

From the Office of:  
SENATOR HUBERT H. HUMPHREY  
1313 New Senate Office Building  
Washington, D.C.  
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FOR RELEASE: MONDAY P.M.'s  
June 8, 1964

SENATOR HUMPHREY URGES PHARMACEUTICAL PROFESSION  
TO HELP FIGHT DISEASE IN NATION'S POVERTY AREAS

Senate Majority Whip Hubert H. Humphrey (D-Minn.) said today that the pharmaceutical profession should lead in fighting disease that helps perpetuate the Nation's pockets of poverty.

"Sound, efficacious drugs can provide part of the answer to the unfortunate self-perpetuating cycle of human misery," he said.

"The right drugs can break the endless cycle of disease and incapacity which cause still more destitution."

Humphrey, a registered pharmacist, spoke at a graduation ceremony at the Philadelphia College of Pharmacy and Science in which he was awarded an honorary Doctor of Science degree.

He said Appalachia is one vast battlefield in the war against poverty that President Johnson has urged the Nation to wage.

"And I urge the pharmacists of America to make of Appalachia a testing ground for a massive program of professional assistance...let us take the initiative to help inventory Appalachia's pharmaceutical resources....," he said.

"Let our profession then blaze the way in demonstrating to all other professions --law, engineering and medicine -- what enlightened, compassionate skills can achieve for our brothers."

Humphrey recommended that the profession offer to send a "pharmaceutical corps" from more prosperous parts of the country into poverty areas.

"But this should be done not just to assist the Appalachian pharmacist within the four walls of his business but outside in the broad community itself," he said.

"The pharmacist has a frontier of additional service in the community as a whole. He is a leader in health. Families respect him. Civic organizations know him as a pillar of his community."

The pharmaceutical sciences have been generous to the needy, Humphrey said, but will have to do even more in helping the Nation combat poverty.

(OVER)

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SENATOR HUBERT H. HARRIS  
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"We must help devise sound means by which those who are ill today-- particularly the elderly--have access regardless of financial circumstances to the finest medications that the medical and pharmaceutical sciences can make available," he said.

"The needy who are ill today should not be made to suffer all the more by the bitter knowledge that while science has devised the right product, a personal lack of means denies them the product.

"The pharmacist, therefore, should be a leader in the effort for adequate health care for all."

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(OVER)

Dr Osoh - Faculty Graduate  
~~Chr Humphrey~~ family & friends

SPEECH SCRIPT

Rev Clergy

PHILADELPHIA COLLEGE OF PHARMACY and Science

SENATOR HUMPHREY URGES "MASSIVE PROGRAM" FOR DRUG ASSISTANCE

IN U.S. WAR AGAINST POVERTY

Pres Johnson  
Rev

We live in an Age that has been characterized by many titles. It has been called "The Atomic Age," the Electronic Age," the "Computer Age," the "Age of Rocketry."

Each of these titles symbolizes a giant step in science and technology. One title denotes man's harnessing of the force of fission, another his communication via satellites in outer space and by phenomenal equipment here on earth; still another, his giant "memory banks;" still another, his venture to the stars.

~~Mr Zaborak~~  
Honor Students  
Excellence

There is a common characteristic to all these names: they revolve around things rather than goals, around gadgetry (however important) rather than the basic purposes which the gadgets should serve.

But, in the final analysis, the remaining third of the 20th Century will realize its fullest promise only if we direct our energies toward goals, ~~are goal- not gadget-directed.~~

Man has many goals - peace, security, freedom, growth, fulfillment, happiness. Each of these goals depends upon the one most universal of all needs, the need for life itself, the goal of health.

You in this audience have dedicated your lives toward enabling others to achieve this great goal, of health

Problems old.  
what is new is we have  
resources to do something  
about these Problems

*Quaker Pharmacist*

- 3 -

Pharmacy is, of course, more than just "another profession."

Pharmacy is the dispensation of the medications of life  
against death; for the victory of comfort over pain, of  
activity over disability, of hope over despair.

And so, it would be my hope that Pharmacy, <sup>+ related Science</sup> will  
realize its noblest hour by helping to make our time, our  
period in history worthy of the title, "The Healing Age."

~~Let it be the Age in which man, for the first time  
in history, helped heal - "make whole" the bodies, the minds,  
the lives - of as much of the population as can possibly be  
served.~~

Let the pharmacist join creatively for this goal with  
all other members of the health team, the physician, the  
nurse, the dentist, the health technicians, *the chemist,*  
*the biologist*

The common goal can be realized, particularly if Pharmacy realizes its fullest promise in all 3 of its traditional areas -- care, research and education.

