

PROMOTION OF REMEDIES TO PHARMACISTS IN THE USA

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Good afternoon!

Today I am going to talk about a topic that has received little attention from historians of pharmacy in the United States: How have remedies been promoted **to** pharmacists and how has that special type of promotion changed over time.

For the purposes of my talk, § *remedies* are defined as those medicines produced for the treatment of disease without a physician's prescriptions. Today we refer to these remedies as non-prescription or "over-the-counter" medicines (O-T-Cs). For most of the modern history of pharmacy in the USA, pharmacists and physicians called them "patent medicines," a term derived from their beginnings in Great Britain. Within the trade of pharmacy, they have also been called "proprietary products," that is, medicines made by companies and sold as commodities like breakfast foods or confections.

For the sake of clarity, I will use "remedies" wherever appropriate in my talk today. §

Many historians have dealt with the history of remedy advertising to the public. Our esteemed colleague William Helfand has done much excellent work in this area concentrating on the unique qualities of advertising art. Commonly packages for the remedies carried fantastic claims of cures. In the 1800s, hundreds of these panaceas were sold throughout North America. Some were powerful laxatives or emetics; others were inert mixtures of herbs in alcohol and water. As a class of products, they were the most heavily promoted in modern times.

However, to sell to the apothecary or drugstore owner, a different approach was taken. §

Before going into detail about the promotion of remedies to pharmacists, we need to take a step back and review the special nature of pharmacy in the USA. Beginning in the 1600s as an English colony, the various American states grew and evolved in the early 18th century. Apothecary shops were uncommon and only existed in the larger cities and towns along the Atlantic coast. § In these shops, pharmacy and medicine were often practiced together by the apothecary, who would both diagnose and prescribe for walk-in patients/customers. Trained via apprenticeship, the apothecary was mainly a shop keeper, making a living selling a variety of wares that came to be fairly uniform by the middle of the 1700s: simple herbs sold in bulk; oils and flavorings; combs and brushes; soap and face powders; books & stationery; and remedies (patent medicines). From surviving broadsides and business records, it appears that patent medicines were the most important item of commerce for early pharmacy in colonial America. (Prescriptions were very rare. Most physicians in the American colonies dispensed their own medicines.) §

The remedies that sold were so-called patent medicines from Britain. Here is the upper section of a broadside printed in 1761 for the apothecary Benedict Arnold, who later became the most notorious traitor in American history. As you can see from Arnold's broadside, he sold several of the classic popular remedies from the homeland, including British Oil, Daffy's Elixir, and Hooper's Pills. (Most of the items on this long broadside were books, which were commonly sold by apothecaries in the colonies.)

Generally speaking, these remedies fell into a few categories: cure-alls or panaceas; laxatives; analgesics (often external liniments); tonics; eye drops and ointments; and a wide variety of other remedies including foot powders, soothing syrups for infants; and so-called women's menstrual regulators. During the 1700s, many Americans could not read, so distinctive packaging was essential. Here is the well-known tapered bottle of Godfrey's Cordial. These remedies were promoted to the public via newspapers, posters, and almanacs. §

Some of the earliest medical publications in North America were pamphlets promoting remedies. Here is a pamphlet touting Bateman's Pectoral Drops, published in New York City in 1731. These were aimed at everyone including apothecaries. § Here is a broadside for Godfrey's Cordial from about the same time in German.

An important way remedies were promoted to apothecaries was through wholesale catalogs. § Wholesalers such as John Day of Philadelphia printed up lists of their products and sent them out to apothecaries, who filled in their orders and returned the catalogs. Most of the contents were crude drugs and chemicals, as one would expect. At the back of the catalog, however, § was a listing of the remedies available. Again, we see some of our old favorites, Anderson's Pills, Turlington's Balsam, and James's Fever Powders. §

We must remember that most remedies in the young United States before about 1830 or so were sold outside the apothecary shop. They were sold by grocers and postmasters and physicians and printers. The great Benjamin Franklin sold patent medicines in association with his printing business. And wholesale druggists, who provided medicines to all these retailers, often had their own small shops as well selling remedies like Thomas Dyott. §

The situation for remedies changed after 1820. Apothecary shops became more common in cities and towns. Physicians began writing out more prescriptions for pharmacists to compound. The stature of apothecaries rose. Pharmacy societies, schools, and journals appeared. One important development was the establishment of the traditional American "drugstore," probably growing as much from wholesale "drug store houses" like Dyott as from traditional apothecary shops. For the next 100 years or so this is where people bought more and more of their medicines including the old remedies. §

New American-made remedies appeared on the market after 1815 but the British patent medicines remained popular. Thus, salesmen began going from store to store with new American imitations of the old British remedies – same label and supposedly same ingredients. Moreover, American apothecaries began the practice of refilling the containers with their own versions of the British patent medicines. §

