

TOBACCO: SOME HISTORY

WHEN CHRISTOPHER COLUMBUS landed in Cuba in November 1492, he saw local men and women smoking what he later found out was tobacco. Europeans quickly tried this previously unknown herb for recreational and medicinal purposes. Between 1537 and 1559, at least 14 books mentioning medicinal tobacco appeared in Europe, published in Dutch, English, French, Italian, Latin, Portuguese and Spanish. Sniffing powdered tobacco was recommended to cure ulcers, headaches and asthma. Tobacco was also believed to treat shortness of breath, kidney stones and stomach ache.

Smoking tobacco for pleasure was already popular by the 1600s. However, in 1604 King James I wrote a pamphlet criticising its use called 'A counterblaste to tobacco'. He wrote the smokers' internal organs were covered with soot, and were wasting their

money. In 1828, two scientists, Wilhelm Heinrich Posselt and Karl Ludwig Reimann, analysed the chemical in tobacco, nicotine, and discovered that it was a dangerous poison. In spite of growing concerns, the medical use of tobacco continued to decline, but its recreational use increased.

In Britain, it took until 1962 for the publication of a report explaining that smokers were exposing themselves to high risks of serious disease. A report in this year by the Royal College of Physicians led to a ban on advertising cigarettes on television from 1965. In fact, you could still buy cigarettes from pharmacies until 2001.

A complete ban on smoking in public places was introduced in England on 1st July 2007, after it had already happened in Scotland and Wales.

THE CONTROL OF HARMFUL SUBSTANCES

MEDICINES AVAILABLE BEFORE the 1800s varied from harmless flavoured waters to dangerous poisons. Yet until the mid-1800s there was no control of them: sellers did not have to see a prescription from a doctor, or ask questions about how a customer was going to use a poisonous substance, or keep records of any sale.

In the late 1840s public concern emerged about how easy it was to buy poisons.

Newspaper and government reports began to draw attention to the large number of deaths resulting from poisoning. More than a third resulted from the use of arsenic.

Many solutions to the problem were proposed, including a total ban on selling arsenic, and the reporting of every sale to the nearest police station.

A new law, the Arsenic Act, was passed in 1851. For the first time sales of poisons were restricted. Pharmacists had to record every sale, the buyer had to be known to the seller, and the arsenic had to be mixed with soot or indigo to colour it.

In the late 1850s a series of high profile poisoning cases resulted in calls for greater control over the sale of poisons. In May 1868, another law was passed so that only pharmacists could sell poisons to the public.

Even after further laws were passed to control the sale of medicines, opium and cocaine were available without a prescription until the Dangerous Drugs Act in 1920.

As new and powerful medicines were developed in the early 20th century, such as barbiturates and digitalis, a new level of control was introduced in 1933. Certain dangerous drugs could only be sold to the public if the customer had a prescription given by a doctor, dentist or vet. This represented a major increase in the medical profession's control of the supply of drugs to the general public.

However, it wasn't until the Medicines Act in 1941 that it became compulsory for medicines to show their ingredients on the label. Before this law, brand name medicines did not have to show their contents and were sometimes known as 'secret remedies.'

The Medicines Act in 1968 finally introduced control over all 'medicinal products'. This term was used to include any substance or article used for a 'medicinal purpose', which might be treating, preventing or diagnosing disease. However, it did not include herbal medicines and foods with vague medicinal claims.



We want to know what you think?

Male

Female

Age _____

Please tick:

I enjoyed using the Pharmacy Debate Packs

AGREE

DISAGREE

DON'T KNOW

I learned some interesting new things

The information in the Packs was easy to use

The Packs have made me want to find out more

I know more about pharmacy now than at the beginning

The Packs have made me look at news headlines differently

I enjoyed...

I didn't enjoy...

I was surprised by...

I was bored by...

Please tick:

	AGREE	DISAGREE	DON'T KNOW
Did you enjoy using the debate packs?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Were the debate packs pitched at the correct level for the class?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Was the balance between the different sections right?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Do you think that the students were engaged and enjoying themselves?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Did you invite a practising pharmacist to talk to your class?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If yes, did you find this useful?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

What skills or abilities do you think that the packs stimulated?

Do you think your class were using different skills or abilities to those that you usually see in the classroom? eg. literacy skills, communication skills, thinking skills, social skills, creative skills

Did your pupils increase or gain skills as part of the project?

What have you learnt about your class?

What would you change about the Pharmacy Debate Packs to make them more useful?

Any other comments