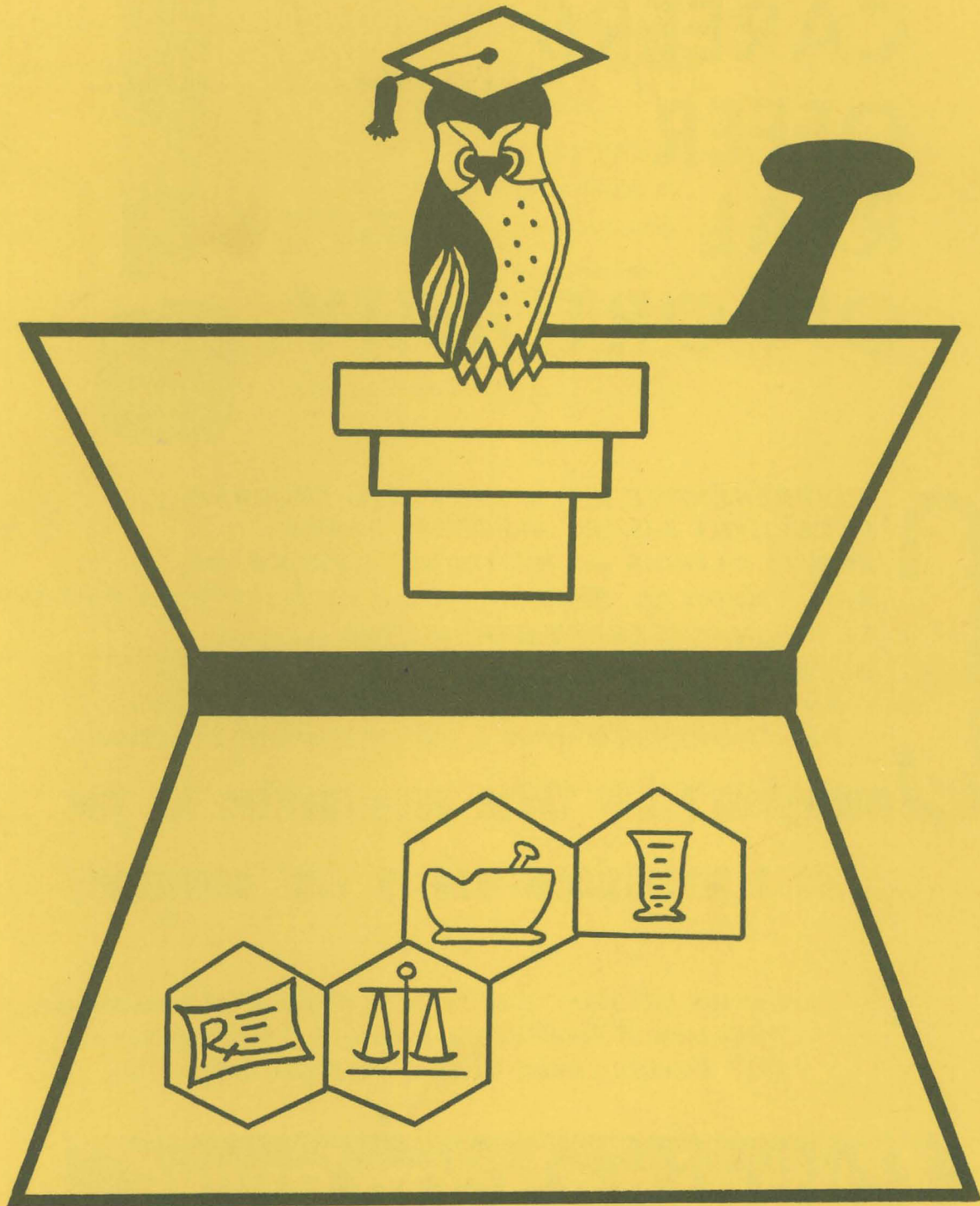
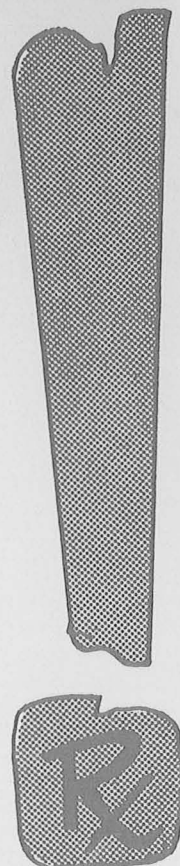


# the WAYNE PHARMIC



spring 1969

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VOLUME 13

1969

NUMBER 2

The Wayne Pharmic is the official publication of Wayne State University College of Pharmacy, written by, for, and about Pharmacy students and graduates.

### THANK YOU:

The Wayne Pharmic staff wishes to extend their appreciation to Dr. Dunker for his invaluable assistance in forming this publication.

### COVER:

Knowledge comes, but wisdom lingers---

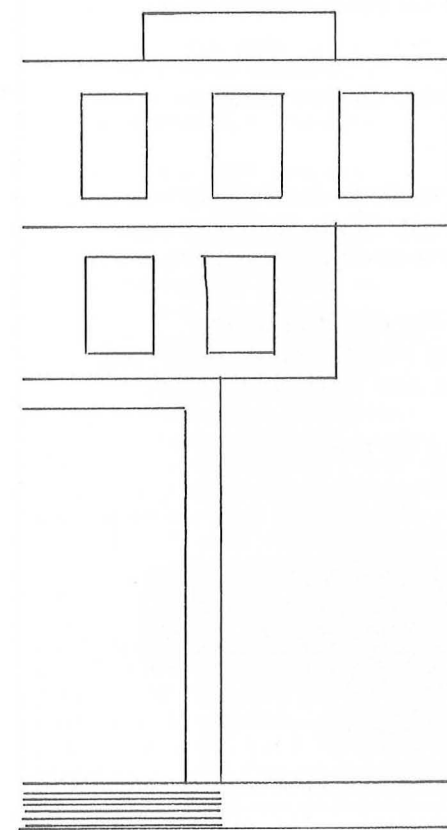
Alfred Lord Tennyson

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### STAFF

Editor .....	Eva Witteczek
Business Manager .....	Steve Zuckerman
Assistant Business Manager .....	Edwin Malkin
Publication Coordinator .....	Robert Barger
Photographer .....	Kenneth Sayes
Contributors .....	Rosemary Bonnette Arnie Finkel Tom Lynch Edwin Malkin Ken Resztak
Guest Writers .....	Dean Martin Barr Hanley Abramson, Ph.D. Harold Bailey, Ph.D. Raymond Dauphinais, LL.M. Horace Ho Loh, Ph.D. Willis Moore, Ph.D. Janardan Nagwekar, Ph.D. Henry Wormser, Ph.D.
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Wayne Pharmic





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Gold Seal wishes you success in your career. We want to be a part of the future you're looking forward to--as a registered pharmacist.



Dean Martin Barr

## FROM the DEAN'S DESK

### The Future Role of Pharmacy

Throughout the past year, all students at our College have heard at one time or another discussions by members of the Faculty and various professional leaders as to the future role of pharmacy as a health-care profession. It is fair to say that there is no unanimity of opinion on the matter.

The Task Force on Prescription Drugs recently reported to the United States Department of Health, Education, and Welfare on various matters concerning the profession. In its publication entitled *The Drug Makers and The Drug Distributors*, the Task Force included (in its Chapter 19 of that report) a section entitled "The New Role of Pharmacy". Selected parts of this chapter are presented below for your study and consideration:

"Today, the stereotyped role of the pharmacist is seen as that of a man in a white coat counting tablets, typing labels, and calculating the price. One commentator has said:

"There are those in the profession who practice it as a retail business, adhering to the philosophy that as the drug passes through my hands, I should get something for handling the merchandise." (1)

On the other hand, this same observer has noted that there could be a different role for the pharmacist:

"There are those who are equally certain that the process of supplying a drug is a mechanical and collateral act remote from the drug information specialist who is more properly concerned with the selection of the right drug and its pharmacological effect." (1)

The possibility that pharmacists might assume the role of drug information specialist--rather than performing tasks which in many instances could be done better and more economically by machine--is currently exciting increased interest among those who see pharmacists taking a new and important part in the total health team.

To those who support such a concept, it is apparent that much of the traditional training still being given to pharmacists is no longer relevant, but that pharmacists possess many skills which have a strong potential for application in modern health care.

**Number of Pharmacists.** The number of pharmacists in active practice has increased from 101,630 in 1950 to 122,421 in 1967, but the annual rate of increase has not kept pace with population growth. This occupational time lag, coupled with the increased use of prescription drugs, might indicate a shortage of pharmacists. The lack of pharmacies in many hospitals is

likewise used as an indication of a shortage in pharmacist manpower. Such a shortage, however, is difficult to demonstrate.

