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Lindsley (C. A.)  
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## The Prescription of Proprietary Medicines for the Sick—Its Demoralizing Effects on the Medical Profession.\*

The subject proposed for consideration is embraced in the following:

Resolved, that it is demoralizing to the medical profession, and detrimental to the public welfare, to prescribe proprietary medicines for the sick.

In order to discuss the subject intelligently it is first necessary to define what is meant by proprietary medicines. Several terms and phrases are familiar to medical men and to the people as descriptive of medicines. Thus we have patent medicines, often called quack medicines, trade mark medicines, copyright medicines, nostrums, also officinal medicines, and the prescriptions of physicians.

Proprietary medicines include several of the above, and may be defined to be any medicines respecting which some person or persons possess an ownership, either of the method of preparation, or of some element in their composition which is secret, or else of some exclusive right to the manufacture or sale by which the medical profession is, on the one hand, kept in ignorance of their full qualities, or, on the other, deprived of such free and unlimited use of them as would be enjoyed from fair and honorable competition in their production. \* \* \*

It is to be shown that the use of the above medicines is demoralizing to the medical profession and detrimental to the public welfare. It follows as a logical corollary that whatever is demoralizing to the medical profession is, therefore, hurtful to the public welfare, in so far as the well-being of the public is bound up in and dependent upon the well-being of a sound and judicious system of medical administration.

The practice of using proprietary medicines is detrimental to the public welfare, in that it tends to arrest and discourage the practice of scientific pharmacy, and so interfering with and preventing the best results which should flow from this valuable aid to public hygiene. It is detrimental to public welfare in that it affords an easy method of defrauding the sick, by obliging them to pay excessive and exorbitant charges for their medicines.

It is detrimental to the public welfare in that it obscures and obliterates the distinction between quack medicines and others, so that the public cannot see the line which divides them. It also prevents any just discrimination between quack doctors and those who prescribe these quasi quack medicines. And so it destroys the confidence of the people in scientific medicine. It tends to endow quackery with some degree of respectability, but far more to degrade rational therapeutics to the level of bad empiricism.

It is demoralizing to the medical profession (and by that I understand the breaking up, disorganizing, and confusing the regular, orderly, and scientific work of the profession). It is demoralizing, I say, by giving public an unrestricted endorsement to the use of patent medicines.

It supplies the retail druggist the strongest temptation, the greatest facilities, and the most logical excuse for prescribing for the ailments of his customers instead of sending them to a physician.

It is demoralizing to the profession because it is ruinous to scientific nomenclature, and renders a classification of medicines utterly impossible. What will the next generation of medical men know about Lactopeptine? Maltine? Vitalized Phosphites? Celerina? Bromidia? Iodia? Petroleum Syrup? Soluble Phenole? Malto coca? Hydroleine? Listerine? Caulocorea? Viburnum Compound? and a more innumerable host of mixtures? These are all of ephemeral existence, having no vitality other than what they derive from the advertising pages of medical journals and the newspapers. They are for the most part the inventions of tradesmen, and in no sense represent the growth and progress of medical science.

As the medical men of the present day are greatly ignorant of the therapeutics of Hippocrates and Dioscorides of ancient times, because we are not acquainted with the nomenclature of their medicines, so also the doctors of even the next generation, are likely to be ignorant of our therapeutics; for the same reason. For not only the names, but even the

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agents themselves, of our *materia medica*, as they appear in the advertising pages of our medical journals, are of the most fleeting and transitory character. We do not even pretend to any accurate knowledge of their composition, because their production is in great part a secret possession of those who traffic in them—but we do know that they are of the most kaleidoscopic nature, the creations of the most part of capitalists and money seeking corporations, and as liable to fluctuations and changes as the fancy stocks of Wall street.

What pretensions can physicians make to scientific practice when therapeutics are based on such unstable foundations? The sources of the origin and the growth in favor of these remedies, can in no wise be distinguished from the influences which gave origin and popularity to Jayne's Expectorant, and Hop Bitters, and Swain's Panacea, and liver pads, and soothing syrups. The practice is demoralizing to the profession, because the use of ready-made formulas is sure to lower the standard of professional intelligence, to diminish the accurate knowledge of *materia medica*, and the capacity of making nice therapeutic adaptations of remedies.

