharmaceutical industry, which arose during the War of 1812 with Great Britain, quickly turned to meet the demands for new products.

Between 1820 and 1860 the boundaries of practice between physicians and pharmacists were drawn. East Coast apothecary shops became more standardized in their appearance and in the stock they carried. Pharmacy followed the trend of specialty retailing and concentrated on drugs, medicines, surgical supplies, artificial teeth and limbs, dyestuffs, essences, and chemicals. Grocers took over the selling of exotic dietary items such as figs, raisins, and citrus fruits. Drugstores in small cities and towns, however, tended to keep in stock more general articles such as glass, paints, varnishes, and oils. Above all, apothecary shops became the main distributors of patent medicines, one of the most profitable lines of merchandise in the history of American business.

Relations between physicians and pharmacists were generally good during the 1830s. Physicians welcomed the early pharmacy colleges and served as faculty in their schools. They supported the independent occupation of pharmacy as a necessary division of labor in a developing society.

The relationship between physicians and pharmacists deteriorated in the 1840s. Feeling more confident of their social standing, apothecaries shifted their efforts from pleasing physicians to attending to the ills of customers. Consequently, American apothecaries took to refilling prescriptions without physician authorization and directly treating customers, a practice called counter-prescribing. In the large cities, doctor’s shops were back on the rise after a decline of two decades. Medical schools turned out graduates by the hundreds, most of whom sought their fortunes in urban areas, where they would open shop. Physicians and pharmacists competed directly and sometimes with open hostility.

America had become the dumping ground for the poor quality drugs of

Europe. While it had been common since colonial days for exporters to send shoddy goods overseas, the situation worsened in the 1840s. The drug market within Europe tightened up through regulation. Moreover, the emergence of alkaloidal chemistry made it possible to extract quinine or other alkaloids from medicinal plants and then send the partially (or fully) exhausted bark or root off to America.

The young American Medical Association, working with the local medical and pharmaceutical societies in New York City, helped push through the Drug Importation Act of 1848. The law called for the appointment of special examiners at six major ports of entry—New York, Boston, Philadelphia, Baltimore, Charleston, and New Orleans. Each inspector would check for “quality, purity, and fitness for medical purposes” using the major pharmacopoeias and dispensaries, including the USP, for standards. Although the new law worked well initially, political cronyism soon filled most of the inspector posts with incompetents.

In order to battle this situation, a convention of pharmacists was called together in New York City in 1851. The organizers hoped that a firm set of standards for purity would be approved by the convention for use by the inspectors. The Philadelphia delegation, led by William Procter, Jr., went to New York with an additional agenda in mind—the establishment of a national pharmacy organization. Both were accomplished: the convention came up with a set of standards and called for a national convention to meet in Philadelphia the next year, which resulted in the American Pharmaceutical Association.

When APhA met in 1852, the young organization discussed nine ambitious objectives:

- Create a national association with a constitution and code of ethics;
- Support schools of pharmacy;
- Improve the selection and training of pharmacy apprentices;
- Investigate secret medicines and quackery;
- Urge enactment of laws for the inspection of imported drugs;
- Adopt a National Pharmacopeia as a guide in preparing medicines;
- Curb indiscriminate sale of poisons;
- Separate pharmacy from the practice of medicine;
- Encourage presentation of original papers on pharmacy and science.

All were enormous challenges at a time when there existed no state regulation of pharmacy and just a handful of isolated local pharmaceutical societies and schools. Yet, the APhA met all of these objectives, some after decades of dedicated struggle. The essays in this book celebrate these achievements and point toward the continuing progress of American pharmacy.

## Sources

- Higby G. Evolution of Pharmacy. In: Gennaro AR, ed. *Remington: The Science and Practice of Pharmacy*, Baltimore: Lippincott Williams & Wilkins; 2000: 11-13.
- Higby G. Drug Quality and the Origins of the APhA: The 1851 Convention of Pharmaceutists and Druggists. *J Am Pharm Assoc.* 2002; 42:831-835.
- Griffenhagen G, ed, 150 Years of Caring: A Pictorial History of the American Pharmaceutical Association, Washington, DC: APhA, 2002:6-7.