Of the licensed pharmacists currently in practice, about 85 percent are active in community pharmacies. (2) (The proportion in 1962 was 91 percent.) About seven percent are hospital pharmacists, nearly five percent are engaged in manufacturing or wholesaling, and the remainder--about three percent--are employed in educational, governmental, and other institutions.

Among those in community pharmacy practice, many work in establishments which dispense only five to ten prescriptions per day. Thus, they spend the greater part of their time in retail activities which may be only remotely related to consumer health. In some metropolitan areas, several pharmacies may exist within the same area, and the number of prescriptions each fills daily may be minimal.

It may be hypothesized that--if a highly educated pharmacist must supplement his income by routine retail functions in order to practice his profession--there is no substantial unfilled need for his professional services. Therefore, there may be no shortage of pharmacists in terms of the economic facts in the retail drug trade.

**Education of Pharmacists.** Any evaluation of the suitability of modern pharmacists for their present duties, and of their competence for different roles, requires an assessment of their educational training, particularly the considerable variation in length of training.

From available information, it appears that seven percent of those now in practice were not graduated from any of the 72 accredited schools of pharmacy in the United States. They were granted licenses after completion of brief, concentrated courses--usually lasting six months--and for prolonged periods as apprentices and assistant pharmacists. The last of the six-month schools closed in 1949.

Nine percent were graduated from a school of pharmacy after a two-year academic program and another nine percent graduated after completing a three-year program. The remainder--about three-fourths--have received academic training of four years or more.

In recent years, the pharmacy curriculum has begun to change in content as well as length. Traditionally, the program was directed toward the physical sciences, with major emphasis placed on the compounding techniques employed in the preparation of prescriptions, with relatively little time spent on the biological sciences, and scant attention was paid to the clinical condition and needs of the patient. Now a concern is being expressed about the need of pharmacists to

(Continued on Page 22)

## Reflections from the Editor

As we look back on the past school year, we cannot help but to reflect on the role we are playing in our dynamic society. We are fully aware that the profession of pharmacy is undergoing changes and that we are very much involved in these changes. We are on the threshold of becoming part of the health team. We should recognize these changes and accept our responsibilities. Regardless of what aspect of Pharmacy we pursue, we must remember that our actions will reflect directly on the profession.

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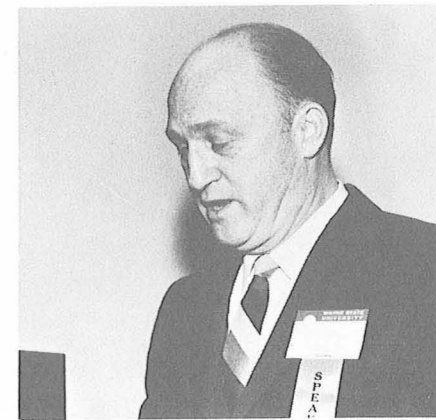
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## College of Pharmacy

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**Arnold Finkel**

**Edwin Malkin**

**Gilbert Steiner**

**Richard Maurer**

**Dr. Melvin F. W. Dunker, Faculty Advisor**

# THE GRADUATING SENIORS -- 1969

The June 1969 Commencement Exercises will award 36 justly earned Bachelor of Science degrees in the College of Pharmacy. The Graduating Seniors will then begin their internship training and forge another step closer toward the goal of becoming Registered Pharmacists. After struggling for five years together, the Graduates are all anxious to apply their knowledge to professional practice.

The majority of our class will enter community pharmacy, although a substantial number will enter hospital practice. Others feel that they should deepen their pharmaceutical background by en-

tering Graduate Schools and practicing their profession on a part-time basis for the moment.

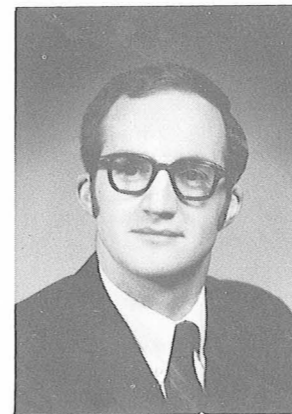
Alice Rice is planning to work for her M.S. and then Ph.D. in the field of Pharmacology. She will continue her project involving cancer prevention using a strain of fruit flies in which 90 percent develop brain tumors.

Robert Barger, Rosemary Bonnette, Hugh Hollingsworth, Ken Resztak, and

Eva Witeczek are considering Clinical Pharmacy as their major for graduate study.

Ken Sayes will be entering Medical School at Michigan State in the Fall.

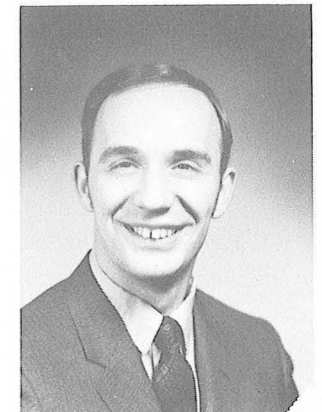
Best wishes are extended to Judy Zielke who became Mrs. Fred Junod on December 21, 1968 and John Triantaflos who was married on March 22, 1969. Congratulations are also in order to Rosemary Bonnette who will be receiving another degree, namely that of MRS., when she becomes Mrs. Anthony Boutt on July 5, and to Denny Lisagor, Dave Likavec, and Gary Marx who will also be taking the big step when they are married this summer.



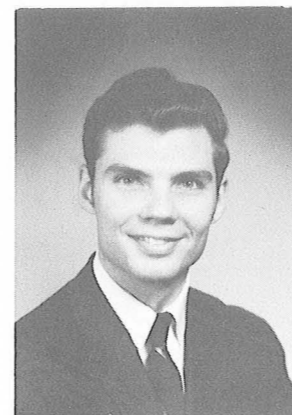
**John P. Asher**  
26, Single  
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ASHP, APhA



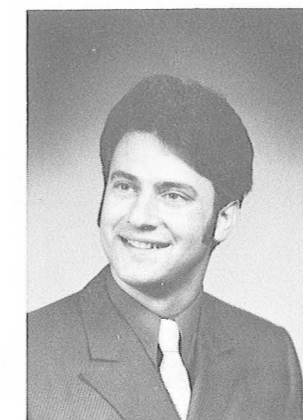
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Lambda Kappa Sigma  
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Rho Chi, SAB, APhA



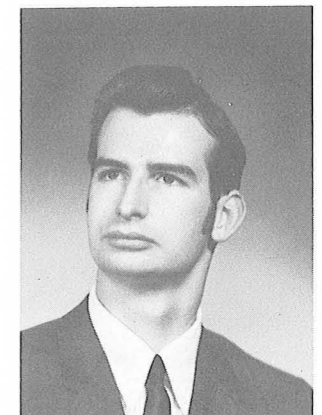
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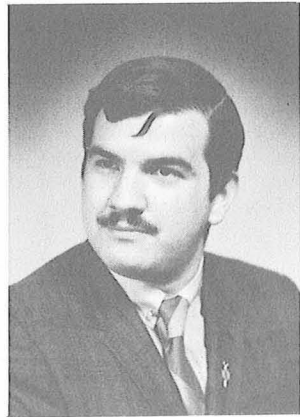


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24, Married  
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APhA

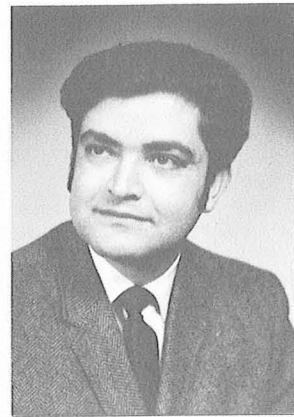




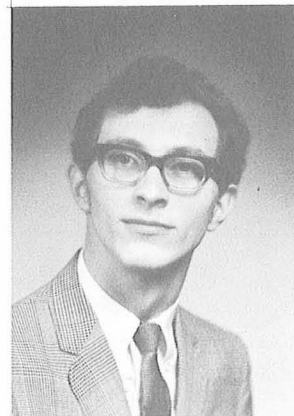
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Kappa Psi  
Rho Chi  
SAB, S-FC, APhA



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Sigma Alpha Mu  
SAB, APhA



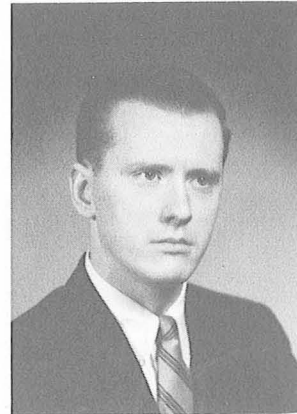
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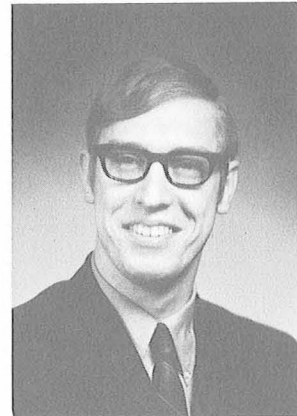
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Hugh Alexander Hollingsworth  
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Drug Abuse Program  
SAB, APhA



