## HISTORY OF PHARMACY SIG NEWSLETTER PHARMACY CHRONICLES: PAST, PRESENT, AND FUTURE

#### HISTORY PHARMACY

t h e Inaugural History of Pharmacy SIG Newsletter

Welcome to the inaugural issue of the History of Pharmacy Special Interest Group (SIG) Newsletter. For me, and I believe for the SIG, this inaugural newsletter is the culmination of a year of progress. As some of you are aware, my personal mission this past year was to reinvigorate the SIG and its membership. Through the joint efforts of key SIG members, I believe we've accomplished quite a bit and I am sure in the future, there shall be more to come!

## ISSUE: Meet the Editors Editor's Message SIG Officers News Pharmacy Education Feature Articles 6.7 Collector's Library 8-9 Feature Article Apothecary Quiz ABOUT the SIG

INSIDE THIS

We began this past year by using the SIG listserv to communicate with the entire SIG membership; something not previously done. Since then, we solicited the SIG membership several times for assistance with various projects (pharmacy history course syllabi, launching a SIG newsletter, pharmacy collections and museums, CAPE educational outcomes) and you, the members, stepped forward. In addition, with yet another first, we surveyed the membership regarding what programs you, the SIG members, would prefer to see the SIG present at the 2014 AACP Annual Meeting.

Indeed we have achieved quite a lot., but there's still much more to do. The accomplishments of one year will not stand forever. The SIG's newsletter will continue only with the input of the membership, by providing future articles and editors. Projects we have started are far from finished, and many more could be started; however, only the input and assistance of the SIG membership will ensure completing these projects. I know that the SIG's incoming leadership have a strong desire to continue these, but they'll need your input and assistance.

So, as my year as SIG Chair winds down, let's look to the future, which begins with your enjoyment of this newsletter, and continues at this year's Annual Meeting, where we have an interesting educational program planned - attend, enjoy and earn some CE! Rather than becoming history, let's make some more: attend our business meeting the first of what I hope will be a long line of such meetings a joint meeting between the History of Pharmacy SIG and the American Institute of the History of Pharmacy. At that meeting, we will recount the past year, plan for next year, and install our new leadership. I look forward to seeing and meeting all of you there! Historically yours,

— David Baker, SIG Chair

Standards!

#### Restore History to A C P E

This February, ACPE released its ing clinical pharmaceutical care and Draft Standards 2016 and the other aspects of patient-provided phar-"Guidance Document". current (2007) ACPE Standards and contributors in the evolution of contain "History of Pharmacy" pharmacy. In Draft Standards 2016 as a separate domain topic with "History of Pharmacy" as a three statements of *required* curric- domain topic is completely gone! ular content: (1) Overview of the evolution of pharmacy as a distinct Tell ACPE to "restore history" profession; (2) Moving from focus on to the ACPE Standards by sendthe drug to focus on the patient including an email to:

The macist care; and (3) major milestones

standards@acpe-accredit.org, or by writing a letter to ACPE at - Draft Standards 2016, 135 South LaSalle Street, Suite 4100, Chicago, IL 60603. You can also express your own opinion via their online survey at: https:// www.surveymonkey.com/s/ FFGTB67. - Greg Highy, Executive Director, AIHP, SIG Secretary

### Meet the Editors



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## Message from the Editor

"THE **HISTORY** OF PHARMACY LIVES HERE...

THE **FUTURE** OF PHARMACY BEGINS
HERE..."

UNIVERSITY OF KANSAS,
 AT LAWRENCE, SCHOOL
 OF PHARMACY MUSEUM

Welcome to the inaugural issue of the History of Pharmacy SIG Newsletter, *Pharmacy Chronicles: Past, Present, and Future!* 

The study of history is supposed to provide valuable lessons to present and future generations. This does not seem to be any different for history of the pharmacy profession. We have tried to bring that to light within this

inaugural issue of the Newsletter. The Newsletter's titlePharmacy Chronicles: Past, Present, and Future was chosen to
emphasize that while the
profession continues to
evolve with the times and
with social needs, we should
be building on our past. Very
soon what we know today as
the present will inevitably and
quickly become ... history ...
and in other words, the past.

Thus, our *present* (today), was also included in the Newsletter title. Some inspiration for this came from a *Drug Topics* article published just a few years ago - "Celebrating the 40th Anniversary of the Pharmacy Stamp" (Drug Topics 11/1/2012).

... (Message from the Editor is continued on P12).

### SIG OFFICERS



David Baker (dmbaker@wne.edu), SIG Chair



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Gregory (Greg) Higby (ghigby@mailplus.wisc.edu), Secretary

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#### NEWS: History of Pharmacy SIG's 2014 Annual Meeting Events

This year the SIG has two events planned for the AACP Annual Meeting: one about pharmacy history and one about making pharmacy history.