~~- Care for those who are ill now - by dispensing the best possible drugs for diagnosis, for treatment and for restoration.~~

~~- Research toward ever better means of serving today's patients.~~

~~- Education to transmit the wisdom of yesterday and today for use by today's and tomorrow's professional generation.~~

We dare not falter in our progress toward any of these areas.

The pharmaceutical sciences have won well-deserved acclaim for their progress in all 3 areas - in dispensing to the patient with precision and integrity, in research on new solutions for old and new problems, in education - <sup>and</sup> improving <sup>a</sup> adapting curricula and methods.

But the scope, the depth and the pace of change must be accelerated if we are to do fullest justice to the new requirements of our calling.

In patient service, in particular, the pharmaceutical sciences have been understanding and generous to the needy. . But still more must be done by ourselves and others.

We must help devise ~~sound~~ means by which those who are ill today - particularly the elderly, regardless of financial circumstances, have access to the finest medications that the medical and pharmaceutical sciences can make available.

The needy who are ill today should not be made to suffer all the more by the bitter knowledge that while science has devised the right product, a personal lack of means denies them the product.

The pharmacist should, therefore, be a leader in the effort for adequate health care for all.

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Patient "care" is not truly "care," unless those who receive it can do so with dignity, without having to beg or be treated as a "charity case."

No solution of <sup>medical</sup> drug economics is sound which is built upon either unfair treatment of the manufacturer, or the doctor, or the pharmacist, or the patient.

I urge the pharmaceutical profession - my profession - to take the lead in one particular program.

The President of the United States has summoned his countrymen to a War Against Poverty. It is a good "war," a necessary "war," the only type of "war" we Americans enjoy fighting.

Like the war against disease, it hurts no one, it ennobles the warrior and those for whom he battles.

Appalachia is one vast "battlefield" of this war. And I urge the pharmacists of America to make of Appalachia a Testing Ground for a massive program of professional

assistance. Let us take the initiative to help inventory Appalachia's pharmaceutical resources - its manpower, its services, and, most important, its pharmaceutical needs.

Let our profession then blaze the way in demonstrating to all other professions - law, engineering, medicine - what enlightened, compassionate skills can achieve ~~for our brothers.~~

*and the other members of the Healing team*

*+medical*

*+medical*

*s*

And let us proceed to do likewise in every pocket of poverty throughout this land. "Drugs for Appalachia" - Drugs Against the Ravages of Poverty elsewhere - this must be our theme.

Sickness makes people poor. Poverty makes people  
sick.

Sound, efficacious drugs can provide part of the answer to the unfortunate self-perpetuating cycle of human misery.

The right drugs can break the endless cycle of disease and incapacity, causing still more destitution.

Drugs can help win this worthy war against <sup>War Against Poverty</sup> ~~poverty~~.

One fact about the poor is that they - least of all - can afford to spend what little money they have on the wrong drug. This means that doctor's prescriptions for them must be based on the <sup>best</sup> ~~highest~~ medical standards of all.

An additional fact about the poor is it is they who tend to rely most heavily on self-diagnosis - on auto-therapy, as it is called. Our Nation enjoys many wonderful over-the-counter medications. But surveys have shown, that the poor often "doctor" themselves with over-the-counter medications which may prove costly, not only from a financial standpoint (because the product is not really effective), but from the medical standpoint, because the product may delay sounder treatment. Use of the product may, for example, mask some serious condition which underlies a "mild" symptom.

The poor, too, tend to share formerly-used medications within the family and among friends. One man tells another how he cured "the misery," and the word and the product are passed down and applied by others even though what is called "misery" by one man may have no relationship to a second man's illness.

The pharmacist can, therefore, provide invaluable guidance to those he serves - rich or poor as to proper use of medications.

Finally, as to Appalachia, itself, I would like to recommend that the pharmaceutical profession offer to send a "Pharmaceutical Corps" - teams or task forces of its members - from more prosperous areas into the stricken region.

But this should be done not just to assist the Appalachian pharmacist within the 4 walls of the latter's business - but outside - in the broad community, itself. The pharmacist has a frontier of additional service in the community as a whole. He is a leader in health. Families respect him; civic organizations know him as a pillar of his community. The pharmacist in Appalachia should be in the vanguard of the region's re-birth, and he should be assisted by his colleagues elsewhere.