John L. Hopkins  
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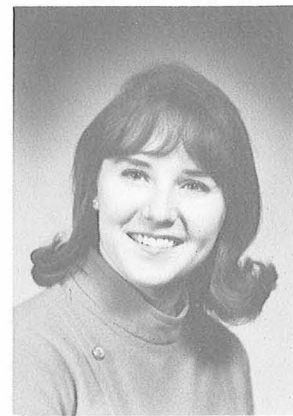
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Wayne Pharmic



Stephen L. Janoff  
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Judith R. Junod  
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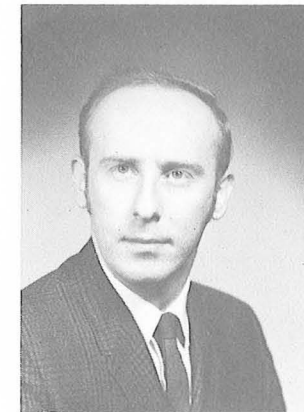


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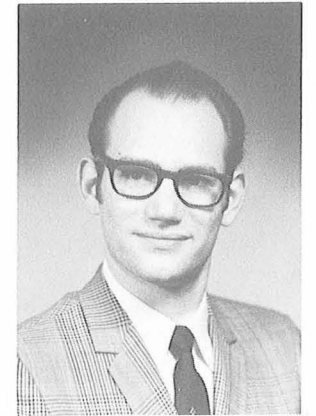
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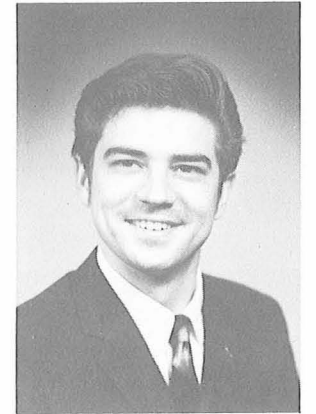
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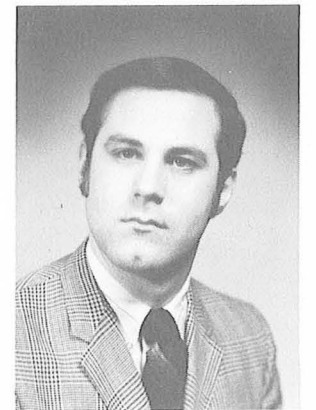
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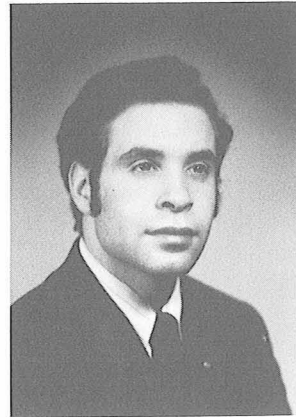
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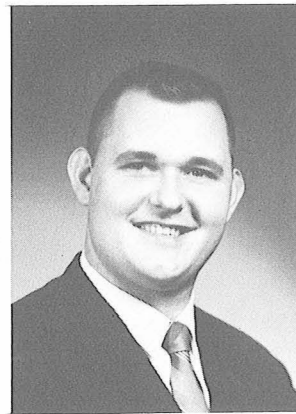
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Phi Delta Chi  
Drug Abuse Program, APhA  
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Rho Pi Phi  
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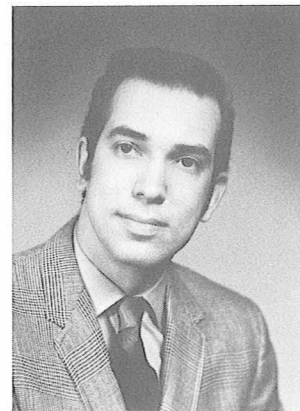
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Tau Epsilon Phi  
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APhA, SAB



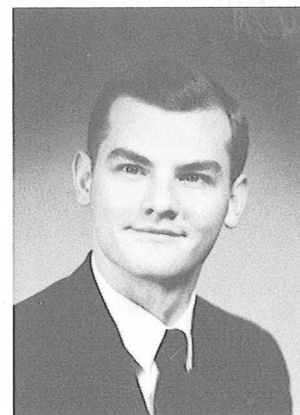
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Joan Ovid  
Lambda Kappa Sigma  
ASHP, APhA



Dennis Raimi  
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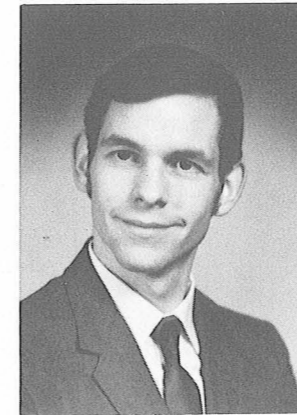
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Wayne Pharmic  
Drug Abuse Program  
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Drug Abuse Program  
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APhA, S-FC, SAB



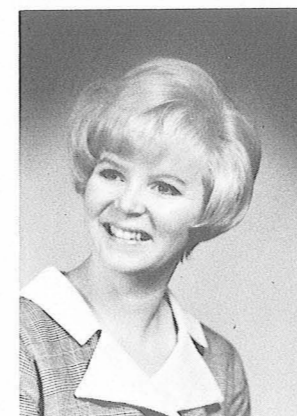
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Alpha Zeta Omega  
Phi Sigma Delta  
APhA



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Drug Abuse Program  
Wayne Pharmic  
APhA



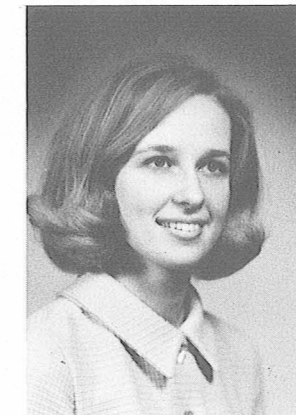
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Lambda Kappa Sigma  
ASHP, APhA



Carol Ann Stolberg  
23, Married  
APhA



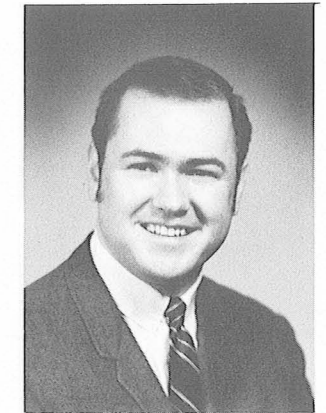
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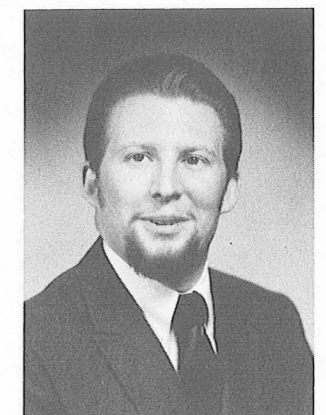
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Eva Marie Witeczek  
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Lambda Kappa Sigma  
Wayne Pharmic  
APhA, ASHP