*The encouragement of protected medicines is discouragement to the diffusion and general practice of scientific pharmacy,*

The relations of the physician and pharmacist to each other in their services to the sick public are so close and direct, that it would seem quite obvious that they should have no antagonisms, and that their mutual interests would be best promoted by the most free, open, and confidential intercourse and harmony of action. There can be no question that it is an advantage to every practicing physician, as well as to the community, to have a reliable and competent pharmacist to prepare and supply medicines. So also it is an advantage to every physician and to his patrons that pharmacists should be skillful and competent composers of prescriptions. They are each in a position to render useful aid to the other, and thereby the public are best served.

But what encouragement is there to pharmacists to become skillful and expert, if the physicians of their vicinity make no demand upon them for skill and knowledge? \* \*

What is a more natural consequence of such relationship between physician and pharmacist, than that the latter should retaliate, and ignoring the skill and knowledge of the physician, dispense these same factory-medicines to his customers without the prescription of the physician. And why should he hesitate to prescribe with confidence, when he can truthfully say to his patrons:—This is just what Dr. Pro, or Dr. Prie, or Dr. Tary would give you, if you should go to any of them. And his conscience would be quite easy in the belief that he derived his knowledge of these medicines from the same sources as the doctors—namely, the labels and wrappers of the packages which give full directions for use. And so, between the doctors and the druggists, the poor patients are badly abused, the science of medicine is brought into disrespect and contempt, and the more intelligent patient is justly suspicious that he is the victim of quackery.

All this makes a very serious view of the subject. The medical profession make great lamentation because the druggists defraud them of their fees by prescribing across the counter. But such complaints will never cease so long as we deprive the druggists of their just claims to the patronage of the community in which they live, and at the same time afford them such easy and unparalleled facilities for assuming the duties which legitimately belong only to our profession. \* \* \*

I inquire if any one is ingenious enough to invent or devise a more successful plan for intercepting patients on their way to our offices than this very one: the providing at all the drug stores the medicines we use, in the most convenient packages, wrapped about with full printed instructions about the diseases they will cure, and with all requisite directions as to dose and administration.

I doubt if any one will ever devise a process more suicidal to our professional interests, or dangerous to the welfare of the sick public. There are scarcely any of the common ills of flesh that are not provided for by these shrewd manufacturing chemists, and our drug stores are stocked with remedies ready prepared for the cure of each. The druggist is just as familiar with their virtues as the physician: both get their knowledge from the same sources, viz., the wrappers and advertisements. If then one's wife is the victim of dysmenorrhœa why should he go to his physician, when his druggist can probably show him his own physician's published certificate to the virtues of Hayden's Viburnum Compound, for that trouble? If he is suffering from neuralgia, his druggist can show him whole pages in medical journals of the testimonials of medical professors that bromidia will cure neuralgia. If he has a cough or his children have the croup or diphtheria, still a doctor is not required, for several medical journals advertise that "Petroleum Syrup is absolutely a specific and a certain cure for coughs, colds, croup, sore throat, diphtheria, and all bronchial affections." Every ailment is met by the ready-made remedy, vouched for by the profession and found at the drug store. There really seems to be no need for physicians; the manufacturers have

become the practitioners for the times. And they very liberally issue free of charge their little treatises on the Theory and Practice of Medicine and on Therapeutics, from which the profession seems to derive so much information that they voluntarily aid the plan with their abundant certificates and testimonials to its merits.

It is no discredit to the members of the medical profession that they are not also expert pharmacists. The two pursuits are distinct, and yet the physician can without compromising his position hold frequent conferences with a skilled pharmacist, as to the compounding of medicines in cases exceptional, to the great advantage of his patients. It is indefinitely less derogatory to his character than writing for trade-mark formulæ.

We cannot but be impressed with the magnitude of the injury to the public weal, when the knowledge of compounding medicines has become a lost art to the practicing physician. There is reason for a sense of deep humiliation, if we know so little of pharmacy, and have so little skill in adapting our remedies to the needs of our patients, that we are driven to seek what they require among ready-made prescriptions, as we would fit ourselves to a cheap coat at a ready-made clothing shop. In this aspect of the question, it must impress every one that the use of protected formulæ is detrimental to the public interest, and demoralizing to the profession. Again:

The adulteration of drugs and medicines has long been a notorious and undisputed fact. The facility with which it can be practiced and the difficulty of detection unite to make it one of the most successful fields for fraudulent operations known to the commercial world.