The first publication of the first American pharmacy society, the Philadelphia College of Pharmacy, was an 1824 pamphlet with recipes for the British patent medicines! Subsequent reports like this one of 1827 followed. § And for those who wished to make their own imitations, Thomas Dyott of Philadelphia produced an entire collection of empty containers for Godfrey's Cordial, Dalby's Carminative, Haarlem Oil, Turlington's Balsam, and so forth, all in the proper distinctive shapes. The shape of the bottle was crucial at a time when many people were illiterate. §

For the young American remedy companies, the publication of testimonials was an early way to promote their products to apothecaries. Remedy makers obtained letters of recommendation from prominent physicians, then published them in medical journals and newspapers. Off prints of these testimonials were distributed to drugstore owners. Remedy manufacturers in the 1830s began placing advertisements in popular almanacs sold across the nation. In the 1840s, makers such as David Jayne and James Ayer produced their own almanacs and a revolution in publishing began. §

In 1857, a new trade journal for pharmacy first appeared. It was titled the *American Druggist's Circular and Chemical Gazette* but usually called simply *The Druggist's Circular* among pharmacists. The first American journal of pharmacy, the *Journal of the Philadelphia College of*

Pharmacy, had appeared 30 years before. Later called the *American Journal of Pharmacy*, this periodical was scientific in nature. The Druggist's Circular was commercial and cheaply produced. It provided remedy makers with quick and direct access to drugstore proprietors across the USA. Other national trade periodicals followed, such as the *Pharmaceutical Era* and another appropriately called *New Remedies*, which eventually changed its name to *American Druggist*. §

These journals survived largely on two types of advertising. The first was "professional": These were adverts from wholesalers for pharmacopeial drugs and chemicals plus dispensing necessities. These ads were plain and direct. The second ads were purely commercial. And remedy ads fell into this second category. Some of the remedy advertisements to pharmacists were based on those aimed at the consuming public. § They touted the effectiveness of remedies. They might promise to bring in more customers to a drugstore if sold. In addition, a large number of advertisements, perhaps 10 to 20% promised pharmacists that the maker would heavily promote the product to the public via newspaper ads, placards, or billboards. §

Sometimes rival ads would appear on the very same page. Near the top of this page from the Druggists Circular of 1858 we can see an ad for "The Great English Remedy, Thorn's Compound Extract of Copaiba and Sarsaparilla ... for cure of sexual diseases...." Just down the page is a competing advertisement for that "Great Southern Remedy, Coxe's Extract of Copaiva, sarsaparilla, and Cubebs for the radical cure of Gonorrhoea..." In the words of the ad, this remedy, was "the rival of the so-called Great English Remedy" and "sold at prices which will insure ... a much better margin." §

And here is the key point: the advertisements to pharmacists emphasized profit over effectiveness. Pharmacists knew most of these remedies were quackery or were of dubious value or intent. So adverts to pharmacists often mentioned discounts

Most ads aimed at pharmacists, however, emphasized profit. Wholesale discounts were available when drugstore owners bought in large quantities. The great profitability of remedies was so high – usually near 100% -- that a new term entered the vernacular of American commerce: "Regular Drugstore Profit." § Sellers of Wilcox's Tansy Pills could expect a profit near 75%.

From the 1860s into the 1930s, remedy makers used a wide variety of promotions to attract pharmacists to their products. § These included free almanacs, trade cards, and placards for wall or window display. Trade cards like this one for Prickly Ash Bitters had an attractive image on one side while the other touted the products virtues. Note the blank area on the bottom of the reverse side. A store owner could simply use his store stamp § and turn it into an ad for his shop. (§ Rubber stamps were advertised in drug journals as well.)

§ The same technique was used by remedy makers with their almanacs. The front of the booklet carried an attractive illustration – often an Indian chief or maiden – and the reverse § showed their headquarters or factory – with the blank spot for the drugstore stamp. §

Placards sent by remedy makers to pharmacists often found their way to the front windows of shops. If they were very attractive, they sometimes were placed on the tops of display counters, the most coveted location.

Throughout this period, almost all items for sale were inside cases or on shelves behind counters. There was very limited "self-service." Beginning in the late 1800s, remedy manufacturers started to offer clever cardboard boxes to hold and display their products. (These may have been inspired by the colorful cigar boxes of the era.) These displays were heavily promoted to pharmacists in drug journal advertisements. Remedy manufacturers would offer discounts to pharmacists with the hope that the displays might find their way to the top of a counter where customers could buy them "on impulse." §

As you can see in this typical American drugstore, counter top space was very limited. § Some companies employed traveling salesmen, called “drummers,” to push their products. “Dr. Jack” of the Michigan Drug Company may have just delivered § this lovely counter jar for “West’s Liver Pills” to this pharmacy in Judson, Michigan.

§ Parke-Davis, Company, one of the most respected ethical pharmaceutical firms in American history, also promoted a few remedies very heavily. Their Medicated Throat Disks were among the most successful remedies in American pharmacy. This advertisement suggests that the pharmacist place counter displays throughout his shop. § The cigar counter seemed a logical place for the soothing product.

§ I must add, however, that not all American pharmacies at the time were heavily commercialized. Some, like that of John Dadd in Milwaukee, had no placards or counter displays at all.