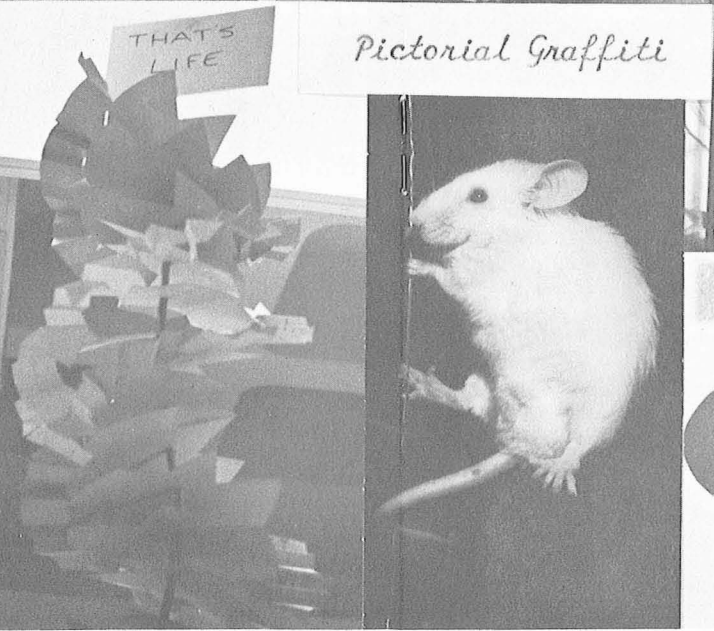
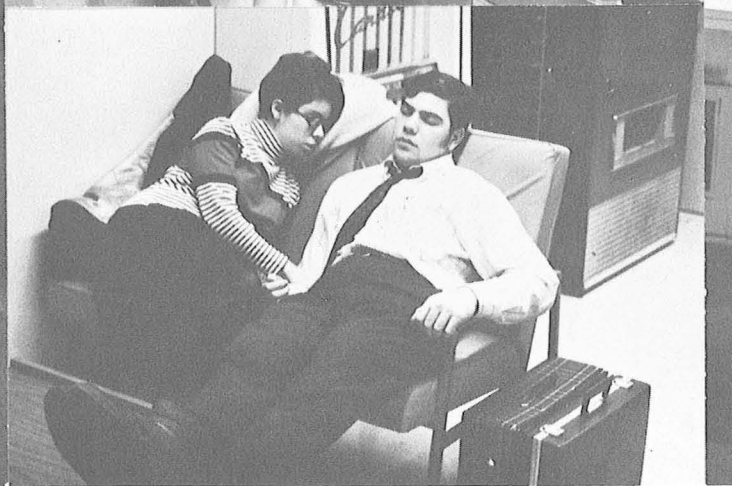
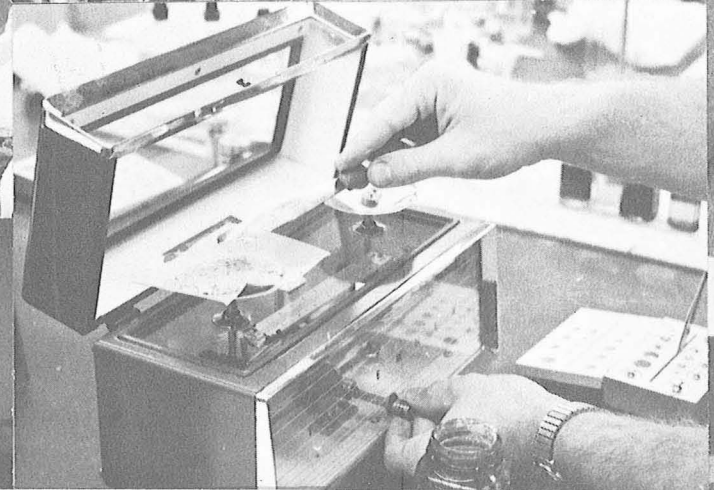
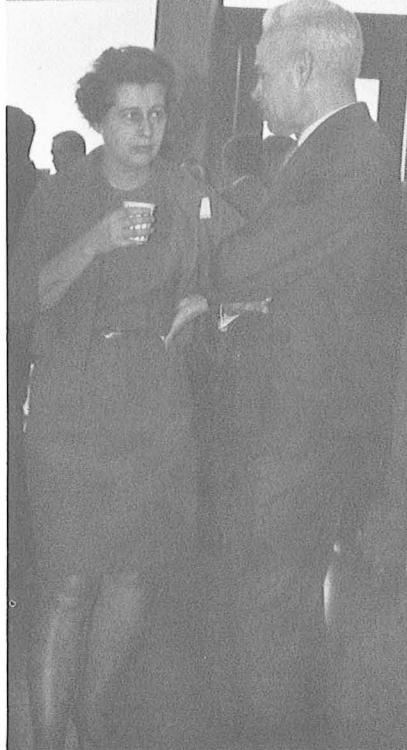
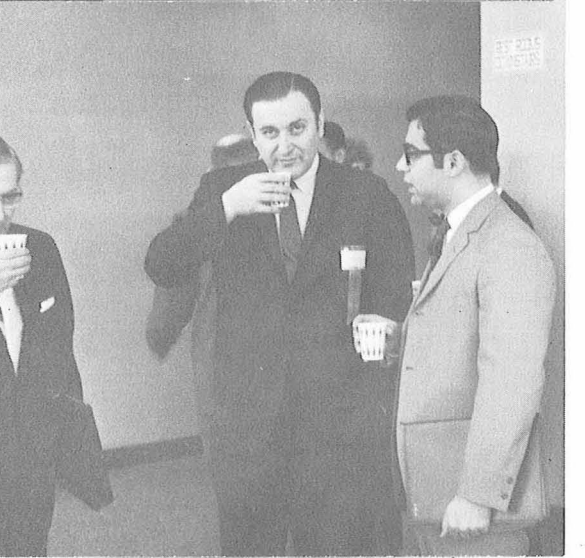
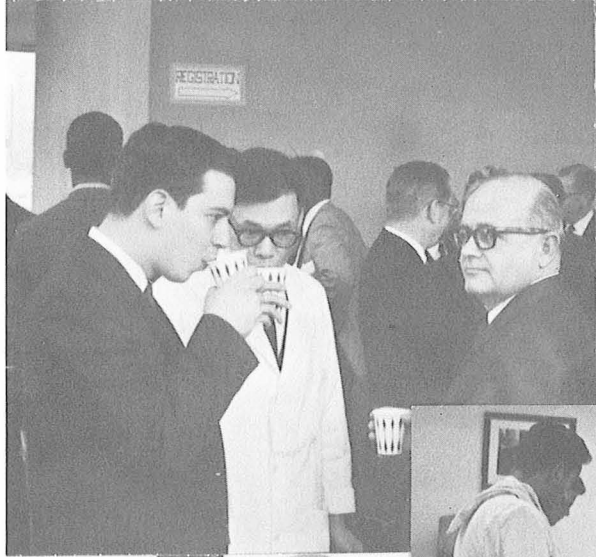
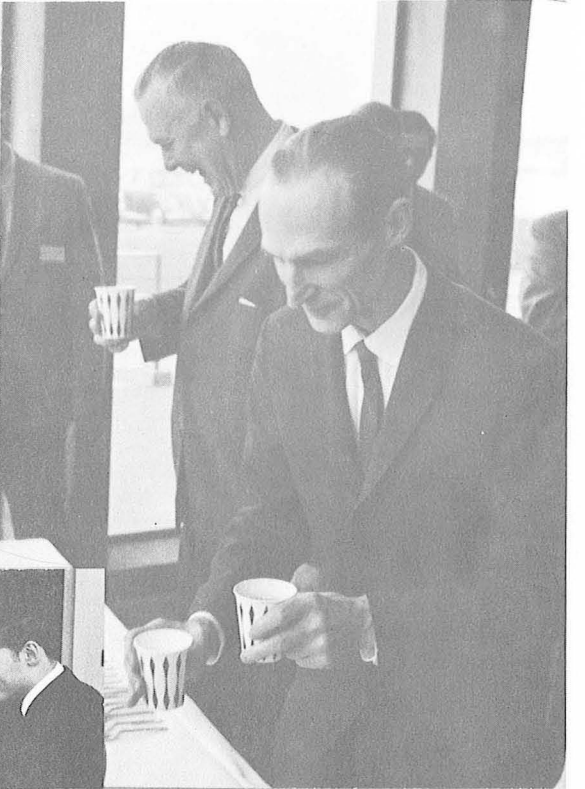
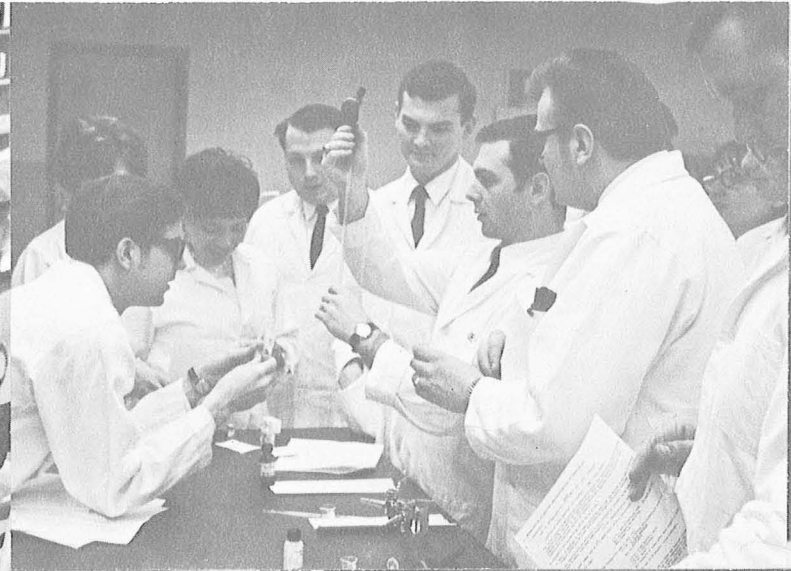
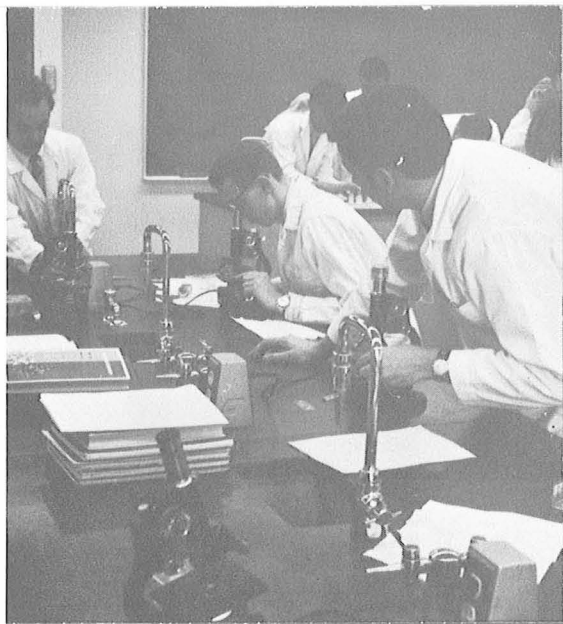