The more complex and mixed the preparations are, the more difficult it is to detect the cheat, and the greater the temptation to the manufacturer. Now whereas, the said manufacturers are not and never have been distinguished as pre-eminently superior to other business men in righteousness and true holiness, and whereas their sole object in business is *gain*, I risk nothing whatever of overstating the fact when I assert that the profession have less assurance and the public less protection, in regard to the quality and reliability of proprietary medicines as a kind of merchandise, than of most other sorts of merchandise.

The opportunity and temptation to fraud is open and constant, that poor human nature is no more capable of resistance in this special phase of the business than it has proved in other branches of the drug trade, in which fraud is so notoriously practiced.

I need only mention as illustrations, cincho-quinine and sweet quinine. Many other instances of similar frauds are sufficiently familiar.

Another source of unreliability is the frequent changes which the owners of these *nostrums* make in their preparations. We should keep in mind that their sole object in business is to manufacture an article which will *sell*. In their estimation its only value is the *commercial* value. Do not lose sight of a fact, which we must all recognize, that these manufacturers stand in a wholly different relation to the public from you. They make medicines simply to sell. They hold the same relation to the public that manufacturers of clocks do, or of rubber shoes, perhaps of I might even say manufacturers of bowie knives and pistols, who care not what execution they do. We use medicines to cure diseases. In the social scale, we stand upon a higher plane than they. While engaged in our professional duties, we are brought into the closest personal relations with the sick. Our responsibility, our success, our reputation, all depend upon the purity and integrity of the means we employ in aid of our skill, to relieve human suffering and preserve human life.

Pecuniary considerations are, for the time at least, disregarded in the anxieties of the hour. Manufacturing chemists feel no such responsibilities. The real consumer of their wares is far removed from them. They never meet him. They have no acquaintance with the sick chamber, with the anxious heart-broken friends, and the beds of death, with which the doctor is so familiar. No, nothing of that disturbs the composure of their systematic business methods. Their only concern is to improve the market demand for their manufactured wares—to conceal defects in them, and to exalt and magnify their merits.

It is a very prominent effort with most of them to make their compounds agreeable to the taste and pleasant to the sight. Superiority in these particulars give an acknowledged advantage over competitors. Hence, constant endeavor to remove an unpleasant feature of taste or appearance leads to frequent changes in the preparations, of which the physician gets no information.

It is not an improbable suspicion that the so-called improvement is often made at the expense of the merit of the medicine.

Now, how do we know this? A chemical analysis is generally impracticable and always expensive, and only reliable for the particular specimen tested. Physiological and therapeutic tests require larger opportunities than the private practitioner enjoys. We know

it on the evidence of these manufacturers themselves. We ought to receive that with confidence. They know more about the tricks of their own trade than we do, and they have a motive for telling the truth about each other. Almost every one of them in their advertisements intimates pretty broadly that the other manufacturers of the same product are not so trustworthy as themselves, that their own preparations are the only reliable ones in the market.

Our own State Medical Society has for more than a quarter of a century had this by-law on its books, to wit:

“That the several County Associations are hereby instructed to continue their investigations in relation to the manufacture, sale, recommendation, and use of nostrums or patent medicines by their members, and to present for trial any member so offending.”

The whole spirit of these laws is in the interest of public safety. It has been held as an undisputed law of right among all high-minded, honorable men in our profession from time immemorial, that no man can rightly hold for his personal advantage a secret remedy which will alleviate human suffering or save human life. And the same principle is equally maintained in denying to any one the right to the exclusive possession and control of a valuable medicine, whether it be secret or not, in such way as to debar his fellow creatures from the benefits of it.

The term used in the above by-laws are *secret medicines, nostrums, and patent medicines.*

It is a popular belief that *patent* medicines are secret, whereas the exact opposite is true—the very word patent signifies that it is not secret, from *pateo*, to open, expand, expose. There are very few medicines patented, for that reason, and because they are not patentable, as they cannot be proved to be new and useful inventions. \* \* \*

What becomes of the scientific character of medical practice, if our guides in therapeutics are derived from such sources?

What could more shock the common sense of any intelligent community, and destroy their confidence in the practice of the *regular* profession, than the knowledge of such a fact as this?

