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## RESTRICTION OF THE SALE OF HABIT-FORMING DRUGS

The Boylan bill to prohibit the sale of hypodermic syringes or needles at retail without an order from a physician or veterinary, which passed the New York legislature some time ago, has been signed by the governor and is now a law. This measure is an effort on the part of the State of New York to control the growing use of morphin and cocain. Commenting on this bill the *Outlook* said editorially: "It seems incredible that there should be objection on the part of any intelligent person to the passage of such a measure. . . . It is beyond doubt that the availability of the hypodermic syringe has been as much a factor in the wide-spread use of morphin, cocain, etc., as the availability of the drugs themselves and that the vast majority of hypodermic syringes and needles are used to give morphin and cocain in a harmful way. The objection is made that drug fiends could easily obtain syringes and needles through the mails from druggists in another state. This is perfectly true and is, of course, the weak point in all state legislation designed to control the use of habit-forming drugs and instruments for their injection. If New York State will lead the way in this reform, however, there is little doubt that other states will follow so good an example. At all events, the lower grade of drug and department stores of New York and elsewhere would be deprived of one of their activities. . . . If the laity is buying hypodermic outfits we may, we think, rest assured that it is for the harmful injection of morphin and cocain."

The statement made by the *Outlook*, that hypodermic syringes and harmful drugs can be sent through the mails from other states having no restrictive laws, can and should be met by appropriate federal legislation prohibiting interstate commerce in hypodermic syringes, needles and habit-forming drugs, except by responsible and properly authorized persons. The suppression of traffic in these drugs for vicious purposes will probably necessitate the adoption of some restrictions and regulations on the part of physicians. For instance, in the bill introduced two years ago in congress, by Mr. Mann, intended for the suppression of interstate commerce in

morphin and cocain, it was provided that physicians ordering such drugs from pharmaceutical houses outside of their own state must be registered with the federal authorities and must keep a record of the amount of such drugs ordered and the manner of their disposal. As was to be expected, this proposition brought out indignant protests from pharmaceutical mail-order houses and others who asserted that it was an infringement on the rights of the dispensing physician. To this cry was added the usual stock argument that the proposed legislation was inspired by a drug syndicate for the purpose of preventing dispensing by physicians. As a matter of fact, Mr. Mann's bill was drafted in accordance with the recommendations of the International Opium Conference held at The Hague and composed of representatives of the various nations interested in the suppression of the opium traffic.

Custom-house records show that the importations of opium and cocain into this country vastly exceed the amount required by physicians for legitimate purposes. Beyond question, the surplus is used for the gratification of drug habitués and the creation of new victims. The repression of this horrible traffic can be accomplished only by rigid regulation of the legitimate trade, for which a careful record of all sales and purchases of such drugs is essential. If such regulation imposes some inconveniences on our profession, it must be accepted as a part of our duty to the state and to the public. We must recognize the fact that the right to use dangerous drugs for saving life as a corollary carries with it an obligation to prevent the improper or harmful use of such drugs and that it is quite as important a duty of physicians to see that no person secures morphin or cocain who does not need it as it is to see that patients who are in need of the beneficent effects of such a drug are given the benefit of it. We congratulate New York on having been the first to pass such a bill and hope that her example will be speedily followed by all other states.

## MEDICAL HISTORY CLUBS

A favorite statement of continental European writers is to the effect that the average English and American physician is often lacking in a proper interest in the history of his subject, the reason usually assigned being the intensely practical nature of the English-speaking practitioner, which allows him neither the time nor the inclination to approach his specialty from the historical side. While much of the best historical work in the past has undoubtedly been done by French and German scholars, like Littré and Daremberg, Choulant or Pagel, yet such exhaustive recent monographs as those of Adams, Greenhill, Payne, Norman Moore, D'Arcy Power, Osler, Sir Clifford Allbutt, Finlayson, Billings or Weir Mitchell have gone far to lift this imputation of late years. For the practitioner who writes, the advantage of a proper study of "origins" is, of course, self-evident. Much superfluous controversy, much waste

of the writer's (and reader's) time and of a journal's space, might be saved if physicians investigating a subject always knew exactly what others had done before them.

