



Eunice Worrall

Eunice was born in Homebush in 1929 and grew up in Liverpool. After leaving school she did Pharmacy at Sydney University. Soon after graduation she met and subsequently married her husband Brian, and the marriage produced three children. During her time as wife and mother, Eunice continued to work part-time in various pharmacies over the years, and when the children were grown she eventually bought her own, and ran it successfully for eight years. Eunice lives at Pearl Beach now, where both she and Brian are still trying to retire completely.

I'm of English and Scottish background - I'm a second generation Australian. I was born in Homebush in a tiny private hospital on December 12, 1929. I have no memory of Homebush because I was only two years old when we moved to Liverpool. My grandfather was the Postmaster at Rossmore and after my grandfather died his brother took it over. My mother had been living at Rossmore too before her marriage, then she and Daddy moved to Liverpool, where she started a business. She was there for thirty years, I think.

My mother was one of eleven children - a big country family. My grandfather had been a coal miner at Mount Keira, which was where my mother was born. All the Askew family came from the Wollongong area. He, like a lot of miners, got dust on the lungs, and he moved the family to Rossmore, I think when my mother was about nine years old. And there they remained till they all died out. There's a grand-daughter still living there now.

I grew up in Liverpool, which was then a little country town. Mummy had a tea room which she expanded into a cafe during WWII. After the War was over she gave away the cafe because of the hours, and it just became the local deli and

grocery store. My father was the foreman of a spinning and weaving mill, making fabric for Air Force uniforms - that was also in Liverpool. He worked till the end of WWII and then he came into business with my mother. They stayed there until the business was sold about 1960-61.

I always helped my parents, but I didn't go beyond that and do any paid jobs when I was young. I can't recall ever being paid for a job. I used to go to the stables from where I ultimately bought a horse, and I used to help muck out the stables and things, but I never got paid for it. Just enjoyed it.

I used to go out to the family place at Rossmore a lot. They were halcyon days - tearing around on horseback and things like that. I had a beautiful childhood. A fabulous childhood. I'm an only child - though not by choice - so I depended heavily on my relationships with cousins and whatever. I went to primary school in Liverpool, and because I was a bright little bugger I managed to get myself to a selective high school. So from eleven years of age onward I travelled to Parramatta to school every day until I did the Leaving Certificate.

I suppose it wasn't all that unusual for a girl to do the Leaving Certificate in those days, but in my family's eyes my mother was crazy to give me a tertiary education. "She's only a girl. Why are you doing it?". It wasn't till many years afterwards that it occurred to me that I perhaps blazed the trail for cousins. A cousin who was maybe fifteen years younger than I was ultimately went on and did tertiary education, but with that level of country people they just didn't expect a girl to have tertiary education. My mother's brothers and sisters mocked her - they thought she was stupid. But she was determined to do it because she wanted me to have the opportunities that she didn't.

I did Pharmacy at Sydney University. The general attitude towards girls that I just mentioned just washed over me. I was too brazen to take any notice of it. I think my resolve might have weakened, though, had my mother not been such a strong woman. I used to hate not earning much money, because as an apprentice I was paid very little. She'd say: "Don't worry. You'll laugh when you're earning more than everybody else later on."

I enjoyed the social life at the university, too. I got through without any trouble but I didn't ever shine, because I enjoyed the social life too much! I've often said, and I still believe it to be true, that my education started the day I finished university. One has no peripheral vision when you're studying something, and it wasn't till I'd finished university that I had time to start appreciating the arts, particularly, and catch up on a lot of diverse reading instead of text books.

I think my mother's strength of outlook came from the fact that she worked alongside my father, as a girl, in the family store - the Post Office and store - and she had a very good business head. I think she would have liked a lot more from life for herself, and therefore decided that she'd give it to me. But Mum was the business brains in the family. My father was a wonderful, lovable Scotsman who was still very broad the day he died - even though he'd been in Australia for fifty-something years.