The manufacturers of trade-mark nostrums have watched and encouraged and fostered this growth of credulity in the profession and have a much truer estimate of it than we have ourselves. It has grown and strengthened under their careful cultivation, until now they no longer hesitate to practice upon the members of the medical profession precisely the same artful methods which their more shameful brothers in quackery have practiced upon the common people.

Just as “Brandreth’s Pills,” “Townsend’s Sarsaparilla,” “Hemboldt’s Buchu,” “Kennedy’s Discovery,” and a host of other quack medicines have been forced upon the public by the liberal use of printer’s ink spread upon tons of gaudy-colored paper, thrust in their faces at every turn, pushed into their doors, and plastered upon their walks—exactly after the same methods the mails are loaded with the pamphlets and circulars and cards, in colors not one whit less gaudy, from the manufacturers of these protected remedies. They are addressed to the profession—carefully directed to the profession—the profession evidently has appreciated the flattering compliment contained in this appeal to its judgment, reiterated over and over again that these communications are intended only for the medical profession, not for the *Ἰοιπολλοι*—the vulgar public.

Our medical journals, too, are stuffed with a rehash of the same in the form of advertisements. The certificates of their virtues are in no respect less extravagant and boastful than those concerning “Kennedy’s Discovery,” or “Sherman’s Lozenges,” only a little, if any, more judicious and discriminating.

The following is clipped from a medical journal:

“PETROLEUM COMPOUND is a perfect emulsion of Petroleum Syrup and pure Cod-Liver oil combined with the Hypophosphites of Lime and Soda, is palatable and agreeable, and forms the most valuable and sure remedy for the certain cure of Consumption, Asthma, Bronchitis, Hay Fever, and all Chronic Lung Diseases.

“PETROLEUM SYRUP is absolutely a specific and a certain cure for Coughs, Colds, Croup, Sore Throat, Diphtheria, and all Bronchial Affections.

“We have hundreds of testimonials from living persons, who have taken these remedies and now enjoy sound health.

“CIRCULARS MAILED FREE. The name and address of persons who have taken and used these remedies will be cheerfully given.”

This is the sort of stuff these manufacturers have the effrontery to address to the medical profession, and the *editor* and *proprietor* of a medical journal prints it, and asks his readers to consider his periodical devoted to medical science!

Here is another instance, scarcely less quackish than the above, and publicly endorsed

by men apparently holding responsible positions as teachers of medicine. Yes, indeed, teachers! their titles seem to indicate that they are *teachers!* *Mirabile dictu!* teachers of medicine! Heaven help their students, and their future patients, if this is the sort of therapeutics taught in the colleges these professors represent.

### BROMIDIA.

"BROMIDIA is the hypnotic par excellence. It produces refreshing sleep, and is exceedingly valuable in sleeplessness, nervousness, neuralgia, headache, convulsions, colics, etc., and will relieve when opiates fail. Unlike preparations of opium, it does not lock up the secretions. In the restlessness and delirium of fevers, it is absolutely invaluable.

The following physicians, having tested bromidia, recommend it to the profession:

J. K. Bauduy, A.M., LL.D., St. Louis, Mo., Professor Nervous and Mental Diseases, Missouri Medical College.

L. Ch. Boisliniere, M.D., LL.D., St. Louis; Prof. of Obstetrics and Diseases of Women, St. Louis Medical College.

Wm. B. Hazard, M.D., St. Louis, Mo.; Prof. of General Pathology and Mental and Nervous Diseases, St. Louis College of Physicians and Surgeons.

J. S. Jewell, A.M., M.D., Chicago, Ill.; Ed. Journal Mental and Nervous Diseases, and Prof. of Nervous and Mental Diseases, Chicago Medical College.

H. M. Lyman, A.M., M.D., Chicago, Ill.; Prof. of Physiology and Diseases of the Nervous System, Rush Medical College.

D. R. Brower, M.D., Chicago, Ill.; Ed. Chicago Medical Journal and Examiner, and Professor of Nervous and Mental Diseases, etc., Woman's Medical College.

I. N. Danforth, M.D., Chicago, Ill.; Professor of Pathology and Diseases of the Kidneys, Woman's Hospital Medical College; President and Lecturer on Pathology, Spring Faculty, Rush Medical College.

D. D. Bramble, M.D., Cincinnati, O.; Dean; Prof. of Principles and Practice of Surgery and Clinical Surgery, Cin. Col. of Medicine and Surgery.

Wm. Clendenin, M.D., Cincinnati, O.; Prof. of Descriptive and Surg. Anatomy, Miami Medical College.

