

The current Fish and Wildlife problem has become so large, expensive, and harmful to our community that it cannot be overlooked any longer. In 1995, ESA costs exceeded \$325 million of Federal money. However, the cost to local and State governments was billions and billions of dollars. Taxpayer funding has increased 800 percent since 1989. This is a call to common sense. Fish and Wildlife's district offices at the very least have the responsibility to balance the rights of species with the rights of landowners and taxpaying citizens of the United States. Local bureaucrats are undermining of Americans' desire to save truly endangered species by engaging in arbitrary and unreliable rulemaking. Our citizens and our endangered species deserve better. While we build a consensus in the Congress on how to update the Endangered Species Act, we should, at the very least, expect two things: (1) Fish and Wildlife must keep its commitments; and, (2) Fish and Wildlife should use its discretion, under the law, not as a weapon against landowners, but as a tool to help communities comply with the law.

COMMENDATION OF MARGARET GONTZ

**HON. GEORGE W. GEKAS**

OF PENNSYLVANIA

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, March 23, 1999*

Mr. GEKAS. Mr. Speaker, I would like to commend Ms. Margaret Gontz, who at the age of 72, gave up something that most people look forward to: her retirement. That was 10 years ago. Today, at 81, Ms. Gontz is one of the top employees in the Pennsylvania Higher Education Assistance Agency in Harrisburg. She came back for family: to help her grandson pay for college. And she came back for herself: she just wanted to be on the job. Ms. Gontz has been cited as an exemplary employee at PHEAA—where most of her co-workers are in their 20s and 30s. Now she is being honored as "Pennsylvania's Outstanding Older Worker," and is being recognized as part of Prime Time Awards, a national celebration of the contributions of older workers taking place this week in Washington. Ms. Gontz cites accuracy, timeliness and productivity as contributing to her success. "I rate myself as a normal person doing my job like I should do," she says. Ms. Gontz, you are not a "normal" person. You are very rare indeed.

THE URGENT NEED FOR A NATIONAL DRUG EXPERT

**HON. JOE BARTON**

OF TEXAS

IN THE HOUSE OF REPRESENTATIVES

*Tuesday, March 23, 1999*

Mr. BARTON of Texas. Mr. Speaker, I submit the following paper as a request for a constituent of mine from Burleson, Texas. His name is Kenneth Hunter and he collaborated with Prof. Rinaldo DeNuzzo on the following article which cites a need for a federal office with a national drug expert. This is not an endorsement either for or against their effort, but a submission of their idea.

THE URGENT NEED FOR A DRUG EXPERT

In recognition of the dynamic changes which continue to occur in the delivery of health care services in the United States and globally, it is suggested that the President and/or Congress re-establish the office of Apothecary-General which disappeared from the United States Army in the first quarter of the nineteenth century. This skilled health care professional of equal status, while working in tandem with the Surgeon-General, would provide advice and counsel to the office of the President, the Congress and others. This professional with offices in Washington, DC, will serve to coordinate and oversee all aspects of mandated and other programs involving drug use or abuse by the general public, military, veterans, and others.

Originally, the Office of Apothecary was created by action of the American Congress in 1775. The need for such an official became evident to Dr. John Morgan, the second of four Medical Directors of the American Revolutionary Army. Morgan recognized the need for coordination of the valuable skills provided by the apothecaries as well as those by the surgeons. The Congress also established a military hospital to care for the 20,000-man militia involved in the Revolutionary War. As with other medical care personnel, the apothecaries were directed to visit and tend to the needs of those who were sick or wounded.

Dr. Morgan, physician-apothecary, as director of the Department of Hospitals wrote to Dr. Jonathan Potts, deputy director, informing him that "a warrant to Mr. Andrew Craigie to act as an apothecary" had been issued. Potts was advised that the appointment of Craigie will be particularly useful due to his experience. "Without such a one, I know not how you could either procure sufficient medicines for your department or dispense them when got." Dr. Morgan was an influential advocate for the separation of medicine and pharmacy in America. He taught pharmacy and is credited with the introduction of prescription writing in America.