In those days, it was an apprenticeship situation with pharmacy. You worked in a pharmacy while you were at university - you were indentured to a pharmacist. The last intake of the apprenticeship system finished in 1963, and the first B.Pharm. graduates graduated in the same year.

I don't know if I think the apprenticeship system was better, but I think we developed a greater sense of responsibility. We didn't have time (and this was the reason for the change) because one had to do so many hours a week in the pharmacy one didn't have time to do as much as it was obviously becoming necessary to do at university. Now, the system is three years full-time at university and then a year in a pharmacy after that. It's sort of a reverse situation, and it is soon to become a four year full-time course because of the pharmacological explosion - the proliferation of drugs today and so on.

I did have a big hiccup during my school career. I was walking to school one morning at age 13 and I had an argument with a two-ton lorry - and lost. I had multiple injuries and threatened amputation of a leg, spent three months in hospital and went back to school with callipers on the leg, which I wore for two years. But again, all that washed over me a lot, because I just expected to get better, and I did. It made life very difficult at school that particular year, but the teaching staff were pretty fabulous and I managed to stay there. I was also rather younger than most of the other students. I had repeated first year because of that, and that perhaps gave me a better grounding - I was able to catch up on the missed time

I stayed with the fellow with whom I was apprenticed for, I think, another year, or maybe only six months, after I finished. Then I went to a pharmacy in Merrylands where I worked for a couple of years. It was a very suburban, straightforward community pharmacy. I'd been active on committees when I was at university - the university pharmaceutical association and the like, and life was fairly quiet then at Merrylands.

It was while I was at Merrylands that I met my husband Brian, and much against what I had thought my life was mapped out to be, I decided to get married. I hadn't planned to - I was going to be a career woman and never marry. That was in 1953, and I was 23 years old. I worked for another year or so after that, then I found I was pregnant. I worked until shortly before the first one was born and really felt a great sadness when I stopped working. I thought, "Oh my God! All that study and all that education, and now I'm going to stay home and be a mother, and I'll probably never work again." And I didn't work for six years. Then, through a dare, I got back into the workforce and since then I've never stopped!

I had three children in that six years, but I do it the easy way: I have two at a time! When Mark was two and a half I had twins - a boy and a girl, David and Fiona. They were at kindergarten when I went back to work, and Mark was in primary school. The very first work I went back to was terrific because I finished at three o'clock in the afternoon. I was working as a Registered Pharmacist and it was near home, and the hours were from ten till three. I think that was probably pretty unusual, and I was very lucky to find it. I was recommended by somebody to the guy who owned the pharmacy.

That worked in beautifully with the children, and then after I'd been there for a couple of years my mother had a massive heart attack so I gave up the job because of running back and forth to hospital. She fortunately survived, and when things had settled down I decided I'd start looking for the odd bit of work, because I was thoroughly back into it by then.

I think I just did odd locum days - it's hard to remember, it's so long ago, really,

but I would do one day a week here and one day a week there. That did entail more organisation with the children, but I was very lucky in that I found a very grandmotherly lady who'd be there when they got home from school and would mind them and have them bathed by the time I got home.

But the fact that I worked didn't mean I missed out on the "Mum" things in life. I thought that was important, and I served on the various school committees all the way right through their education. This meant that I was a busy person, but I enjoyed it. It's the old gregariousness coming out again, I suppose. I used to sew all their clothes, as well as my own, so my main relaxation was sewing at night after they all went to bed.

I think in those days I only worked about two or three days a week on average, but it stood me in good stead because Brian's always been a very fair person, and he was extremely involved in the Masonic Lodge, and extremely involved in his own work, so he thought it was good that I had something that was my particular interest as well, and he encouraged it, which was terrific - whereas a lot of husbands I don't think would have liked it. We were fortunate that I was able to have household help - that I didn't have to come home and scrub the floors. We were your average middle class family.

