German Chemicals and Synthetic Drugs: A British Opportunity.

In a recent Government report it is stated that in 1912 the exports from Germany of drugs and medicinal preparations amounted to no less than £2,224,150, of which £22,400 went to British India alone.

It is, however, gratifying to note that in the Colonies our position is not seriously challenged, though the last few weeks have been making it clear how dependent the British Empire has been upon Germany for a large number of important drugs and chemical substances in everyday use.

How are we as dentists affected? A large number of our stopping materials have hitherto been manufactured in Germany, and there is some reason for thinking that many sold under English names have nevertheless also been made in that country.

Lysol, one of the most commonly used of antiseptics, has been manufactured by Schülke and Mayr, of Hamburg, though procurable through a depot in London.

Of six bottles of lysol procured in September last, from six well-known drug stores, the printing on the outside wrapper was entirely in German.

Veronal, sulphonol, trional, aspirin, stypticin, novocain, and salvarsan, all are German products now difficult to obtain under those names.

What are the British manufacturers going to do? Are they going to rise to the occasion?

Happily one at least of our most enterprising firms of manufacturing chemists has applied to the Controller-General of Patents in respect to the manufacture of organic arsenical compounds, including salvarsan; other firms have made application in regard to pebcol, formamint, aspirin, sanatogen and so forth.
It is, moreover, to be hoped that the object of British endeavours to obtain German trade will secure for us a permanent and not merely a temporary "war time" result.

What can we as dentists do? Surely the least would be to make certain that our stopping materials and drugs are procured from British, or at any rate neutral sources.

Many of the hitherto purely German synthetic productions are now being made and procurable in England, and it is for us to encourage the purchase of these rather than their Teutonic competitors.

We hope in a future issue to give a list of synthetic and other drugs formerly procurable only from Germany but henceforth manufactured in England.

Our dependence upon Germany for such products as these has long been a reproach, and a menace to the convenience and health of the community now, we hope, about to be removed.

**News and Comments.**

Trustworthy data from sufficiently large tabulated results of observations of the relative frequency of dental and other disability for employment in the public service must be of the utmost importance.

Statistics of Dental Defects.

The 31,000 consecutive medical examinations recorded by Sir John Collie, as officer of the London County Council, mostly as to physical fitness for municipal employment, made during the past nine years, should be typical—with very close approximation—to a general physical census of the entire nation.

With the explanation that for many vocations, such as tram and other vehicle drivers, signalmen, firemen, &c., perfect vision is of prime importance, the startling prominence of impaired eyesight in the first item of the table on next page will be understood.

But very few of the best informed of us would expect to have seen dental caries taking the second place and ranking so high. What the precise standard required may be we do not know, but Sir John Collie remarks: "It seems incredible that such a large number of people are ready to forfeit their chance of employment rather than undergo the treatment necessary to put their mouths into a proper condition."