Larry James Worden  
30, Married  
APhA



Steven J. Zuckerman  
22, Single  
Rho Pi Phi  
Wayne Pharmic  
SAB, APhA





*Pictorial Graffiti*







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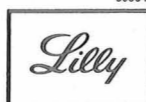
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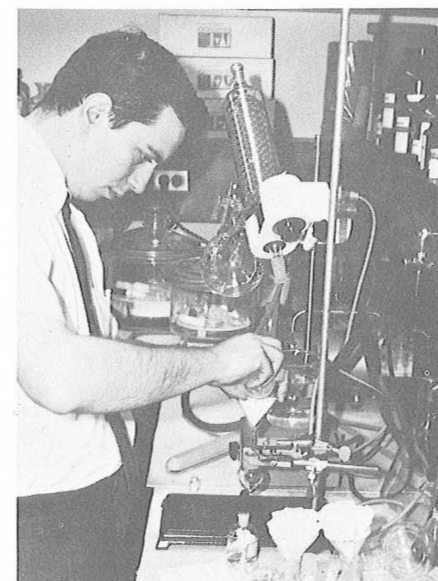
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## FACULTY FLICKERS

An instructor is a professional who walks into a classroom, lectures for an hour or so, and then leaves the room only to reappear for the next class meeting in a day or so. What do these people do to occupy the rest of their waking hours?

The following information was assembled to give insight into some of the activities carried on by our faculty outside of the classroom.



**Dr. Hanley Abramson**, Assistant Professor of Pharmaceutical Chemistry, has divided his research efforts into three areas. The first concerns the synthesis of cardenolide alkylating agents as potential inhibitors of transport ATP. The goal is to shed some light on the molecular mechanism of action of the *Digitalis* glycosides. This work is supported by a grant from the Michigan Heart Association.

Much time is also being spent on the elucidation of the mechanism involved in an unusual chemical reaction whereby 3-acetoxy-delta-pregnen-20-carboxaldehyde is converted to pregnenolone acetate upon reaction with amine hydrochlorides, including amino acids. There is reason to believe that this conversion may be of significance in the transformation of cholesterol to pregnenolone.

The project of prime interest, is the isolation and characterization of alkaloids from *Gymnocladus dioica*. This tree grows in lower Michigan and the leaves and bark have been reported to be fatal to animals who have eaten them. At least one of the alkaloids has been isolated and Dr. Abramson is presently in the process of elucidating its structure.

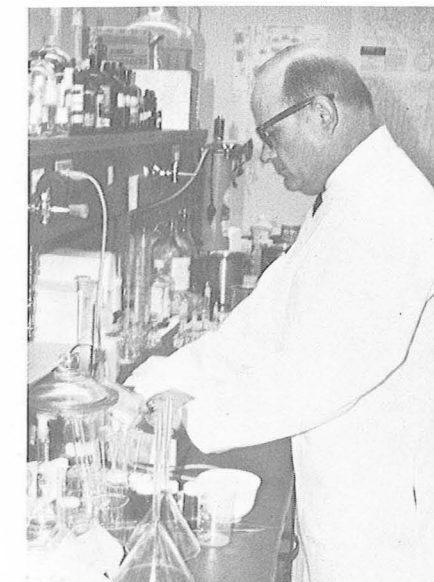
**Dr. Willis Moore**, Associate Professor of Pharmaceutics, centers his interest in Biopharmaceutics. This area entails the physical and chemical properties that influence the absorption of a drug from its formulation at the site of absorption. Presently, Dr. Moore is investigating the relative availability rates for absorption between tablets and capsules. With the help of graduate students, Dr. Moore has demonstrated that when exactly the same ingredients are formulated into a tablet and into a capsule, the tablet formulation releases its medication for absorption at many times the rate of the capsule formulation. The primary reason for this is that a capsule does not disintegrate, physically, as does a tablet.

This summer, Dr. Moore will begin a kinetic stability study on the pH for optimum stability of dipyrone.

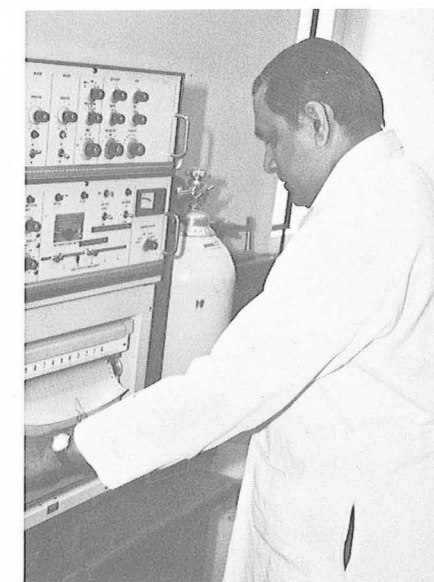
**Prof. Raymond Dauphinais**, Professor of Pharmaceutical Administration, has focused his interest on the socioeconomic and legal factors related to drug development, distribution and control, with particular emphasis on the pharmacist and his professional services as an integral part of total health care. His attention has been directed to the pharmacist as an individual health practitioner.

At the present time Prof. Dauphinais is directing research studies in Continuing Education of Professionals, Utilization of Non-Professional Pharmaceutical Personnel, and the Development of a Model Private Pharmaceutical Practice in a Rural Michigan Health Service Project.

Since coming to Wayne in 1964, Prof. Dauphinais has emphasized the contemporary approach to Pharmaceutical Administration, considering the person, place, thing, and activity related to pharmaceutical services.



**Dr. Janardan Nagwekar**, Associate Professor of Pharmaceutics, has been active in the area of Biopharmaceutics and Pharmacokinetics. A research paper entitled, "The Mutual Inhibitory Effect of (-)-Mandelic Acid and Certain Sulfonamides on the Kinetics of their Urinary Excretion in Humans," has recently been accepted for publication in the *Journal of Pharmaceutical Sciences*. This is but one example of the many studies done by Dr. Nagwekar in this area.



The main objective of the research is to determine the structural requirement(s) of drug molecules for the carrier mechanism responsible for renal tubular secretion of the compounds. Dr. Nagwekar hopes to gain some insight into why certain drugs have a longer life (half-life) in the body than others.

It has been revealed that the biological half-life of certain drugs increases with the administration of increased doses, and the reasons for this phenomenon are not well understood. Dr. Nagwekar



is using "model compounds" that serve to isolate the complicating factors such as metabolism and binding of drugs to plasma proteins.

Dr. Horace Loh, Associate Professor of Biochemical Pharmacology, is working on two related research projects. The investigation is concerned with the tolerance to and physical dependence on morphine and the mechanism of morphine analgetic action.

It has been observed that there is a linear relationship between the degree of physical dependence and the degree of tolerance. Dr. Loh has found that a protein antagonist inhibits the tolerance to morphine and also the physical dependence. It was therefore postulated that protein synthesis might be involved in these phenomena. An animal that is "hooked" on morphine exhibits a greater synthesis of 5-HT. A protein antagonist is known to prevent 5-HT synthesis with morphine. Dr. Loh's theory is that morphine induces serotonin synthesis and this is responsible for the tolerance and physical dependence.

In the second phase of experimentation, Dr. Loh is using other drugs known to effect the 5-HT level to determine their influence on morphine tolerance. Reserpine has been shown to abolish the analgetic action of morphine.



been partially resolved by chromatography.

Various other research projects also occupy Dr. Bailey's time, including a study of conditions for the optimum production of ergosterol from the "ergot fungus", *Claviceps*, grown in culture. A method for the rapid identification of antibiotics using chromatographic methods and spot tests is also being explored.