The first event is our continuing education session entitled: "Historic Milestones and Symbols of Pharmacy." Milestones and symbols mark the progress of a profession in its internal and external development. This session will explore two critical milestone studies which influenced pharmacy and pharmaceutical education in the 20th Century, the Flexner Report and the Mirror to Hospital Pharmacy.

In addition, the fascinating story of pharmacy's symbols and their continuing importance will be examined.

Specific topics and presenters include:

1) A Comparison of Flexner's Effect on
Medical Education in the Early 20th
Century to the Current Trend of Pharmacy School; Presenter: James M. Culhane,
PhD, Notre Dame of Maryland University, SOP; 2) Reflecting on the 50th Anniversary of Mirror to Hospital Pharmacy;
Presenter: Gregory J. Higby, PhD, RPh,
AIHP; and 3) The Symbols of Pharmacy; Presenter: Anthony Palmieri III,
PhD, University of Florida, COP.

The second event at the AACP Annual Meeting will be a historic first for the History of Pharmacy SIG and the American Institute of the History of Pharmacy: a joint business meeting. So, come one, come all and get involved in planning what these two organizations will attempt in the next year. At the same time, come and meet the officers you've heard so much about, and the officers, who will be elected just before the Annual Meeting —

— David Baker, BS Pharm, MBA, JD SIG Chair, WNEU COP

## <u>NEWS</u>: New England Pharmacy Prescriptions Database Project

MCPHS University, founded in 1823, has a number of unique collections documenting historical pharmacy and patient care practices in New England. One is a collection of prescription recipe books containing the records of medicines compounded and dispensed by select pharmacies 1876 to 1915. This resource was digitized, producing over 10,000 images of pages. A database, currently being created, will contain

records for the individual prescription orders. Each record will contain an image of the original prescription, as well as translated information relating to the prescription. The records will document the prescriptions as well as the formula used to compound them. The database will be invaluable to students and researchers interested in the history of medicine, pharmacy, public health, historical epidemiology and the use of

natural products before the development of modern synthetic medicines.

The project, funded by grants from the MCPH's Faculty Development Committee and the National Network of Libraries of Medicine, New England Region, is expected to be completed by the end of 2014.

Investigators are Sarah McCord, Joanne Doucette, Kathy Krathwohl, of MCPHS

## SPECIAL POINTS OF INTEREST:

Hot Topic: ACPE 2016 Draft Standards discussed (See P1).

Special Insert: See Pharmacy Museums Addendum (Insert)!!

Newsletter: Seeking articles and other contributions for next issue! Contact editors via email (See contact info on P2)!

Libraries; and Paul Kiritsy, PharmD, Catherine Taglieri, PharmD, of MCPHS School of Pharmacy.

—Catherine Taglieri, PharmD Associate Editor, MCPHS SOP

## NEWS: Historic Pharmacy Book Collection Donated to AUHS School of Pharmacy

Dean Hieu Tran, Professor, and Founding Dean at American University of Health Sciences (AUHS), School of Pharmacy announced that Dr. Earl Mindell, a pharmacist and an entrepreneur, from Beverly Hills, California has donated a historic collection of pharmacy books to the School.

A licensed California pharmacist since 1965, Dr. Mindell amassed the prized collection over his 50 year career. The Mindell Collection provides the foundation for a campus pharmacy museum which AUHS SOP plans to house in its newly renovated home, a 40,000 square foot facility located in Signal Hill, California.

AUHS SOP, currently in the ACPE Pre-Candidate accreditation process, looks forward to other similar donations to add to the School's collection, which will be used to educate and inform both students and faculty, as well as the visiting public about the nexus between pharmacy history and the evolving paradigm of

future pharmacy practice. Stay tuned for news of the museum's opening to be announced!

— Ettie Rosenberg, PharmD, JD Founding Editor, AUHS School of Pharmacy



# Pharmacy Education: What Happened to Pharmacognosy? Changing Curriculum with Changing Times

In the early years of pharmaceutical education in the United States, pharmacognosy, the study of the physical, chemical, biochemical and biological properties of drug substances, was a key component of virtually every pharmacy school curriculum. By 1997, however, only 17% of surveyed pharmacy schools offered a pharmacognosy course and 83% indicated that the course had been discontinued. (1)

The Pharmaceutical Syllabus, published by the New York State Board of Pharmacy, outlined the first national curriculum for pharmacy programs in the United States to follow from 1910 to 1915. The recommended curriculum included a total of 90 contact hours in pharmacognosy and 45 in botany. This made up 13.5% of the recommended two year, 1,000 contact-hour curriculum for pharmacy programs.(2)

Why the emphasis? In the late 19th to early 20th century, drug manufacturers in the United States initially sold drugs in crude form (leaves, roots, rhizomes, etc.) and the practicing pharmacist was often required to manipulate the crude drugs to obtain their active constituents and fabricate the drugs into suitable dosage forms. Many of these crude drugs

were plant-based, but some, such as cantharis, were obtained from insects.