Morgan, additionally admonished Dr. Potts "to make it a part of the duty of mates to assist the apothecary in making up and dispensing medicine." He states, "The Apothecary to all intent is to be looked on in rank as well as pay in the light of the surgeon and respected accordingly and if he is capable, he should in return, do part of the surgeon's duty." During the period of 1775-1780, there were several Apothecary-Generals serving in three of the four Revolutionary War Districts. In 1780, a reorganization of the military medical department concentrated all authority in one medical staff, and Andrew Craigie became sole Apothecary-General. He served as such until the end of the War when a treaty with Britain was signed in 1783.

Many apothecaries played vital roles in the American Colonies' struggle for independence. Among them was American military hero Dr. Hugh Mercer, physician-apothecary, who operated a pharmacy in Fredericksburg from 1771 until the beginning of the Revolution. General Mercer suffered wounds and died on the battlefield in 1777. Following his death, the Congress approved a monument to be erected in Fredericksburg with the following inscription:

"Sacred to the memory of Hugh Mercer, Brigadier-General in the Army of the United States. He died on the 12th of January, 1777, of the wounds he received on the 3rd of the same month, near Princeton, NJ, bravely defending the liberties of America. The Congress of the United States, in testimony of his virtues and their gratitude, has caused this monument to be erected."

Dr. Mercer's historic apothecary shop is currently maintained by the Association for the Preservation of Virginian Antiquities in Fredericksburg, VA. It is open to the public.

Apothecary Christopher Marshall was commissioned by the Continental Congress in 1776, the year the Declaration of Independence was signed, to oversee service given to the needs of soldiers in Philadelphia hospitals. Two years later, the first Military Pharmacopea was issued in Philadelphia.

It is noted that the American Revolutionary War served to provide us with independence and a foundation upon which the practice of pharmacy in America is based. For example, we had shops where medicines for consumer use were used to provide necessary supplies for militia. The role of apothecary was defined by Dr. Morgan as "Making and dispensing medication." Dr. Craigie facilitated the establishment of laboratories and storehouses where medicines were prepared and implemented, and the army apothecary visited (counseled) the sick. From those humble beginnings, we have a pharmaceutical industry which is second to none in the world.

The last Apothecary-General, Colonel James Cutbush was also an author and a teacher. He was appointed in 1814 as assistant Apothecary-General of the United States Army and served admirably during the War of 1812. By an act of Congress in 1815, the Army was reduced to a minimum and many officers were retired. President Madison, the same year, directed that the Apothecary-General and two assistants be retained in the "Military Peace Establishment of the United States." The office of Physician and Surgeon General was abolished and the Apothecary-General became the ranking officer in the Medical Department until 1818, when the first Surgeon General was appointed. As a professor at West Point Military Academy, James Cutbush became a pioneer in the chemistry of explosives.

In support of the proposal to re-establish the office of Apothecary-General nationally, pharmacy practitioners with expertise in drug use and misuse (abuse) make daily contributions to the delivery of medical care. Pharmacists are the most readily available and approachable professionals, often working seven days a week and sometimes 24 hours a day. Frequently, they are the initial portal of entry into medical care by advising the appropriate non-prescription drug for non-serious ailments, championing healthy life styles, and making referrals to other or professionals for needed care when appropriate.

Pharmacists provide the greatest number of professional daily exposures to the population as more than two billion prescriptions are dispensed annually. They also provide a high level of pharmaceutical care by monitoring prescription and non-prescription drug use to insure that therapeutic objectives are achieved. Additionally, for the tenth successive year, the Gallop Poll found that the American consumer ranks the pharmacy practitioner as the most trusted professional in the land.

During the 1986-96 decade, alcoholism and drug addiction were key elements in the explosion in our national prison population. In a recent Columbia University study, the number of inmates in federal, local, and state prisons tripled from 500,000 to 1,700,000. Drugs and alcohol were involved in 80% of the incarcerations. The President's appointments of the last two drug Czars consisted of an educator and a military officer which led to a spirited attempt to solve our war on drugs with *limited positive results*. It is time to appoint a drug expert to solve the problems. Pharmacists' specialty lies in the