### Steven Wilson Seminar

(Continued from Page 5)

about 80 percent of the nursing homes receive pharmaceutical services via retail pharmacy. These same community pharmacies also have the opportunity of staffing many small hospitals which cannot afford a full time pharmacist.

The following are ten predictions for 1975:

- 1) About 75 percent of prescriptions will be paid by third parties.
- 2) Large community pharmacies will dominate the retail scene.
- 3) Family prescription records will routinely be kept and will provide the pharmacist with much needed information.
- 4) Increases in institutional practice will greatly effect the methods of community practice.
- 5) The shortage of pharmacists will be acute and technicians will be used.
- 6) Compulsory post-graduate education will be made law in about one-fourth of the states to renew a pharmacy license.
- 7) Government will be a strong factor in the regulation of health care.
- 8) The great majority of physicians will want the name of the drug on the prescription label (85%).
- 9) The pharmacists will be increasingly

concerned with surgical supplies and such a course will be added to the undergraduate curriculum.

- 10) Institutional and Clinical pharmacy will be required courses, as will computer training.

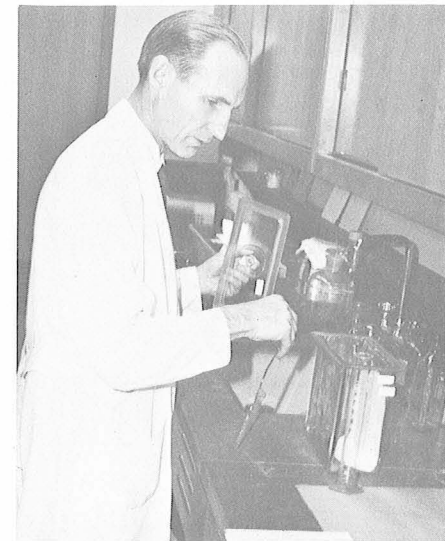
Ray Shapero, president of Cunningham Drug Stores, Incorporated, spoke of "The Chain Drugstore—Past, Present, and Future." Chain stores started around the turn of the century and have grown into the type of store we know today. Chains are characterized by having four or more outlets and being centrally owned. They exist to fulfill the needs and desires of people for economy and value. Chains can offer this service through increased volume. The success of chains can be evidenced by the number



of food chains buying chain drug stores. Their many convenient locations enable the chain to get a great deal of third party payment prescriptions. When Dr. Goddard "disapproved of drug stores," he meant the small independents who cannot offer the services that chain stores have available.

By 1972, chain drug stores will have more than half of the total prescription business. In the future, chain stores will be larger to supply the increased need for pharmaceutical services. Chains will provide on the job management training and will work more closely with the colleges of pharmacy to assure continued growth of both the chains and the profession.

Max Eggleston, R.Ph., past president of APhA, talked about "The Future of Pharmacy" to close our the seminar. One of the most exciting new horizons in Pharmacy is the Group Practice concept. This allows a pharmacist to specialize in one area of patient care to better serve all his clients. These special areas would include consultation services, fitting of appliances and drug-interaction experts. The community pharmacist must educate the patient on all aspects of health care from poison prevention to the method of irrigating a colostomy. By becoming more patient oriented, the pharmacist will promote his profession, as well as having that inner self-satisfaction of directly serving his patients.



Dr. Harold Bailey, Professor of Pharmacognosy, has been working on the isolation of constituents from the medicinally important group of plants belonging to the Rutaceae. This family of plants is associated with flavonol glycosides such as Rutin. From one of the Rutaceae, Wafer Ash, Dr. Bailey and his graduate assistants have isolated three alkaloids. One of these has previously been described as occurring in *Ptelea*. The other two are being characterized to ascertain if they are new or have been previously reported. One of the alkaloids also occurs in the oil extracted from the root bark along with other constituents. This complex has

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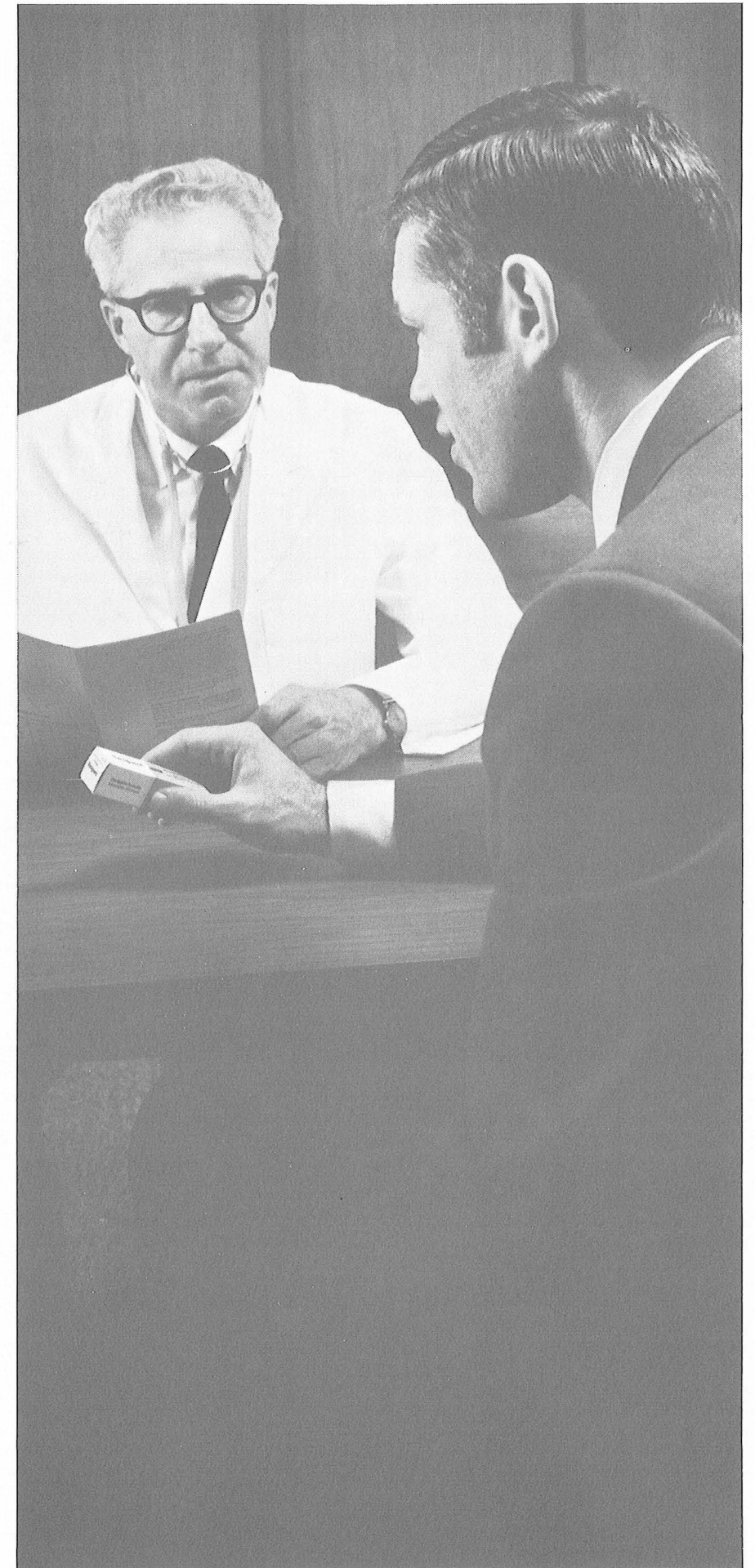
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# GREEKS' CORNER



## PHI DELTA CHI

In the midst of the scholastic grind, five years of study and part-time work leading to the ultimate goal, one stops and wonders if there isn't something more than evening homework and impossible exams. Somewhere, ages back, a group of men banded together under the spirit of fraternalism. They had a common goal—a desire to become educated, to learn all about their chosen profession. They discovered that, as a brotherhood, it would be to their advantage to maintain this spirited organization to advance their profession, and to aid them in reaching their goal.

All the brothers of Phi Dex aspired to maintain such a Fraternal spirit, to ease the drudgery of college, and to enhance the feeling of pride as each milestone is reached. It's the stick-together spirit, the organization, the fraternity house, the professionalism that creates the feeling of belonging in a university of over 30,000 people, categorized by numbers.

To reach this spirit, it is essential that each brother do his share. In response to this need, we at Phi Delta Chi have embarked on innumerable projects. There is the Phi Delta Chi Professional Education Program, a series of different and interesting open gatherings to bring in serious ideas concerning the Profession. Several have been presented and more are planned for the college in the future.