J. B. Marvin, M.D., Louisville, Ky.; Prof. of Chemistry, etc., and Clinical Lecturer on Nervous Diseases, Hospital College of Medicine.

W. B. Fletcher, M.D., Indianapolis, Ind.; Professor of Physiology, Hygiene and Clinical Medicine, Medical College of Indiana.

W. J. Scott, M.D., Cleveland, O.; Professor of Principles and Practice of Medicine, Medical Department Wooster University.

H. H. Powell, M.D., Cleveland, O.; Professor of Obstetrics and Diseases of Children, Cleveland Medical College.

Then, too, our offices are daily beset with polite, well-dressed and loquacious emissaries, coming laden with samples of their productions, which they beg us to test the merits of, upon our poor patients. How exactly like the way in which "pain-killers" and "all healing ointments" are politely presented to the clerical profession, who in return readily publish certificates of the astonishing virtues they find in them.

Human credulity is about the same in all ranks and stations of life. But it is very humiliating to know that boastful pretensions, constantly, persistently, and boldly re-asserted, should make dupes of doctors almost as easily as of their patients. This may seem very strong language. But I appeal to your own experience and knowledge of facts to tell me upon what other foundations rest the wide and general use of proprietary medicines, than the boastful advertisements in which they are wrapped. Tell me, if you can, which of the standard authorities in therapeutics advocates the use of these peculiar forms of the *materia medica*. Not any. I state it boldly, as my sincere conviction, that the extensive sale of proprietary medicines is secured through the prescriptions of medical men, by precisely the same system of persistent, boastful advertisements and certificates, applied to our profession, that secures the sale of Vegetable Liver Pills and Hop Bitters, and all such trash, to the general public. Where else do we learn of these things except through the advertisements?

One illustration will suffice to enforce the truth of this statement.

Scarcely any of the proprietary medicines have found more favor with our profession than the syrup of the hypophosphites of soda, lime and potash. So extensively has it been prescribed, especially for tubercular diseases, that almost all the makers of ready-made medicinal compounds have found it profitable to engage in the manufacture and sale of this preparation.

It is now more than twenty years since Dr. J. F. Churchill announced to the Imperial

Academy of Medicine at Paris that he had made a discovery of a specific cure for tuberculosis. His theory was, that the immediate cause, or an essential condition of the tubercular diathesis, is the lack of phosphorus in the system: and the specific remedy consists of a preparation of phosphorus which can be immediately absorbed or assimilated, and which is at the same time at the lowest degree of oxydation.

His report created, as well it might, a sensation in the medical and scientific world. It was accompanied by a detailed statement of the use of the soluble salts of the hypophosphites of lime and soda in thirty-five cases, of which nine were cured, eleven were improved, fourteen died and one was still under treatment.

The keen perception of shrewd business men was not at fault in seizing upon the time and the occasion to develop a field of enterprise which, under their skilled cultivation, has yielded them a bountiful harvest.

Observe the conditions. One of the most eminent centers of medical learning in the world receives the announcement that a specific cure for consumption has been discovered. The disease is among the most fatal that afflicts mankind. Throughout America, and in most parts of Europe, its victims outnumber those of any other malady. It is a chronic affection, lasting months and years, during which the patient seldom despairs of recovery, and is a faithful taker of medicines until death. What a magnificent opportunity for an enterprising business speculation. From statistics carefully studied, it was estimated that from eighty to a hundred millions of the inhabitants of the globe were annually carried off by some of the forms of this disease, and therefore should be legitimate customers for this newly discovered cure. The opportunity was not neglected. Without delay the manufacture of the compound was undertaken by purely business men, as a purely business enterprise. They assume at once the labor and cost of promulgating the discovery. It was announced, and is still, as the "most brilliant of the century." Announcements, circulars, certificates setting forth the wonderful properties of the hypophosphites began to be poured in upon the profession through every avenue of approach, and the shower has never ceased, or even abated. The following is a sample of the style: "The success attained in all the countries of Europe, as well as in the United States, has established the therapeutical value of the hypophosphites beyond all controversy, and has raised the discovery of Dr. Churchill above the mists of controversy and prejudice into the serene region of scientific truth."