I think some members of the family didn't think I should go out to work. My mother-in law, and Brian's family in general, are very conservative, and I think she disapproved that I had a profession and went back to it. But it was interesting, because as the years went by that disapproval became admiration. She actually said to me once when she was washing up, "I envy you so much. This is all I do, wash up dishes - and look at you, and all you've got." And now, at ninety years of age, she'll say to people, "This is my daughter-in-law. She's a pharmacist."

But whatever disapproval there was didn't worry me though, because I had Brian's encouragement, and I knew the children were being well looked after. The greatest justification for doing it was when my twins were seven years old and they had to do a little social studies thing at school. They had to name within their scope of knowledge three doctors, two lawyers and two chemists, and my daughter wrote for the two chemists, "Mr Manning and my mother." And I always thought that was justification. They felt proud of me and I didn't have to feel guilty, and I didn't. I didn't ever feel guilty, and ultimately I did buy my own business. But that was years later. (At one stage, when the children were still relatively small, Brian suggested that I have my own business, and I said no then because it would have been too demanding and I wouldn't have enough time to be a good mother. It was my choice. I decided not to, and my children had all left home by the time I bought a business. I was 54 when I eventually went into my own pharmacy. That was hard work!)

I think I can say I was a successful pharmacist. I didn't win any medals at university, but I've got a lot of common sense. I also thought that having children probably helped me, from the point of view of helping other young mothers.

I've tried to retire twice now, and last Christmas I thought I really had. I sold my business in 1992, but then all the people I knew in the profession kept asking me to come and do some work for them, and I did quite a bit of work for a while, and then it finally resolved that I did two days a week on a regular basis. That was terrific, and I did that until just before last Christmas, when we moved up here to Pearl Beach. I decided that I'd paid my dues to pharmacy and that I was definitely

going to retire. For the last several years I've also served on the Alumni Committee at Sydney University, and I really felt that I'd done my share for pharmacy. I finished at Christmas, but word gets around, and I'm doing the odd day up here now. And that's enough. I don't want to do any more. I'll be a pharmacist till the day I die mentally - but physically it's getting hard. It's hard work. People don't realise what hard work it is.

My average working day? Well, depending where I was working, and the travelling time involved, rarely would I have to get up before seven o'clock in the morning. The children, once they were at secondary school stage would leave home on the seven thirty bus. Breakfast was a fairly assembly line affair. All the children learned to iron shirts pretty early in life. They were all pretty self-reliant, probably more than if I'd been there all the time to do it for them, and that doesn't hurt them. My sons' wives thank me for it today!

They would go off, and I wouldn't shower and dress until they left, then it was whoosh, out of the house. I used to do locum work all around the place, sometimes just for a day, sometimes for two days, sometimes for a week - it just depended. But if I did a spell of full-time work then I'd take a break and be at home for a few weeks.

I would work until six o'clock, on average, which meant I wasn't home until close to seven, usually. And again, the children were self-reliant there. As they got older they'd have things organised ready for dinner to start when I got home. We had a rule in the house that whoever got dinner didn't have to wash up. Mark, my eldest, became a great exponent of a roast dinner. If he put the leg of lamb on and peeled the vegies, then he didn't have to wash up afterwards. We coped fairly well.

I had someone stay with the children till they were around twelve, I guess. And after that we had a lot of rules. Nobody was allowed to swim unless there was an adult in the house. That was a very hard and fast rule. But we had a marvellous neighbour, one of whose kids was the same age as ours, so she would often come in and supervise them. They weren't allowed to have friends over if I weren't home. We had a lot of rules. And they would always ring me the moment they came in, and I'd ask them what they had for homework and so forth.

I'm sure they whinged and complained about all these rules behind my back. They did their share of whingeing and we had our share of hassles, believe you me. Not so much in their early teenage years, but we all went through the "I'm eighteen years old and I can vote now so you can't tell me what to do" and so on. But they were pretty good kids.