To ensure that they were stocking quality goods, early pharmacists were expected to know how to identify crude drugs based upon their physical characteristics. The Pharmaceutical Syllabus even went so far as to list which roots, rhizomes, barks, leaves, fruits and seeds, were those that students of pharmacy should be able to identify. To assist medical and pharmacy students in the study of pharmacognosy, several pharmaceutical companies offered collections of crude drugs ( top photo on right ).

These collections included crude drugs listed in the United States Pharmacopeia and in common use at the time. Each crude drug was in its own box or tin for students to identify, with a key included for identification (bottom photo on right).

From 1898 to 1919, Eli Lilly offered the "Student's Collection of Official Organic Drugs" (later renamed "Student's Collection of Official Crude Drugs") which contained 172 specimens, each in its own cardboard box. In 1919, the Collection cost \$15, which is equivalent to approximately \$200 today.(3) In 1920, the

collection was expanded to include 216 specimens. Eli Lilly continued to offer this collection until 1931.(4)

Parke Davis offered its "Materia Medica Collection" which contained 288 specimens, each in its own tin container. This collection was in a finer cabinet than the Eli Lilly collection, and cost \$25 in 1895. (5)

Why the decline in emphasis? By the early 1900's many manufacturers were transitioning to the manufacturer of prefabricated plant-based preparations and the sale of crude drugs to pharmacists began to decline. (6) In 1910, Parke Davis, one of the largest suppliers of crude drugs at the time, announced that it would no longer sell crude drugs at wholesale. (7)

Since passage of The Dietary Supplement Health and Education Act (DSHEA) in 1994, there has been an increased interest in natural products. In fact, herbal supplement sales have risen for nine consecutive years. (8) With this increased interest in natural products will pharmacognosy again find its place in pharmacy curricula?

—Michael A. Hegener, PharmD, University of Cincinnati James L. Winkle College of Pharmacy





References

1.Miller G, Murray J. Herbal Instruction in United States Pharmacy Schools. Am J Pharm Educ. 1997; 61: 160-162.

2.The Pharmaceutical Syllabus. 1st ed. New York, NY: The New York State Board of Pharmacy; 1910.

3.CPI Inflation Calculator. http://data.bls.gov/cgi-bin/cpicalc.pl. Accessed February 16, 2014.

4.Davidson, Helen L. (Archivist, Eli Lilly & Co., Indianapolis, IN). Letter to: Kenneth Dewberry. 1967 Jan 10. 1 leaf. Located at: Private collection of Michael Hegener.

5.Parke, Davis & Co. advertisement. Am J Ph. 1895; 67(3): 8.

6.Sonnedecker, G. Kremer and Urdang's History of Pharmacy. 4th ed. Madison, WI: American Institute of the History of Pharmacy; 1976: 330-331.

7.Will use all of own drug importations. The Pharmaceutical Era. 1910; 43: 284.

8.Lindstrom A, Ooyen C, Lynch M, Blumenthal M. Herb supplement sales increase 5.5% in 2012: Herbal supplement sales rise for 9th consecutive year. HerbalGram. 2013; 99:60-65.

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#### Pharmacy Education: Previous Teaching Newsletters

At the beginning of this century, the American Institute of the History of Pharmacy published a number of newsletters addressing subjects related to teaching in its field. These included, Apothecary's Cabinet, a series of ten newsletters containing popular history articles of potential interest to students, Teaching the History & Social Aspects of Pharmacy, and another ten or so newsletters that provided book reviews and short commentaries for instructors. Copies of both newsletters are buried within the website of AIHP at the url: https:// pharmacy.wise.edu/aihp/ resources-teaching.

Materials from these newsletters may be extracted and used by any instructor who properly informs AIHP of their use of same. No

charge is assessed nor permission needed. Apothecary's Cabinet is an especially valuable resource as it contains several illustrations that can be copied and inserted into instructional PowerPoint, etc. Prior teaching newsletters are also available at the AIHP website (www.aihp.org).

—Greg Higby, Executive Director, American Institute of the History of Pharmacy

#### Teaching Pearls

The following was adapted from American Institute of the History of Pharmacy Newsletter, Issue #8, 2005:

[https://pharmacy.wisc.edu/sites/ default/files/content/americaninstitute-history-pharmacy/resourcesteaching/teach8.pdf.]

Course Materials: Exploring Drug Experiences from the Perspective of the User. By Michael Montagne, MCPHS University, Boston

Assignment A: Self Analysis (My attitudes towards drugs, drug use or drug users)

Assignment B: Analysis of a Drug Experience (Identify and analyze a drug-taking experience from your life)

Assignment C: History of a Drug's Origin (Chose from Drug List below)

History can teach us many lessons. The history of how a drug is discovered, developed and used can predict much about its current and future use in society. Pick a specific drug, from the list and research its history of development, initial and current use.