By every device and art known to skilled advertising, the sale of this proprietary medicine has been promoted and maintained, and almost wholly through the agency of physician's prescriptions. We have never been permitted to lose sight of this remedy for a day. It is obtruded upon our attention in every possible way, and the results are just what the shrewd business men foresaw. They have used us to make a market for their merchandise. The medical profession prescribe the hypophosphites very largely, and, sad to say, their confidence in it is based almost absolutely upon the advertisements of those who traffic in them, and upon nothing else. I appeal again to your knowledge of facts to tell me what recognized authority in therapeutics recommends the use of these hypophosphites. I have examined all the recent authorities to which I have access, with the following results:

Wood & Bache, U. S. Dis., says: "The author does not wish to be understood as recommending these remedies in consumption. The weight of testimony appears to be opposed to the first favorable impressions."

H. C. Wood, Mater. Med. and Toxicol., does not mention any of them.

Prof. Bartholow does the agent the honor of mention, but doubtless has reference not to the proprietary preparations, but to the Compound Syrup of the Hypophosphites of lime, soda, potash, and iron, for which a formula was published some years ago in the *Journal of Pharmacy*, by Prof. Proctor. He says it is an agreeable preparation, but not better in effect than the phosphates into which it passes by oxydation in the stomach.

Biddle says: "They have been introduced in the treatment of phthisis under an impression that they are useful by furnishing phosphorus to the tissues. They more probably act by stimulating cell-growth and nutrition."

The National Disp. Stillé & Maische, says: "The evidence of the efficacy of these preparations, independently of other and more efficient medicines (iron and cod liver oil) and hygienic influences, is too slender to be seriously entertained." Again: "The hypophosphites have been used with alleged success in phthisis; but the allegations have been unsupported by the results of experience."

Ringer, who is an authority on therapeutics as often quoted as any, disposes of the whole subject in these words: "They have been extolled for their efficacy in some forms of phthisis, and have found more favor with American than with English practitioners."

Prof. Binz, of the University of Bonn, an eminent authority, makes no mention, but his editor, in the last American edition, uses this language: "Though largely prescribed in phthisis, the opinion of the medical profession does not appear to be at all in favor of their possessing any specific influence over that disease."

Farquharson, one of the most recent and reliable writers, and the author of a "Guide to Therapeutics," omits mention.

Dr. Cotton, at the London Hospital for Consumptives, writes at different dates as follows: In 1858, "Found it of no avail." 1861, "No specific action, and even when useful, inferior to other remedies." In 1868, "They are absolutely harmful by excluding more appropriate remedies."

M. Dechambre, in Paris, rendered a similar verdict.

Dr. Quain: "Comparatively, if not absolutely useless."

Dr. J. H. Bennett: "Of twenty cases, only nine in which the disease did not readily advance while under treatment."

The above are eminent authorities, men whose judgment and opinions we are accustomed to regard with respect; many of them have made therapeutics a special study, and have investigated the powers of medicines by scientific methods, and have not drawn their conclusions solely from the varying opportunities of clinical observation. Now, when such men either omit all mention of these medicines, or speak disparagingly of their value, to what can we ascribe the enormous sale they have had through the influence of the profession, when put forth in the form of a "nostrum," except it be the blind and trustful credulity with which the profession have received the exaggerated statements of their powers as set forth in the advertisements of their proprietors? What else, in fact, can we find to recommend these syrups of the hypophosphites besides the boastful proclamations of those who make and sell them?

Other illustrations might be presented if it were necessary, but I have already wearied your patience.

In what I have said, I have attempted to show, 1st, that proprietary medicines are in a true sense nostrums; 2d, that their use by the profession is in direct violation of one of the long-established foundation principles of medical ethics.

3d. That they are not reliable, either as to purity of constituents or uniformity of combination.

4th. That they are liable from time to time to differences unknown to the prescriber, from various causes, often in consequence of experimental changes by the manufacturer.

And finally, that the constant and exclusive appeal to the members of our profession has so flattered their self-esteem that it has won their confidence, and physicians have gradually learned to put such implicit trust in the interested statements and assertions of the manufacturers of proprietary medicines as to lead them to ignore the study of better and more reliable authorities.

Gentlemen of the Connecticut Medical Society, if the views which I have presented are sustained by your observation and experience, it would be a reflection upon your intelligence to question your opinion, that it is detrimental to the public welfare, and demoralizing to the medical profession, to treat the sick by the aid of proprietary medicines. *Quod erat demonstrandum.*

