EDITORIAL

by Don E. Francke

PHARMACY'S DIRECTIONS

1. Pharmacies and Drugstores

RECENTLY I HAD THE OCCASION TO REEXAMINE *The General Report of the Pharmaceutical Survey*[1] which was completed about 20 years ago by Dr. Edward C. Elliott. This survey was made for the purpose of allowing pharmacy to make plans and proposals for its advancement as a fully qualified member of the health professions. Of course, I know that many people regard anything this old as completely out-of-date, but I found several statements in Dr. Elliott's preface which retain their truth.

One statement that merits repetition today is:

> For the most part, pharmacy endeavors to fulfill its traditional, as well as its ever-broadening, responsibilities amidst an expanding jungle of commerce in . . . goods and attendant services unrelated to medicinals or human health. These are problems of fundamental importance. Unresolved they are hazards to any future good fortune of the profession.

During the past 20 years, pharmacy as represented by the drugstore has not improved significantly; in some ways it has worsened. In contrast, the profession as a whole has improved greatly. In preparing a talk I gave at Wayne State University last February I collected drugstore advertisements for about a month from *The Washington Post* and the *Cincinnati Enquirer*. Looking at this collection of ads for such diversified goods as hardware, clothing for men, women and children, lunches, motor oil, costume jewelry and other non-health-related items was such a nauseating experience that the only term I could think of to describe these stores was "commercialized jungles," and I was somewhat surprised to learn later that Dr. Elliott had used essentially the same term 20 years ago.

These are matters of fundamental importance, as Dr. Elliott pointed out. The reason for their importance is the effect these stores have on the profession of pharmacy. I recognize, of course, that stores that carry full-page ads in metropolitan newspapers are atypical and to that extent not representative. Nevertheless, these stores do more than all others combined to form and fix the attitudes of society and the public toward the profession of pharmacy. The public can associate neither the drugstore nor the pharmacist in it as serving the health needs of society. Numerous surveys by sociologists and other behavioral scientists tend to bear this out. It is these types of drugstores that debase the profession of pharmacy in America.

The United States has more than 50,000 retail establishments known as drugstores with which are included a few thousand pharmacies. This great heterogeneous mass makes it impossible for the public and the allied professions to clearly discern, to carefully distinguish or to recognize in any way the pharmacist practicing in one of them as a professional person. Drugstores in America so greatly outnumber pharmacies that when pharmacies are called drugstores and drugstores are called pharmacies, the terms pharmacist and pharmacy become meaningless to the public because they are equated with druggist and drugstores.

What we need to do, it seems to me, is to find some way to separate pharmacies from drugstores as is done in most countries. This is indeed an arduous and complicated undertaking in a country with 50 bodies of state laws to be altered. This separation must await the development of several generations of pharmacists trained at the five- and six-year level to perform tasks quite different from those now performed by the average pharmacist. It is the young pharmacists who are becoming increasingly rebellious against the pattern of practice that we have developed. Enough rebels can bring about a revolution. But first there must be a number of people thinking about the problem, discussing and debating it and determined to bring about a change. There are not enough of these people and too many who dismiss the problem with "this is the American way and nothing can be done about it." Something will be done when the time is ripe. Merely changing the locus of practice of pharmacists from a drugstore to a pharmacy would have great psychological impact on physicians, patients and society in general.

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1. *The General Report of the Pharmaceutical Survey 1946-49*, Edward E. Elliott, Director, published by the American Council on Education, Washington, D.C., 1950.

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