Resources

- 1. Identify and describe briefly drug's "early days".
- and why?
- **b**. How was it discovered?
- described from its use?
- for commercial use and the marketplace? (If so, by whom, and when?)
- 2. Select a drug from Drug List, and describe briefly the drug's initial use and compare to current patterns of use.

Across

from

Drug List: Absinthe, Amphetthe following aspects of the amines, Ether, Aspirin, Barbiturates, Bendectin, Caffeine, a. Who discovered it, when Coca, Cocaine, Chloroform, Chlorpromazine, Diazepam, Fluoxetine, Heroin, Insulin, c. What were the initial effects LSD, Mescaline, Methadone, Morphine, Nicotine, Nitrous d. Was the drug developed oxide, Oral Contraceptives, Paclitaxel, Penicillin, Quinine, Tamoxifen, Vioxx (See AIHP website link for expanded drug list). -- Teaching Pearl adapted for Newsletter by Catherine Taglieri, PharmD, MCPHS SOP

#### Education:

Faculty and students alike appreciate online resources when investigating historical questions. Sometimes, however, they can be a bit difficult to find buried away within a larger association or institutional websites. This can be said about the "Museum Information Sheets" of the Royal Pharmaceutical Society (RPS) of Great Britain.

Soon after its founding in 1841, the RPS began collecting materials for its Museum. Located at 1 Lambeth High Street, London, the RPS features public exhibitions on the ground floor and pre-booked guided tours on the floors above. For more info see http://www.rpharms.com/ about-pharmacy/ourmuseum.asp. For those seek-

ing information about old dosage forms, artifacts, theories of treatment and so forth, a good starting place are the "Information Sheets" available in pdf format at http:// www.rpharms.com/learningresources/informationsheets.asp#history. Budding pharmacy and history scholars are cautioned to remember that these sheets describe

pharmacy from the British practice and point of view, which is the wellspring of American pharmacy practice, but the two diverged after 1700. Still, these sheets provide excellent information, especially about the tools and techniques of the apothecary. —Greg Higby, Executive Director, American Institute of the History of Pharmacy, SIG Secretary

Pond

t h e

## The Proof is in the Gunpowder

By Dayne Laskey, PharmD University of Saint Joseph School of Pharmacy

The United States, together with Liberia and Myanmar (formerly Burma), is one of three countries on the planet to still use imperial units as a form of measure. Modern medicine, much to the delight of healthcare professionals, is practiced in the much simpler metric units. Thus, as American pharmacists, we've become proficient at converting

"18TH CENTURY
SAILORS WERE
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WITH RUM AND EXPOSE
IT TO FLAME."

ounces to grams, fluid ounces to milliliters, and inches to centimeters. As cumbersome as we may find the math, we're thankful to have at least moved away from the pesky apothecary units – a system of drams and scruples which now exist largely as a way to torment pharmacy students. Today we'll discuss one of my personal favorite relics in the unit world: alcohol proof.

Proof is a superfluous unit of measure on first glance.

Many a fraternity brother could confirm that a spirit's proof is exactly two times its ethanol percent by volume: 200 proof being 100% ethanol, 100 proof being 50% ethanol, and so on. What they may not tell you is that "proof" used to be a literal term, meaning "to validate via demonstration".

The term "proof" in reference to alcohol actually dates back to England somewhere between the 16th and 18th centuries. Sailors in the Royal Navy were paid, at least in part, in rum rations. "Nelson's blood", as the rations were called, were not abolished in the UK until the 1970s. Government budget cuts being nothing new, 18th century sailors were naturally suspicious that they were receiving diluted rum. In short, when you're being paid in rations, you need to make sure that you're getting the good stuff.

The solution was to douse a small pile of gunpowder with rum and expose it to flame. If the soaked gunpowder didn't ignite, it was considered to be too watered down or "under proof". If the gunpowder did ignite, it represented "100 degrees proof" that the rum possessed high alcohol content. England used this test to set two taxation levels on alcohol; liquors that were "above proof" were taxed at

a higher rate than liquors that were "below proof".

Now for the math: Ethanolsoaked gunpowder will ignite if the ethanol solution is at least 57.15% alcohol by volume (ABV). This figure is very close (within 0.01%) to an alcohol-to-water ratio of 4:7, and thus the 100° standard was set. To calculate the degrees proof of 100% ethanol, one could just divide: 100/(4/7) =175° proof, 50% alcohol is  $50/(4/7) = 87.5^{\circ}$  proof, and so on. This system was abandoned in favor of ABV in 1980, but "degrees proof" is still defined as 1.75 times this number in the UK today.

