TRAILING COAT-TAILS

KLIP-IN-DIE-BOS

Selling Medicine

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The growing cost of being ill has inevitably focused attention on the role of the chemist. Our senior citizens, particularly, have grown up in the era of the family chemist—the learned, sympathetic and respected oracle, the source of comfort when things go wrong. Indeed, our elderly folk are finding it difficult to adjust from dealing with the chemist of yester-year to the supermarket pharmacist of the seventies.

Somehow the unquestioning faith and human warmth that characterised the relationship between chemist and patron is being lost, as a growing proportion of the public hardly ever see the chemist. The respectful friend of yore has become the customer of today—his needs often attended to by mini-skirted glamour girls.

This is a sometimes bewildering adjustment for the ordinary mortal. Perhaps this confusion is increased by the display windows of many chemists which often render them indistinguishable from supermarkets. A snap survey in Johannesburg showed that medicines and toilet preparations were yielding space to toys and novelties. One proudly displayed xylophones, mouth organs, footballs and Monopoly sets. The ice-buckets, whisky decanters and copper candlesticks were, of course, to be expected.

Another chemist had an impressive array of woollen jerseys, socks, dresses, pillow cases and bedside lamps.

The third chemist visited had six display windows. Only one contained anything remotely related to his profession—toilet preparations. One of the products in this category was a hair 'grower' with a four-way action, viz. it promotes growth, 'combats' hair falling out, keeps scalp clean and is an excellent hair dressing!

One of the centre pieces of his display was a cigarette dispenser which would allow a proud purchaser to pluck a cigarette from a donkey's behind. All this for R1,75. One wonders whether the chemist concerned has paused to think what im-

pression is created in the mind of the objective passer-by. Incidentally he also displays a 'fortified' cream containing 'dermalite', whatever that might be.

The fourth chemist had an interesting display of toy tommy-guns, vases and, believe it or not, a make-up and disguise outfit for R4.

It is to such stores that the consumer is told to go for professional advice about his ailments. The man who has passed through a 4-year-long, intensive and exacting training period to qualify as a pharmacist then leaves the novelty counter and disappears to the dispensary to add sterile water to a bottle containing a prepacked powder in order to supply a patient with an antibiotic in response to a prescription.

With strange rumours in circulation about chemists being able to buy certain products at 16 to the dozen or on the 'buy-one-get-one-free' basis, there are growing doubts about the objectivity of the professional advice the customer can expect. Are suspicions that high-profit lines are being pushed instead of similar products at lower prices, entirely without foundation? One need only think of the expensive laxatives and products which purport to 'feed' the nerves, to start wondering.

There is growing disenchantment because of high prices being charged by some chemists for lines such as deodorants and tissues. It is true that the chemist offers a delivery service and credit. But why should the cash-and-carry customer be charged prices which have been inflated to cover the cost of such services?

Some chemists stock a variety of nostrums which they must surely know to be quack remedies and therefore are repugnant to their scientific training. Yet one whom I questioned on the matter shrugged his shoulders and said 'It's rubbish, but people buy it so I stock it'.

The files of the Consumer Council abound with complaints against many products sold or manu-

factured by chemists. These include memory tablets (R1,99); druppels vir dronkaards (price reduced from R4,85 to R2); a membrane reorganiser (previously R13,75, now R6,90), and for R4,99 an application to make the personality flower and guaranteed to promote friendships.

Other products include a 'blood' tonic which will destroy injurious germs in impure blood, tonic pills which 'change your urine to a healthy bluegreen colour', and yet another product which can 'turn you into the sportsman of the year'.

These are some of the reasons why so many members of the public would find it difficult to support the view that supermarkets should be unnecessarily restricted in selling non-prescription medicines. In fact, there is a noticeable tendency for consumers to ask for restrictions to be relaxed in the interests of free competition and lower prices.

A recent issue of a newsletter by the Pretoria Branch of the SA Retail Chemists and Druggists Association, in which chemists were urged not to cut prices of chemist-only lines, has badly shaken public confidence. Even worse has been the view expressed in the circular that cut prices mean 'money left over in a chemist-only customer's pocket'. No doubt the Price Controller read the document with absorbing interest. The public, however, is aghast. Understandably, they like to have money left over in their pockets.

Some may recall the words of the Minister of Health, Dr Schalk van der Merwe, during the first meeting of the Pharmaceutical Commission on 5 February 1974, when he said 'You should endeavour to always improve your image . . . and the critical eye of the public could be used as criterion. Responsible leaders in the pharmaceutical industry should seek greater contact with consumers. Given the necessary mutual goodwill the present difficulties could be solved to the satisfaction and in the financial interests of both parties.'