For our own benefit we have a continuous fraternity house improvement project. We belong to the surrounding block club in the neighborhood in which we reside. We see that there are always a number of parties and social events, and that there are interesting programs at our own meetings. We round out the education of the fraternity man. There are lectures and movies, all very enlightening. And, we are always interested in offering the services of our brothers in student organizations at the College of Pharmacy.

On top of all this, we have ties with fraternity brothers all over the nation. We participate in national and regional conventions. These are held at a different chapter of the Fraternity each year. We are in constant communication with the national office and are kept well informed of the doings across the nation. We are constantly encouraged to advance the name of the Fraternity and the Profession.

In the future we plan to continue our programs and initiate anything and everything possible to encourage new members, advance the Profession and help ourselves on the road to the diploma.

During the 1968-69 academic year, the brothers of Phi Delta Chi had numerous social activities. Among the more prominent have been some of our informal professional gatherings. We were given a very informative talk by a representative of a "one of a kind" insurance company. The concern is known as Investors Diversified Services. Among the outstanding of our entertaining activities was a tour through Stroh's Brewery, followed by a poker night with our alumni.

Some of the brothers have been engaged in a weekly basketball evening. Our members are planning to attend the National Fraternity Convention at Indianapolis. This will be highlighted by a golf tournament at a local golf club reserved for us on this day.

We collected toys at Christmas time for some deserving

children's home. These were presented to the little ones on Christmas to make their season merry.

Due to the fact that a large number of our members are married, we have attended numerous weddings in the past and will be at a few this summer.

## LAMBDA KAPPA SIGMA

The sorority is now a fraternity (for women, naturally). This change, resulting from legal considerations, seemed to be the most newsworthy accomplishment of the year for the fraternity as far as many male students and faculty are concerned.

But the school year of 1968-69 was newsworthy for other reasons. Fall rushing resulted in the initiation of three new members: Queen Marsh, Nancy Merrell, and Janice Ryba. Spring rushing was even more successful—at least eight new members were initiated as sister lambs.

The winter quarter featured a bake sale with proceeds of \$37 going to S.S. Hope. A bagel sale later in the quarter added dollars to the treasury. A tour of the Food and Drug Administration offices in Detroit, co-sponsored by the collegiate and alumnae chapters, highlighted the spring quarter break.

In addition to purely fraternal activities, Lambda Kappa Sigma was well represented in college wide activities. Student Advisory Board president, Alice Rice, and secretary, Perilyn Patton, kept this association running smoothly. Eva Witeczek had the monumental job of editing the Wayne Pharmic in addition to her role as corresponding secretary of LKS. We have seen the efforts of many of the sisters including Suzanne Schweitzer, Nancy Merrell, Cathy Kopacz, Elaine Marshall, Alice Rice, and Rosemary Bonnette in the Drug Abuse talks they helped to present.

Congratulations are in order to Rosemary Bonnette and Yvonne Jacoby on their forthcoming marriages, and to Marijia Petrauskas on her recent engagement.

In closing, the sisters of LKS would like to wish the best of everything to all of the graduating seniors, especially to their sisters: Rosemary Bonnette, Joan Ovid, Alice Rice, Suzanne Schweitzer, Barbara Wilczynski, and Eva Witeczek.

## RHO PI PHI

A rousing membership drive swelled our busy Order with new members: Howard Maley, Howard Efros and Marty Steinberg. The total dedication of the Order to help the profession of Pharmacy and our College is evidenced by the participation of the brothers in the Drug Abuse Program. Arnold Finkel, Gary Marx and Steve Zuckerman have greatly contributed their efforts to help the program continue its success. The Wayne Pharmic was aided in the advertising department with the shrewd managerial abilities possessed by Steve Zuckerman and Ed Malkin. The Student Advisory Board enjoyed the company of Arnold Finkel and Ed Malkin. Steve Janoff helped us to know and recognize administrative thoughts. In relation to quantity and quality, we feel that the Order has contributed a great deal to further the profession.

Congratulations are in order to the five graduating members: Arnold Finkel, Steve Janoff, Gary Marx, Ed Malkin, and Steve Zuckerman, all members of the APhA-MSPA student branch with an eye for the N.A.R.D.

## KAPPA PSI

Kappa Psi began the 1968-69 year with a complete remodeling program. After painting all the rooms in the house last summer, everyone got together for a house cleaning party which included tiling the entire first floor.

The new officers responsible for generating so much enthusiasm within the fraternity are: John Loughner (Regent), Bob Ritter (Vice-Regent), Joe Nemcock (Treasurer), Larry Borrusch (Secretary), Paul Krause (Historian), Woody Stoddard (Sergeant-at-Arms), and Rick Maurer (Chaplain).

Besides the officers, much support has been given by the following new members: Ken Osier, Rick Chivas, and Ken Yelonik.

Socially, the fraternity is doing quite well. Various bagel sales have been organized to raise money. Several parties were organized by social chairman, Woody Stoddard, who has also planned a fine pledge program. Kappa Psi was one of the few professional fraternities to enter Greek Week this year.

Besides social affairs, other activities have been sponsored. A movie presented by Parke Davis concerning enzyme debridement, was enjoyed by everyone. More projects of this nature will be planned in the future.

Athletically, Kappa Psi is still on top. The victories were ours at the annual baseball and football games against Phi Delta Chi. The score of the baseball game was 4-3 and the score of the football game was 13-6.

## RHO CHI SOCIETY

The Alpha Chi Chapter of the Rho Chi Honorary Pharmaceutical Society held an initiation luncheon on May 29, 1968. Those initiated into the society were Rosemary L. Bonnette, John S. Dryps, Michael P. Farmakis, William R. Hughes, Jr., Frederick J. Meyers, Franz Neubrecht, and Yuming Shen.

On April 29, 1969, Alpha Chi Chapter held its initiation banquet in conjunction with the presentation of the Annual Roland T. Lakey Honorary Lecture Award. The Award is presented annually to an individual who has distinguished himself in one of the areas of public health and is named in honor of a former dean of the WSU College of Pharmacy.

This year the Chapter selected Linwood F. Tice, Dean of the Philadelphia College of Pharmacy and Science, to receive the award. Following the acceptance of the award, Dean Tice delivered a lecture entitled, "Pharmacy Practice of the Future." The lecture was held in Room 100 Shapero Hall.

Preceding the lecture and award ceremony, the Chapter held an initiation banquet in the McGregor Memorial Conference Center. At that time the following individuals were initiated into the Rho Chi Society: Thomas A. Cornea, Dr. Horace H. Loh, Percy R. McClain, Nancy B. Merrell, Nualta Muangnoicharoen, Robert W. Newton, George M. Schalz, Prafulkuman T. Shah, Jerry G. Tkachuk, and Steven J. Zuckerman.

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## Clinical Pharmacy-- A Way of Life for Every Practicing Pharmacist

Dr. Henry C. Wormser

During the past two years, the terms clinical pharmacy and clinical pharmacist have become extremely fashionable in pharmaceutical circles. Much has been written, discussed, and debated and several meetings have been held on the subject of clinical pharmacy. Attempts have even been made to define the meaning of these terms. However, to the present there are as many concepts as there are experts on this particular subject. Many schools of pharmacy, including our own, have instituted required courses of Clinical Pharmacy into the undergraduate curriculum. Despite a concentrated effort to instill into the pharmacist a more patient oriented education, many pharmacists, pharmacy students and educators have developed serious misconceptions about the broad meaning of clinical pharmacy. To many of these people, clinical pharmacy has become synonymous with a new brand of hospital pharmacy. This certainly represents a narrow point of view.

According to Webster's Dictionary the term "clinical" means direct observation of the patient, and clinical pharmacy could therefore be defined as that type of pharmacy with a patient orientation, no matter where such practice takes place.

Teaching clinical pharmacy in a hospital helps in the formulation of a better pharmacist. It is the laboratory where the pharmacy student observes the action of drugs in the human body. The practical experience will reinforce and many times clarify the didactic material learned in the classroom. In many ways, it is the human counterpart of the pharmacology laboratory. Medicine has used the hospital as a teaching laboratory for years, yet most medicine is not practiced in hospitals.

Many community pharmacists do not understand how one can practice clinical pharmacy in a milieu other than the hospital, even though several of these same pharmacists have been doing just this for years. This, in a way, is true in all fields where some professionals use their expertise while others do not. One must admit, however, that until recently, the curricula of most schools of pharmacy have had a major emphasis on product orientation with little to no emphasis on patient orientation. As a result, the pharmacist never having acquired much medical lingo and a thorough understanding of disease states has been a somewhat isolated health professional. This is not to say that schools or individuals should abandon one type of education for another. A balance should be reached such that ultimately the practitioner becomes indeed the drug expert. His knowledge should be used as often as possible in giving pharmaceutical advice to both prescribers and patients. The pharmacist should volunteer many of these services to patients through wise counsel on non-prescription medications, through the use of patient-record systems and by offering clinico-pharmaceutical services to small hospitals and extended care facilities.

