potent agents and of prescribing several drugs of different actions in fixed proportions in one preparation. More often than not he has to adjust the dose of a worthwhile drug to fit the therapeutic needs of the patient. The council believes that any drug should be administered according to the specific needs of the patient. Thus, a mixture containing phenobarbital and atropine in fixed proportion frequently does not serve the best interests of the patient inasmuch as he is apt to be either overdosed or underdosed with one of the active constituents.

Occasionally physicians are somewhat puzzled when an admittedly useful drug which has been on the market for a number of years does not appear in New and Nonofficial Remedies. The usual explanation is that the manufacturer has simply neglected to submit the drug to the council for acceptance. This seeming deficiency is becoming less important as firms become increasingly aware of the need and desirability of securing council acceptance for their most worthwhile products.

Modified Scope

In what respects is New and Nonofficial Remedies subject to criticism and how may it be improved? Inasmuch as the primary objective of this publication is to provide authoritative information on relatively new drugs, monographs on morphine, atropine, and the like are conspicuous by their absence. Nevertheless, it must be recognized that many old and well-known medicinal agents still have a most necessary and valuable place in our therapeutic armamentarium. An attempt will be made in future editions of New and Nonofficial Remedies to present more adequately the comparative virtues of the old and well-established official drugs in relation to the newly introduced agents. Thus, the physician should be better aided in making his choice of medication for a particular disease condition. That is one way in which New and Nonofficial Remedies can be improved and made more useful for both the physician and medical student.

Even though New and Nonofficial Remedies is revised annually, it is impossible to keep the book up to date on all developments in modern therapeutics. New drugs are being introduced with ever-increasing rapidity. One must ad-

mit that New and Nonofficial Remedies, like many other scientific treatises, is out of date in some respects immediately after publication. Nevertheless, it continues to serve a most useful purpose. Sometime in the future it may be necessary to publish New and Nonofficial Remedies at more frequent intervals. At present, however, it would appear that publication at yearly intervals should serve the needs of the physician and the medical student who also continue to study the current authoritative medical journals.

The major change in the 1953 edition, which is now in the process of revision, essentially will involve separate publication of the two major divisions of the present volume. The reason for this seemingly radical modification should be quite obvious. Physicians, medical students, and pharmacists have little or no interest in the technical detail covered in tests and standards for drugs. They depend upon manufacturers and legal regulatory agencies to insure the purity and potency of medicinal agents. It is believed that divorcing the section on tests and standards from New and Nonofficial Remedies will make the book more acceptable to the great majority of individuals who rely upon it as an authoritative guide for sound therapy.

Accepted Dental Remedies

By J. ROY DOTY, Ph.D.

It has been noted that the United States Pharmacopeia and the National Formulary at the present time primarily provide standards of identity and composition which have official recognition in the Food, Drug, and Cosmetic Act. Accepted Dental Remedies is more nearly like New and Nonofficial Remedies in that each is primarily a handbook of therapeutics and is concerned only secondarily with standards of composition. The two latter books are also similar in other respects. Both are official publications of agencies of professional associa-

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tions; both provide informative monographs as well as a listing of commercial products. There is also a considerable degree of similarity in the methods which are employed to determine eligibility of products for listing in New and Nonofficial Remedies and Accepted Dental Remedies. The rules of the Council on Pharmacy and Chemistry of the American Medical Association and the provisions for acceptance of products by the Council on Dental Therapeutics of the American Dental Association both emphasize the importance of suitable names, proper labeling and advertising, and the requirement of adequate evidence for the usefulness of commercial products. Each book is revised annually to provide information of current value. For each, the conclusions of the respective councils are based upon currently available information and are subject to modification at any time that a substantial amount of new evidence becomes available.

On the other hand, there are certain dissimilarities. In New and Nonofficial Remedies, the emphasis is on newness of products, whereas Accepted Dental Remedies places considerably more emphasis upon completeness of listing of drugs useful to dentists. This is possible and appears desirable in view of the fact that the number of drugs which are useful in the practice of dentistry is considerably smaller than the number which are useful in the practice of medicine. Accepted Dental Remedies even carries some informative monographs on obsolete preparations so that the dental profession may be informed concerning products described in earlier literature. However, in these instances it is clearly indicated that the listing is intended simply to provide information and that there are no products accepted in these categories.

Further differences in the books are explainable in the differences of their intended use. Since the method of use of a particular drug by a dentist may differ from its use by a physician, it does not always follow that a drug which is suitable for inclusion in New and Nonofficial Remedies will necessarily be suitable for listing in Accepted Dental Remedies.

I would like to suggest that each of the four compendiums considered in this panel discussion serves its own particular purpose and tends

to supplement the value of the others. Certainly the size and complexity of Accepted Dental Remedies would be greatly increased if official standards of composition were not available in the Pharmacopeia and the Formulary. Although the usefulness of the latter two publications might be somewhat enhanced by the suggestions presented, it is my belief that the interests of the various professions and the public will be best served by continuing their emphasis primarily on standards related to nomenclature and composition, while New and Nonofficial Remedies and Accepted Dental Remedies continue their primary emphasis on therapeutic actions and uses.

Comments on the Symposium

By LOUIS C. ZOPF, M. S.

It is generally conceded that any group of standards becomes of increasing value directly as their usefulness becomes apparent. I can subscribe to the statements which have been made in this symposium and would like to encourage the suggestions of Dr. Lloyd C. Miller and Dr. Justin L. Powers that the two official compendiums, the United States Pharmacopeia and the National Formulary, are definitely considering expanding their usefulness to the medical profession.

It is most gratifying to learn that the American Medical Association is contemplating a change in the format of New and Nonofficial Remedies by consolidating all drug standards in one section and the pharmacologic, therapeutic information in a second section.

Physicians have learned to respect the United States Pharmacopeia and the National Formulary and have also learned to understand that they are generally referred to by the abbreviations "U. S. P." and "N. F." Their understanding of these two books, however, seems to exist only as a regard for the standards for the substances listed therein and not for the knowl-

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