## PROFESSIONAL INTRUSION AND CONFLICTS IN THE PHARMACEUTICAL ASSOCIATION OF SEVILLE (1892-1931).

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The Health Act 1855 and Pharmacy Ordinance of 1860 granted pharmacies the monopoly for dispensing drugs. These manufactured drugs were imposed a special tax in the 19<sup>th</sup> century. The first attempt occurred in Britain with the establishment of the 5-shilling timbre or the patent timbre. Apart from fiscal measurements, other types of government intervention would gradually be incorporated in the form of health checking controls by government authorities. Austria was a pioneer in this area and part of its legal precepts of the late 19<sup>th</sup> century underlay the Spanish regulations of 1919 and 1924.

In Spain, the first rule concerning these issues was the Stamp Act of 1892, in which the 2nd base, 7th rule provided that: "all the specifics and mineral waters of any class shall bear, when put on sale, a stamp 0.10 pesetas per bottle, can or bottle". Even then, opposition rose to these semi-manufactured drugs due to their illegality.

This ongoing regulation was the Decree of June 12, 1894 that allowed the sale of medicinal mineral waters as well as the specifics – one type of drugs that had not been covered by the Ordinance of 1860 - in legally established deposits. The Stamp Act legalized the specificsand the regulation did not, at first, imply a legal attack towards the pharmacists. On the contrary, it came to legalise a factual situation relative to the sale of these new medicines in drugstores. The key argument for pharmacists lay in holding that the Article 2 of Decree of 1894 contradicted Article 81 of the Health Act 1855, which was higher-ranked from a legal point of view. Therefore, the specifics should, in order to ensure their quality and correct usage, be dispensed only at pharmacies where the pharmacist could attest their correct administration. The Supreme Court gave the ruling in favour of the druggists. Having lost the legal battle, pharmacists concentrated on demanding scientific and sanitary guarantees in the elaboration of these specifics.

The Office of Inspector General for Health introduced a draft regulation which lasted nearly four years and which would end up being the first Spanish regulation for the manufacturing and selling of pharmaceutical specialties in March 1919. Article 21 of this norm endorsed what had been established in 1894, stating that these specifics could be sold in drugstores "for not containingvery active substances". The regulation of 1924 clearly emphasises this permissiveness "for not needing a prescription". The Regulation of Pharmaceutical Specialties of 1919 consisted of 23 articles. The Office of Inspector General for Health was established as the competitive authority in the matter. From this moment on, the central key in the legal battle became the fact of these specialties containing a more or less active substance. Active components included those considered capable of producing drastic activity, such as antipyretic, emetic, emmenagogue, vesicant, etc. Only pharmacists could elaborate pharmaceutical specialties, whether in a pharmacy or in a laboratory. However, the regulation was unclear as to who could sell such a product.

The regulation of 1919 was repealed by the Regulation for the manufacture and sale of pharmaceutical specialties of 1924, approved on February 9<sup>th</sup> and published in the *Gaceta* on November 13<sup>th</sup>. In essence, it was almost identical to the 1919 one, but adding some clarifications: any citizen could own a laboratory, prescriptions would only be sold at pharmacies,OTC drugs could be sold in pharmacies, drugstores and other specialized stores, and pricing was pre-established for every specialty. This last aspect of the new regulation was specifically proposed by the pharmacists. However, they were not granted the exclusivity in the selling and distribution of pharmaceutical products, as they had aimed to. Pharmacists also feared that a new definition of the term "active substance" would reduce the number of prescribed drugs.

In this period, we witness a spring-up in the pharmaceutical industry due to the number of manufactured drugs and the increasing percentage of prescriptions being dispensed. Nevertheless, 19<sup>th</sup> century Spanish pharmacists were reluctant to this industrialization, of which druggists made a profit of. Spanish industry was not as strong as the German of the French ones, but soon realized how important it was to introduce the manufacturing chain and the new chemical synthesis. To compete with druggists, Spanish pharmacists understood the necessity to master the new techniques as well as to create professional associations that would facilitate distribution. In fact, many of these distributional centres were created at the beginning of the 20<sup>th</sup>century. Also, pharmacists successfully

introduced the first Pharmaceutical Associations and the UFN. Sevilla's Pharmaceutical Association was especially vindictive in advocating the health role of pharmacists as evidenced by the contents of different minutes of the meetings celebrated in those years. At the general board meeting of January 31<sup>st</sup>, 1920 (1), with Manuel Fontan as president, we can read the following:

"Mr. Gallego realizes actions of former president, Mr. Arrans. He reads two letters sent by Mr. Lisenas Lazarus, local deputy of the District of Ecija, accounting for transgressions committed by a druggist of Ecija and a pharmacist in Fuentes de Andalucia, who operates without a manager. The board also learns of a letter sent by the pharmacist of Pruna, Mr. Gil de Montes, which accounts for the maneouvering made by physicians and the cacique of that village to coerce the public to purchase in another pharmacy. It was agreed to refer the complaint to the local deputy Pharmacy in Moron.

The president informs of the blatant intrusiveness that certain grocers practice in Seville and exposes the need for a vigorous campaign to end such abuses. Mr. Lazarus and Mr. Gallegopraise Mr. Fontan".

In the 19<sup>th</sup> century, safeguard medicines were the common ones. The new drugs, specifics and pharmaceutical specialties, came from secret formulae and the State did not control them exhaustively. This flexibility generated some uneasiness that became more serious due to the government's inability to regulate health criteria. The measures were contradictory and ineffective. The situation only became normalized when the pharmacists realised the importance of the industrialisation of the medicine, the scientific research and the creation of an efficient system of distribution.

The Regulations of 1924 would be in force until 1963 but not in its entirety. In the second half of the 1920's we can still witness a struggle between grocers and pharmacists for their interests. Pharmacists sought to repeal section 13 of the Regulations of 1924. Due to their complaints, and by Royal Order, a committee was created to study the issue. In late 1930 this committee published their resolution that was accepted by all parts but the druggists. Soon thereafter, and by Royal Decree of 6 January 1931, Article 13 was repealed and druggists were forbidden to sell pharmaceutical specialties. Nevertheless, they were given a period of six months to get rid of the stocks. For forty years, druggists and pharmacists battled over the right to sell pharmaceutical specialties. This is a "war" that is not ended yet, as we witness the spring-up of savvy Internet distributors and fraudsters.

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