In an era when the American public is so conscious on matters concerning health, when third party payment for medical and pharmaceutical services is becoming the rule rather than the exception, when there is a very real need for drug-use and drug-misuse education, someone is going to be the drug expert of a complex health team. We have such an individual now. His name: John Doe, R.Ph.



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# WEEKLY PHARMACY REPORTS

"The Gripe Sheet"

## New Drug Discovered

Dr. Bailey this week announced the discovery of an alkaloid recently extracted from the well known plant *Atroxia nausea*.

Dr. Mulvey tested this extract and found that the drug inhibits the phosphoric-pugnane-S-amine cycle by acting upon the thrombin deactivating agent causing an increased permeability of the organelles to cytochrome K. This in turn liberates nor-epinephrine from the vessicles of Mobile Pool II and the Reserve Pool located in the supraoptic ganglia. This stimulates and increases mobility of DNA and RNA to change to HDNA and HRNA and therefore cause an increased ability of the appetite center to retain memory...in pregnant rats.

Dr. Dunker assayed the new drug, but we are unable to report the results because his laboratory notebook was not only illegible but also incomplete.

This breakthrough is being studied by Dr. Nagwekar. He suspects that the new drug may interact with mandelic acid in the urine to produce mandelic hallucinations of the kidney.

Dr. Fenn is now trying to emulsify the new drug which is water insoluble. A delay is resulting because of improper formulation. (Editors note: it's 4:2:1 oil-water-gum).

Professor Dauphinais and Mr. Konnor have cleared the legal pathways by Res Ipsa Loquitur, In Peri Delicto, Et Sequitur, and Status Asthmaticus.

Dr. Wormser plans on marketing dosage forms for oral, rectal, intravenous, intramuscular, subcutaneous, spinal, topical, ophthalmic, otic, and nasal application.

Dr. Barr has already filed the patent rights.

\* \* \*

## News Notes

Wayne State University announced a new program leading to a B.S. degree in pharmacy. The new program is an eighteen year course. Dr. Barr stated in an exclusive interview "The new curriculum will not only end the shortage of pharmacists, but will end pharmacy!" Dr. Barr also stated that he will become the dean of the Pharmacy Technician School at Barr Junior College. It is rumored that Dr. Bailey will replace him as dean, but Dr. Bailey was not available for comment.

Window washers of Wayne State University are in the process of suing Wally Blurble, the architect who designed Shapero Hall. The court date has been postponed until Blurble recovers from his recent operation for cycloplegia.

## FDA Report on Recalls

Name	Lot Number	Reason
U.S.P.	76543	Certification Revoked
Drug Assay	0341	Impurities Present
Parenteral Products Lab,	6054	Bacterial Contamination
Pharmacology Lab, Animals & Drugs	0523	Outdated
Shapero Hall	3-2-1-0	Improper Packaging
Pharmacognosy	0401-3	Decomposition Suspected
Green Sheet	00000	Off Color
Wayne Pharmic	1969	Outdated, Subpotent, Decomposed

\* \* \*

## Pharm-Quiz

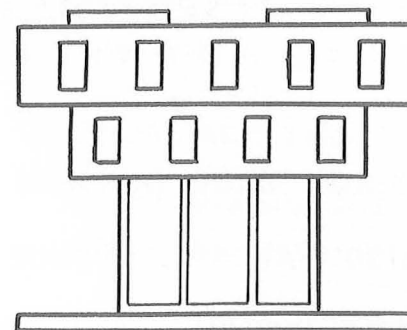
Match with the best possible answer:

- |                      |   |
|----------------------|---|
| Dr. Dunker ___       | 1. Ah   |
| Dr. Wormser ___      | 2. Every other, every other, every other seat |
| Dr. Bailey ___       | 3. Draw the structure of...                   |
| Dr. Fenn ___         | 4. It has not been fully elucidated.          |
| Dr. Barr ___         | 5. In pregnant rats.                          |
| Dr. Nagwekar ___     | 6. It grows on the other side of the hill.    |
| Dr. Abramson ___     | 7. I don't like your attitudes.               |
| Prof. Dauphinais ___ | 8. You know what I mean, don't you?           |
| Mr. Konnor ___       | 9. None of these.                             |
| Dr. Mulvey ___       | 10. All of these.                             |

\* \* \*

## Would You Believe?

- Dr. Dunker without a piece of chalk.
- Dr. Wormser speaking fluently and not phonetically.
- Professor Dauphinais arrested on a perjury charge.
- Dr. Bailey smoking banana peels.
- Dr. Fox sued by the F.D.A.
- Dr. Mulvey singing soprano.
- Delbert Konnor wearing white sox.
- Dean Barr allergic to Synalar.
- Dr. Dunker ripping pages out of a library book.
- Dr. Bailey awake during a report. (Can he really see through his eye lids?)
- Ken Sayes organizing this article.



The heights we attain depend on the foundations we build.

## From the Dean's Desk---

### The Future Role of Pharmacy

(Continued from Page 3)

to the clinical condition and needs of the patient. Now a concern is being expressed about the need for pharmacists to understand the nature of disease processes and the effect of drugs on these processes.

All schools of pharmacy now require a minimum of five years of college training before graduation with a B.S. degree in pharmacy. The University of Southern California and the University of California both require a minimum of six years before graduation, with each giving the professional degree of Doctor of Pharmacy (Pharm.D.). Other schools are considering extension of their programs to six years.

**The Changing Practice of Pharmacy.** There is, however, little agreement on the future role of the pharmacist—and on the education he must obtain to achieve new goals.

On the one hand, a former Commissioner of the Food and Drug Administration, and a physician himself, has voiced the view that the modern pharmacist is—or should be—"a vital bridge between the good physician and the renewed patient. He is a professional person for whom the ultimate goal is successful treatment of the human. He takes part in that treatment by knowing, through clinical training, and experience, the actions of drugs in the human."

Such a therapy advisor would be one who "knows how people react to drugs. He knows how people use—overuse, abuse, or misuse—drugs. And he knows how to advise them on the wise and effective use of drugs." (3)

Some hospitals, especially those in major medical center complexes, already use pharmacists as therapy advisors. They serve not only as drug dispensers, but also as sources of drug information for physicians, interns, residents, nurses and patients, often making ward rounds with the staff. In this role, pharmacists are beginning to utilize some of their previously unused skills, but at the same time they are demonstrating some of the deficiencies in their previous education, and their lack of clinical training. Pharmacy schools are responding to these deficiencies, even though they are responding late.

In one medical group on the West Coast, an experiment is underway to bring the therapy advisor, a person knowledgeable in pharmacology and chemistry, into an outpatient clinic setting. (4) In addition to providing the usual dispensing services, the clinic pharmacist will consult with the medical staff on drug therapy, review all patient medications in order to maximize therapeutic benefits and minimize undesirable side-effects, discuss the prescribed drug therapy with each patient, and be responsible for seeing all drug detail men, relieving the physician of this time-consuming function.

In the foregoing examples, recognition of a potential new role for the pharmacist is in part a tacit admission that many practicing physicians—faced with a deluge of drugs numbering in the thousands—are unable to keep up with technical developments in this field.

Such an attitude is obviously counter to the traditional view held by many physicians. An official of the American Medical Association has expressed the view that pharmacists:

"...can play a larger role on the health team by accepting responsibility as pharmacists... rather than by trying to place themselves in the role of therapeutic advisor to physicians.

...If a pharmacist is to be trained as an effective therapeutic advisor, a man for all seasons, his training would have to duplicate that of the physician." (5)

**The Future of Pharmacy.** These disparate views pose several interesting problems:

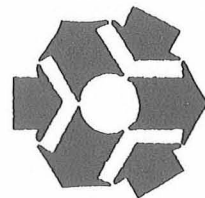
Will pharmacists, individually or through their professional associations, seek to develop a new role for all pharmacists which many of them—by virtue of educational deficiencies—are not now fitted to occupy?

Will pharmacy schools be willing and able to break with tradition and develop new curricula aimed at training graduates to accept these new responsibilities—to be full-time health professionals rather than retailers practicing a modest amount of pharmacy?

Will physicians, in general, decline to accept an appropriately trained pharmacist as a member of the health team to serve as a source of up-to-date drug information, while at the same time be willing to accept advice from a detail man whose opinions may be somewhat colored by commercial interests?

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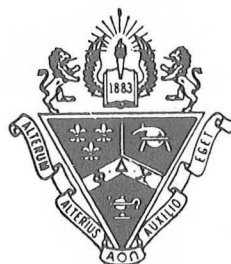
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