Always trying to be different from the British, the United States adopted an alternative "proof' system in 1848. The term "100 proof" stuck, though the standard was arbitrarily redefined from 57.15% to 50% ABV. Thus, 100% ethanol is considered 200 proof in the US and 175° proof in the UK (note that the UK uses "degrees proof" vs. the American "proof"). Today the United States Alcohol and Tobacco Tax and Trade Bureau requires labels on alcoholic beverages to display alcohol content in percent ABV with the option to provide "proof" in parenthesis.

And though it has long since been replaced by the hydrometer, I suspect all would agree that gunpowder was a more exciting method to measure ethanol content!

#### References:

http://www.princeton.edu/ ~achaney/tmve/wiki100k/ docs/Alcoholic\_proof.html

http://www.che.uc.edu/ jensen/W.%20B.%20Jensen/ Reprints/111.%20Proof.pdf

http://www.ttb.gov/labeling/laws and regs.shtml



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## A Piece of History: 1925 Prohibition Prescription

By Catherine A. Taglieri, PharmD, Associate Editor, MCPHS School of Pharmacy, Boston

Prescription owned by: Ettie Rosenberg, PharmD, JD

Examining an old prescription can be a mystery and adventure—a looking glass into a bygone era, evoking questions such as: What was the prescription for? Who was the patient? What was the patient suffering from? What were the standards of therapy "back then"? I had just such an ad-

my first job taking out the trash from a local independently owned drug store – there was a bottle of grain alcohol under the counter and the pharmacist told me that pharmacies at one time sold alcohol. The directions on the prescription (photo) could also be deciphered very easily as "half ounce three times a day before meals". The rest of the words that appear after "spirits" were a mystery, although they appeared as if to refer to a quantity of one "something" called for.

I showed the prescription to my father, a retired pharmacist who practiced from 1959 until the mid 90's, but who had started his career in pharmacy as a stock boy in the mid 1940's. My father was able to

tell me that the prescription was for alcohol, and the word after Spts referred to "fermenti" (sic). A little more research and I determined the prescription was indeed for Spiritus Frumenti, which translated means "spirits of the grain", also known as whiskey. Prohibition brings to mind images of bootleggers, speakeasies and Al Capone-type gangsters trading in illicit alcohol. Despite seeing that bottle of grain alcohol under the counter at that local pharmacy so many years ago, it had not previously occurred to me that pharmacies received prescriptions and sold whiskey at one time.

Prohibition, enacted by the 18th amendment, and the Volstead Act,

which banned the production, sale and transportation of alcohol in the United States, went into effect in January 1920. The temperance movement had gained popularity from the 1830s and its proponents were rewarded by the prohibition of the sale of alcohol, with the exception of sale of alcohol for religious or medicinal use. Alcohol had been used in the treatment of a variety of ailments starting in ancient times.

An American Medical Association position paper in 1917 stated that alcohol's "use in therapeutics as a tonic or stimulant of for food has no scientific value," and further that "the use of alcohol as a therapeutic agent should be further discouraged." Notwithstanding the fact that alcohol was removed from the US Pharmacopeia in 1916, millions of prescriptions were written for alcohol from 1920 through 1933. Some historians actually credit Prohibition with the growth of pharmacies. Walgreens Co. grew from 20 stores in 1920 to 525 stores in 1929, perhaps benefiting from Prohibition, or the creation of their milk shake as the company's history claims. The law limited the prescribing of one pint of alcohol every 3 days to a patient. One hopes this patient received some type of benefit from this prescription, the avowed goal of every pharmaceutical intervention. History reflects that Prohibition was deemed a failure in establishing temperance and repealed by the 21st amendment. The photograph of this prescription serves as a memory of that bygone era.

http://www.history.com/news/drink-some-whiskey-call-inthe-morning-doctors-prohibition; http://www.tampabay.com/ opinion/columns/medicinal-alcohol-made-mockery-ofprohibition/1095789; http://nowiknow.com/the-prohibitionprescription/



venture when I came across the prescription depicted (photo).

The prescription caught my attention simply because the prescription blank appears so official and is imprinted "Treasury Department" and "U.S. Internal Revenue". Immediately, I start thinking - I have never seen that before. A quick look at the date and I began to realize that I was looking at a prescription that was written during Prohibition. I could decipher the notation "Spts" on the prescription which signified "sprits" and recalled that spirits signified a product containing alcohol. However, still more questions came up ... Was the prescription for some kind of alcohol preparation? Then, I remembered

## Collector's Library:

## An Initial and Thorough Description of Ingredients of Patent Medicines - Book Review

The prevalence and use of patent medicines in the U.S. reached incredible proportions in the late 1800s and early 1900s. A dramatic influence on this phenomenon was the passing of the initial U.S. Food and Drug Act in 1906 and subsequent regulations passed thereafter. Most were unaware of the ingredients of patent medicines.