A proper interest in the historical side of medicine might easily be stimulated by means of short courses in medical history for students before graduation or by the formation of medical history clubs among practitioners themselves. As such clubs are usually made up of kindred spirits, the membership of any is not likely to be too large, which has the double advantage of giving every one a frequent chance to read papers and of avoiding unnecessary repetition in discussions. As an example of what can be accomplished in this field we may instance the remarkable work of the Historical Club of the Johns Hopkins Hospital, which was organized in November, 1890, beginning with exhibitions of rare medical classics by Drs. Billings, Osler, Kelly and others, and which has since turned out so many fine papers, published in the *Bulletin of the Johns Hopkins Hospital*.

Another prominent medical history club, the Charaka Club of New York City, organized in 1898, consists of eighteen members and has already published three handsome volumes of transactions, which have been reviewed in these columns. Among the subjects treated were "Greek Medical Fees," "The Evil Spoken of Physicians," "The Cult of Æsculapius," "Antonius Musa," "Fracastorius," "Shakespeare's Last Illness," "The King's Touch for Scrofula," "Dutch Physicians in New Amsterdam," "Garth's Dispensary" and "Flaubert's Epilepsy"; and the proceedings have been enlivened by original poems, little plays, novelettes and facetiæ by the different members.

The Medical History Club of Washington, D. C. was founded in 1908, and prints its transactions in the *Old Dominion Medical Journal*. During the present year interesting papers on Auenbrugger, Pasteur and Bichat and "Casserius and Anatomic Illustration" were read. Practitioners of the town and country will find relaxation from the cares of their busy lives in little coteries of this kind and their papers will lend variety and interest to the journals and transactions of their respective medical organizations.

#### THE PRESIDENT AND THE FOOD AND DRUGS ACT

We have, for the past three weeks, called attention to the failure of the federal Food and Drugs Act, under the interpretation recently given it by the Supreme Court, to protect the public against loss both in health and pocket from lying claims regarding the curative effects of nostrums. As soon as the new interpretation became public, some of the more progressive members of Congress began to plan for getting an amendment to the pure food law that would specifically prohibit untruthful claims for therapeutic effects of drugs. President Taft, on June 21, took official cognizance of

the blow that the Supreme Court decision had dealt the Food and Drugs Act by sending a special message to Congress urging the very amendments that are needed to restore that law to its previous efficiency. Said the President:

"An evil which menaces the general health of the people strikes at the life of the nation. In my opinion . . . the sale of drugs under knowingly false claims as to their effect in disease constitutes an evil and warrants me in calling the matter to the attention of the Congress.

"Fraudulent misrepresentations of the curative value of nostrums not only operate to defraud purchasers, but are a distinct menace to the public health. There are none so credulous as sufferers from disease. The need is urgent for legislation which will prevent the raising of false hopes of speedy cures of serious ailments by misstatements of the fact as to worthless mixtures on which the sick will rely while their diseases progress unchecked."

To meet the objection that has been raised in some quarters that the curative effect of nostrums is a matter of opinion and not of fact and that the opinion will vary both as regards the so-called schools of medicine and also as to individuals of the same school, Mr. Taft says:

"No physician of standing in his profession, no matter to what school of medicine he may belong, entertains the slightest idea that any of these preparations will work the wonders promised on the labels."

And further:

"Of course, as pointed out by the Supreme Court, any attempt to legislate against mere expressions of opinion would be abortive; nevertheless, if knowingly false misstatements of fact as to the effect of the preparations be provided against, the greater part of the evil will be subject to control."

That the amendment suggested by the President will be fought by the "patent medicine" interests is to be expected. The Proprietary Association, as recently as June 17, sent out a letter purporting to give "the legal aspect of the Johnson case." The gist of the letter is contained in the following sentence that appears in it:

"As there is no science in therapeutics, the practice of medicine being based on opinion and not on definite scientific facts—any statement concerning the curative properties of any drug, chemical or medicine, is largely a 'matter of opinion' . . ."

In the opinion of the Proprietary Association—in other words, in the opinion of "patent medicine" makers—"the effect of the decision of the Supreme Court does not change or weaken the Food and Drugs Act in any particular."

President Taft, as evidenced by his special message, disagrees with the "patent medicine" men, for in his message he says:

"I fear that if no remedial legislation be granted at this session the good which has already been accomplished in regard to these nostrums will be undone, and the people of the country will be deprived of a powerful safeguard against dangerous fraud."

We believe that the restrictions the President would have placed on the nostrum business are more likely to meet with public approval than the "wide-open" policy advocated by the makers of "patent medicines." Amend the act!