§ During the period from 1880 to 1930, remedy makers also promoted their products to pharmacists through letters that promised serious promotion of their products to physicians or newspaper editors. They promised “thousands of letters to doctors” and so forth. While such letters sometimes were sent, it is not hard to imagine that the makers of dubious cure-alls were also deceptive with their promotion to pharmacists.

§ Another approach was to place advertisements in pharmacy journals pledging to send literature and samples to physicians. § Again, this was done with the hope that pharmacists would stock the remedies.

§ A particularly clever approach taken by some small remedy makers was to market so called “store brands” of popular remedies. In this illustration, we see a bottle labeled “Liebig’s Beef, Iron, and Wine Tonic,” a popular remedy for anemia and “weak blood.” § A company like Burnham’s made up the product and printed the name of each individual drugstore on a blank area of the label. Customers assumed that the pharmacist proprietor of the shop made up the tonic in his own laboratory. While this sort of in-shop manufacturing had been true back in the 1830s and 1840s when apothecaries commonly refilled patent medicine vials with their own remedies, by the 1890s, when store brands became common, in-shop manufacturing had disappeared from most American pharmacies. Store brand remedies began a steady decline after 1920 when national franchise companies such as Rexall started to flourish selling a complete line of remedies, cosmetics and health supplies.

§ During the 1930s, 40s, and 50s, American remedy producers promised pharmacists a considerable amount of radio advertising of their products. Several makers of remedies were primary sponsors of long-running radio programs such as *The Phil Harris Show* and *The Great Gildersleeve*.

§ During the same era, novelty promotions such as fans § or giant display bottles were commonplace. § Companies sent out so-called premiums – gifts to store owners who met sales quotas. § One of the oddest premiums – now popular collector items – were the ceramic mortar and pestle cups sent out to those selling Coricidin cough products in the 1970s. This ad touts the mugs and the possibility of a 54% profit without saying a single thing about the virtues or content of the actual product!

After the 1940s, large changes came to American community pharmacy. Self-service gradually came into the drugstore and so floor displays became prominent promotional devices for remedy makers. This ad for Tylenol from 1974 typifies how these large cardboard displays were used by manufacturers. McNeil Labs in the USA had made their brand of acetaminophen the #1 pain reliever by frightening customers away from aspirin. They also used aggressive marketing techniques with pharmacists including premiums § like this wall map; a large, pre-packaged floor display; and a promotional discount rate that promised increased profits. Yet, by the mid-1970s when this advertisement appeared, the promotion of remedies to pharmacists was disappearing. §

The promotion of remedies to pharmacists by manufacturers started a gradual decline after 1950. Several different factors influenced this trend. After the end of World War Two, chain pharmacies in the USA began their swift growth. Americans left inner cities to the new suburbs and chain drugstores like Walgreens followed. Remedy makers appealed directly to the corporate offices of the chains rather than through other old-style promotions. During the 1950s, the few state laws that restricted the sale of remedies to pharmacies were repealed. Any retail outlet – petrol stations, grocery stores, or department stores -- could sell remedies. There was less need to appeal to independent storeowners. § Most importantly, all pharmacies witnessed a rapid increase in the number of prescriptions being presented by patients. More and more income of pharmacies came from prescription medicines and sales of over-the-counter medicines in pharmacies declined quickly.

Products promoted to American pharmacists during the 1960s and 1970s emphasized profit. § Independent store owners were struggling against the chain store operations and were looking for solid profits. § This advertisement for Calmitol anti-itch remedy appeared in the same issue as this one for the prescription medicine § Hybephen-A. Note how the second one is more professional in its content and imagery.

§ A shift occurs after 1980, as the different kinds of remedies promoted to US pharmacists shrinks to a few categories. Long gone were the cure-all tonics of the past. Federal regulations made them disappear. Customers buy most of their OTCs from grocers or the Big Box retailers such as Wal-Mart. Patients rather than customers came to pharmacies for those remedies that required expert advice like RID § Ads to pharmacists return to touting the quality of their remedies and the advantages of their products. § §

The remaining remedies promoted to community pharmacists in recent years fall into a few classes: cold preparations, analgesics, eye drops, vitamins, and anti-infectives. If you flip through American pharmacy journals today, the most common remedies advertised to pharmacists are for lice! There is, of course, the added impact of the Internet § and even a product as venerable as SSS tonic can be purchased from Amazon!

Conclusion

In summary, before 1850 there was little specific promotion to pharmacists in the USA by remedy makers. Drugstores stocked what the people wanted. But as drugstores became the prime outlet for remedies after the US Civil War, manufacturers promoted their products heavily to pharmacists, using all sorts of approaches. After the Second World War, remedy sales shift away from corner independent drugstores to the large chains, grocers, and big-box merchandisers. Promotion to pharmacists declines as well with a strong emphasis on profit. As community pharmacists become recognized for their expertise as OTC consultants, promotions to them shift away from profit margin to the virtues of the remedies themselves. Yet, few remedies remain identified with the small drugstores. Remedy promotion to the pharmacist has almost disappeared and with it the trade journals of American pharmacy may disappear as well. §

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