In 1917, a compendium written by John Phillips Street, entitled "The Composition of Certain Patent and Proprietary Medicines" was published by the American Medical Association of Chicago. In the Preface, Street notes: "A conservative estimate of the annual expenditures in this country for remedies sold under proprietary names, and usually of more or less secret composition, is \$150,000,000."

A review of the book appeared in 1918 American Journal of Clinical Medicine noting:

"Thus this book of 274 pages gives the analyses (one or more) of more than 2,500 proprietary medicines, including the most widely used and extensively advertised preparations offered to the American public. The analyses (3100 in number) are published

without comment and without prejudice. The compact form in which they are presented should prove of great usefulness to the physician, the pharmacist, the inspection official, and the intelligent layman."

The analyses referred to in the book review were conducted and published by various states' Boards of Health. The book was revolutionary in that it allowed physicians and pharmacists to see the complete description of the commercial products ingredients and their precise quantities for the first time in one volume! Of note, the facts that the book contained listings of ingredients and quantity enabled physicians to write prescriptions for products referenced in the "handbook", and for pharmacists to compound the prescriptions accurately for patient use based on the "recipes" also contained in the handbook.

The book was listed at a price of \$1.25 pre-paid!

— Jack E. Fincham, PhD, RPh, Professor, Pharmacy Practice and Administration, UMKC SOP

Editor's note: This book was essentially a precursor to the modern smart phone, PDA, or other handheld device with easy access online references!

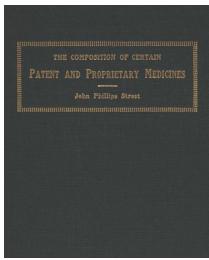
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The Composition of Certain Patent and Proprietary Medicines, Street, JP. American Medical Association, Chicago (1917).

Among the Books, American Journal of Clinical Medicine (1918)



EDITOR'S NOTE:
THIS BOOK
ESSENTIALLY WAS
THE PRECURSOR TO
THE MODERN SMART
PHONE, PDA OR
OTHER HANDHELD
DEVICE WITH EASY
ACCESS TO ONLINE
REFERENCES!













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# Collector's Library: Pharmacy and Medicine On the Air by Mickey Smith Book Review with Editor's Comments

\*The History of Pharmacy SIG Newsletter extends its appreciation to the author, Dr. Mickey Smith, for permission to reprint the following 1989 book announcement. (Note: Except for minor updates, the announcement is reprinted in its original form):

"This book spans the "Golden Age" of radio, roughly 1935-1960. It provides a detailed look at radio programs in which pharmacy and pharmacists were featured, ranging from little-known shows such as County Seat and Family Doctor to popular Gildersleeve, Fibber McGee and Molly, and Phil Harris/ Alice Faye. Filled with detail, the book offers abundant quoted dialogue from the programs.

A full chapter is devoted to drug company

sponsors of a variety of programs, with interesting, often humorous quotes, as well as a selection of illustrations advertising medicines and the shows they sponsored. A comprehensive chapter on physicians and nurses in radio drama and comedy is also included. All of this material is considered in the context of history of the times and should be of interest to pharmacists, physicians, drug manufacturers, radio historians, popular culture students and fans of old-time radio.

Dr. Mickey Smith is a Barnard Distinguished Professor of Health Care Administration at the University of Mississippi. He

has published 25 books in 6 languages, including *Small Comfort*, a history of the minor tranquilizers, and has written on radio history for publications in the fields of radio and pharmacy."

175 pages photos © 1989 89-24346 ISBN 0-8108-2279-2 \$22.50



#### Editor's Comments:

Pharmacy and Medicine on the Air (1989) provides the contemporary reader all of the above historical information, and much more. ("The post-war era was filled with important medical (drug) developments as a truly scientific age began. The realworld press reported these with increased frequency ("wonderdrugs")..." (p.101)) counting the practices of an era long past, it provides a keen glimpse as to how medications and pharmacists were perceived at a time when today's pharmacy students were not yet born. Even children were entertained by radio programs such as Dr. Tim, who educated his young audience about one of the new "wonderworking drugs" (pp. 106-108). The virtues of pharmacy were showcased when for example, "a young child had been placed at risk by his grandfa-

ther's misuse of a medication, using his own sulfa prescription to treat the child's' sore throat, not realizing the youth's kidneys could not handle the sulfa drug, which slowly formed crystals in his kidney. Not only did Dr. Tim communicate an important message advising the young audience not to use someone else's medication, a message that remains just as important today, Dr. Tim actually saved the boy's life (pp 106-108)! Of course, you'll have to read the book to find out how the boy was saved... that's another story. 1946, another show, "Doctors Talk It Over" sponsored by American Cyanamid and other pharmaceutical companies from time to time, featured broadcast interviews by medical/ pharmacy professionals. One particular broadcast, featured Emil Martini, Sr. who was at the time "a professional pharmacist of Hackensack, NY and a member of the NJ State Board of Pharmacy (p 108)." The book's excerpts evoke particular interest:

"Cross described 'Damon and Pythias relationship' between the professions of medicine and pharmacy 'as the keystone of our American health **structure**.' Problems opportunities were discussed... Martini described the prescription as 'a major triumph of pharmaceutical and medical collaboration and research [which can] specify any of the 100,000 or more separate drugs and compounds recognized

Formulary (p 109).' Martini continued, describing pharmacists' education noting "...the growth of pharmacy internship/preceptor programs, ... that pharmacy's role was not one of 'blind adherence to prescription formula,'... and projecting a role for servicemen returning from World War II, called on physicians to aid in recruiting young men (sic) to pharmacy careers."