*In the field of*  
~~Secondly, in~~

research, the pharmacist needs little reminder of his opportunity. No profession has been more beneficially revolutionized by laboratory discoveries than has medicine, as served by pharmacy. From tomorrow's test tubes and clinical experiments may come long-hoped-for answers to the terrible scourges of heart disease, of cancer, arthritis, muscular dystrophy, multiple sclerosis and, yes, the less terrible but costly common cold.

The pharmacist must apply the power of research to his own domain as well. He must experiment in his own enterprise - in his business or his hospital pharmacy - toward ever better service.

*but*

There is little to be gained from excessive nostalgia for the "good old days" and ~~ways of pharmacy~~. We rightly prize the many traditions of our profession. But to cling to certain old ways merely because they are old cannot be justified if - I emphasize - if - old practices may not best fulfill today's and tomorrow's needs.

For example, no one need be concerned that we do not personally compound by mortar and pestle more than the tiniest fraction of the prescriptions <sup>*drugs*</sup> we now dispense.

What matters is whether by this or any other recent change the patient gets - as he does - better, faster, more economical service.

Research, ~~too~~, must provide answers by which our professional skills, far from rusting or functioning at the lowest level, are used at the highest levels of proficiency.

And education, most of all, must adapt to the beneficial "winds of change," as well.

We know that leaders in medical science are currently considering what has been called a "50-State University Without Walls." Linked by closed-circuit television, it would be a nationwide system. It would be devised and conducted by professional organizations - nationally and in each community. <sup>These organizations</sup> ~~They~~ would provide to the physician in his community hospital, in his private practice the latest and the best <sup>information</sup> ~~knowledge~~ which he needs to practice the finest type of medicine. ~~whether it be general practice or a~~ specialty.

*the B.ole just*  
*the chemistry*

The pharmacist, ~~too~~, needs to be ~~a~~ member of a nationwide "University Without Walls." His professional learning must never cease. Pharmacy today is so different from what it was, as taught in under-graduate education only ~~10~~ years ago, that we must never cease to be "students."

No matter how senior ~~we are~~, how much experience ~~we~~ <sup>you</sup> may have gained in years of practice of our profession, we must never be far - intellectually and emotionally - from the seat of further learning, the College of Pharmacy and its extension courses.

I want to commend your own great Institution. Your open-circuit telecasts have been a pioneer in this field of providing "brush-up <sup>refresher</sup> courses" on the pharmacology of certain classes of drugs. I ~~hope~~ <sup>suggest</sup> that you ~~will~~ apply for a Federal grant which would enable your program to become a national "pilot" model.

Like the physician, the pharmacist currently faces an "explosion" of information. He still uses his traditional and invaluable compendia, journals and other standard guides. Yet, he finds it increasingly difficult to keep up with the fantastic growth of knowledge. 200,000 original articles a year appear in the world's total of pharmaceutical literature. While major portions of that total are of interest only to this or that pharmaceutical specialty (to basic researchers or industrial chemists or others), still, a huge sub-total piles up annually on the previous mass of accumulated knowledge, in which the average pharmacist may be interested.

This information must be placed more effectively at his finger-tip control.

The day should not be distant, therefore, when the pharmacist - through his own telephone - is enabled to dial into 24-hour-a-day long-distance, nationwide computer service so as to secure specific information which he may need.

Such service would be part of a ~~voluntary~~ National Clearinghouse of Drug Information. It would be geared to provide all health professionals with what they need to know, when they need to know it, in the way they want to know it, as fast as they must know it.

The Pharmacist learns in his under-graduate days that he need not and must not attempt to store in his mind "all" the information which he might require.

What he does need is familiarity with the nature and location of organized bodies of knowledge. Tomorrow, the computer will serve him, as once the traditional encyclopedia on his shelf served him.

Above all, the pharmacist's goals must be professional goals.

Someone has said that America's railroads got into difficulties when they developed the notion that they were in the "railroad" business, not the "transportation" business.

Our "business" is helping to heal. It is more than a profit business; it is a calling, it is an honor, it is a privilege. We are licensed to serve. We achieve our fullest potential when we serve.

There is an old Arab proverb which reads, "He who has health has hope, and he who has hope has everything."

Let us <sup>help</sup> assure for our countrymen - all our countrymen  
^  
- the fullest hope which comes from abundant health.

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