Dr. Smith's "Pharmacy and Medicine on the Air" not only permits one to relive and appreciate pharmacy of the 20th Century, but also to discover that pharmacy has always embraced its future, and that the history of pharmacy still has much to teach our future generation of pharmacists!

— Ettie Rosenberg, PharmD, JD, Editor, AUHS School of Pharmacy

### A French Pharmacy at the Beginning of the 20th Century, PART I of II

- by Prof. Jean-Marc Aiache, Clermont-Ferand, France



(Figure 1)

The development of new drug products and medicaments at the beginning of the 20th century was responsible for transforming the old "apothecary" (Latin) into what was thereafter referred to as a "pharmacy" (Greek). The photo above (Fig. 1) depicts the exterior of a French pharmacy at the beginning of the 20th century. Consistent with tradition, its exterior walls are green, the color symbolizing pharmacy. The façade is adorned with two decorative glass plates, with the inscription "PHARMACIE" appearing above the door and windows. A pair of red crosses (distinctive of medical services) appear on either side of the PHARMACIE sign. Today, these crosses are green. In the two large windows, there are porcelain pots containing plants or raw drugs like extracts or tinctures, sit as an advertisement to passersby. In addition, four large glass jars, each containing a colored liquid, red, blue, or green, are illuminated in the window display throughout the night.

A "Bowl of Hygeia," the most widely

recognized international symbol of pharmacy, appears centrally located

on the glass entrance door, and above it, the name of the practicing pharmacist, "A.MOREL, 1st class Pharmacist" appears. [Aside: It should be noted that in early 20th Century France, two tiers of pharmacists existed: The 1st class (level) matriculated after three years of training plus three years of theoretical studies in a Phar-

maceutical School consisting of Physicians and Professors in Pharmaceutical Sciences. A 1st class pharmacist was permitted to practice in the entire French territory. The 2nd class pharmacist, who simply had eight years of training, was matriculated by a regional jury and could practice only in that single region.

In Fig.1, two figures are seen on the sidewalk in front of the pharmacy entrance. On the left is the pharmacist, dressed in a neatly closed white lab coat, white shirt, black tie and on his head, the compulsory black skullcap. The pharmacist is inviting his elegant client to enter with him so that the pair could study the mushrooms the client has harvested. [Aside: This kind of consultation is very common in France, especially on Mondays in Autumn, during the prolific mushroom seasons. Still today in France, there are specific courses in schools and colleges of Pharmacy about such pharmacist consultation.

Indeed, consultation is advisable and a good decision since these mushrooms called "Amanita muscaria", are highly dangerous. Fig. 2 (below) depicts the two gentlemen inside the pharmacy (Fig.2). Noticeable from this view, in the window stands the large glass jar containing blue liquid. The men stand in front of a "work" counter on which a precision balance, an open book (probably a "Codex" (Pharmacopeia 1892), a second book, either another formulations book or a prescription register, and 2 mortars, one for pills and one for solutions. The pharmacist is showing his client a formulation he can compound to relieve the client's toothache. The client's scarf tied tightly around his head and likely ineffective to reduce his tooth pain, presumably visiting the pharmacy either before or after his dentist!

#### (Figure 2)





Above photo: Handmade figurine replica of Pharmacist Prof. J. M Aiache, author of this article!

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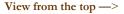
## Apothecary Challenge

### Question:

Pharmacists used this tool in the 1800s and early 1900s? What is it? What was this tool used for? Side view —>

(Answer below)







#### Here's the $A n s w e r \dots$

This is an antique patented pocket level. This was used to determine the level of a surface where an apothecary scale could be placed with assurance of proper measuring. This device contains a perfectly true base which when the top was unscrewed and the device filled with alcohol and then closed a small air bubble would appear at the top of the contained alcohol. The device when placed on a horizontal surface would allow observation from above to see where the bubble aligned with the metal bead in the item's base. When the bubble matched over the metal bead, assurance could be made that the horizontal

surface was level. This was patented on October 18, 1898, by E.G. Smith of Columbia, Pennsylvania.

— Jack E. Fincham, PhD, RPh, Professor, Pharmacy Practice and Administration, UMKC SOP





- UNIVERSITY OF KANSAS, AT LAWRENCE. SCHOOL OF PHARMACY MUSEUM

"THE **HISTORY** OF

THE **FUTURE** OF

HERE..."

PHARMACY BEGINS

PHARMACY LIVES HERE...



weights (scruples, metric, English measurements, etc.). Some are very small which is an indication of the fine measurement capabilities of this apothecary antique.

— Jack E. Fincham, PhD, RPh, Professor, Pharmacy Practice and Administration, UMKC SOP

Source: https://ehive.com/account/4339/ object/120934/Beckers\_Sons\_Apothecary\_Scale

## Apothecary Antique



#### Becker's Sons Apothecary Scale

This is a rare, Antique Victorian 1860s Apothecary Scale made by Becker's Sons of Rotterdam, Netherlands. This finely made scale is housed inside a glass case with a mahogany frame and pull out drawer. There is a glass unit with a sliding window on

front side as well as the back for accessing the precision scale. This scale's fine quality exemplifies the European made styling model. The ivory plate on the base of the scale reads "Becker's Sons Rotterdam". Mr. Christopher Becker started in the 'scale making' business in the Netherlands. Moving with his wife and two

sons to the U.S. in 1854-55, the family later moved back to Holland after the start of the U.S. Civil War. After the Civil War ended, the Beckers moved back to the U.S. while teo other sons started the business called Becker's Sons in Rotterdam. This is a beautiful scale and has a drawer full of various style and size

## Pharmacy Chronicles



#### HISTORY OF PHARMACY SIG NEWSLETTER

Published by:

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"THE HISTORY OF PHARMACY LIVES HERE...
...THE FUTURE OF PHARMACY BEGINS HERE."

- UNIVERSITY OF KANSAS, AT LAWRENCE, SCHOOL OF PHARMACY MUSEUM

#### About the History of Pharmacy SIG

The upcoming academic year (2014 – 2015) marks the seventh year since the History of Pharmacy Special Interest Group (SIG) was formalized as an AACP SIG.

Founded in 2008, the History of Pharmacy SIG began with Bob Buerki and Greg Higby, as Chair and Vice-Chair, respectively, with a stated objective to provide meaningful programming related to the history of pharmacy.

As an open academic forum, the SIG strives to facilitate the exchange of ideas and innovation among pharmacy faculty across disciplines; to serve broadly as an accurate information resource for teaching, learning, and scholarship pertaining to the evolution and history of the pharmacy profession; to develop and maintain historical collections of artifacts and school or college museums; and to ensure the lessons, the message, and the legacy of the pharmacy profession is preserved to educate future generations of pharmacy students.

The SIG's mission is based on the premise that the history of the pharmacy profession is relevant to all pharmacy practice areas, both current and future. The History of Pharmacy SIG is relevant to you too! Join the History of Pharmacy SIG!!

#### Pharmacy Chronicles: Past Present & Future

## Message from the Editor: (continued from P2)

...Message from the Editor continued from P2)

Despite support from major pharmacy associations, throughout the 1960's, pharmacy remained one of the few professions not honored with a postage stamp. Pharmacist Dennis Pena of New Mexico said notably, "pharmacy [was] the orphan of healthcare" and he acted in 1971 to "end the stalemate" by drafting a resolution demanding prompt attention to the "neglected stamp." Pena spearheaded the measure garnering support at the state and national levels. The stamp was issued in Cincinnati on Nov. 10, 1972, when in Pena's opinion, since pharmacists had historically been "well-known, well-loved members of the community... [and] do a lot for public health... it [was a] good time to give [the profession] the respect it deserve [d]."

The stamp (*right*) resurrects the truth that historically our "beloved" and "respected" pharmacy profession labored for recognition.

We find ourselves in a similar position today as the profession seeks pharmacist provider status. The old adage, "history repeats itself" seems to fit here. If the pharmacy profession has evolved in the truest sense of the word, and indeed it has evolved, that is because the profession has through its history stayed connected to its past ... its foundation.



Honoring the Pharmacy Profession U.S. postage stamp issued in 1972

The story of the pharmacy stamp conveys a message about the historic struggles of the our profession... that history does repeat itself, and there is always something to learn from it! Let us build on our past and on our present, while we anticipate with much excitement evolving toward our profession's bright future!

Very truly yours,

Ettie Rosenberg, PharmD, JD
Founding Editor,
History of Pharmacy SIG Newsletter:
Pharmacy Chronicles: Past, Present & Future
AUHS School of Pharmacy

#### Reference:

Celebrating the 40th anniversary of the pharmacy stamp, Drug Topics 11/1/2012 See more at: http://drugtopics.modernmedicine.com/drug-topics/news/modernmedicine/modern-medicine-news/celebrating-40th-anniversary-pharmacy-stamp?page=full#sthash.VSK1mdC0.dpufl