Yes, the domestic sphere was my responsibility. But as I said, I was lucky to be able to have someone come in and clean the house once a week. It wasn't as if we had to spend the whole weekend running around doing those jobs. Washing was never a problem with washing machines. I used to do it for all the family.

Was I a strict parent? Goodness me, that's a terrible question to ask me! I'd like to think I was a fair parent. (I asked my daughter about this recently, and she said I was fair. Hooray!) I think I was probably a strict parent, though. I'm a short-tempered person, especially in those days - I guess because I used to get tired and stressed.

Now that my children are mature adults they often tell me some little thing about their childhood that I've never known, which surprises me. Little things I didn't know about. For instance, we always had a rule that if you didn't eat dinner you didn't get dessert, and we always ate at the dining table. (I have a horror of families who sit up in front of television). I can remember that if the children lagged behind with their dinner when everyone else had finished, they'd be sent out to the breakfast room, and I'd hear the clunk, clunk of cutlery on plate and think "Yes, that's good. Everything's happening as it should." And then my daughter would come in with the empty plate and I'd say "Good girl. You've finally eaten your dinner. OK. Now you can have your dessert." It wasn't until a few years ago that she told me that she used to feed it to the dog under the table! I guess there are always things like that in any family.

We were very lucky having a pool at home, because we encouraged our kids to bring all their friends home. Also Brian built a big playroom down off the garage and we'd inherited a three-quarter size billiard table from his family which was a great thing for bringing the kids' friends home. And if they went to the beach when they were older teenagers, they'd still come home and have a swim in the pool and play a game of snooker, and we always knew who their friends were and what our kids were doing. That wasn't a matter of being overly strict, it was more a matter of home being attractive and they were happy to be there.

We relaxed a fair bit as a family. We snow skied and water skied. We used to belong to a water ski syndicate when the children were small. We used to lease a beach at Wiseman's Ferry and drive up there every weekend to water ski. Snow skiing was an annual event - still is. The children I think were about three and five when we first took them. We were lucky because Brian was involved in the development of Smiggin Holes and we were able to get very cheap accommodation, so we were able to afford to take the children.

As to my other leisure activities, I was very involved with the play reading group I mentioned for fifteen or twenty years I suppose, which was great fun - enormous fun. I've always said that my years from thirty to forty were the absolute best years of my life. The blips started in the forties, but from thirty to forty we had a nice home, we had three beautiful kids, we were earning a reasonable income, and life was pretty good to us. They were great years, really.

Brian is an engineer. He worked with his father, and the factory was at Mascot. The business was sold in the 60s and he ultimately went to Alcan as a design engineer. We decided when we married that we wanted to be within half an hour's drive from Mascot, and we finished up buying a block of land at Castlecrag on the north shore. We rented a house at Homebush for a little over a year after we got married. Rental properties were very hard to get in 1953-54 and this happened to be a house that belonged to friends of my mother and we were able to rent that. We lived there while we built the house at Castlecrag and we moved into that in November 1954. We lived there for 32 years, so all the children were born there and brought up there.

We moved from there to Lavender Bay in 1987. By that time we'd bought the cottage here in Pearl Beach (in 1983) - a sanity saver. We used to rush back and forth between the two places and we found that all the time at Castlecrag we seemed to do nothing but maintain the property. Our eldest son said to us one

day: "You two are mad. You don't entertain in this place now, it's too big for you with only the two of you, why don't you get something smaller?" By that time Brian was working at Granville - he moved around with the company a bit - and it was taking him anything up to an hour and a half to drive to work, which was ridiculous. The worst part of the journey was getting from Castlecrag through Chatswood to the Epping Highway, and we decided that if we lived west of the highway it would be easier travelling for him.

I'd always wanted an old house, so we started fossicking around and found a little 1910 terrace house down at Lavender Bay, with no lawn - just a courtyard. It cut his travelling time down to forty minutes, mine was ten (because I had my own pharmacy by then) and it was fantastic. It gave us a whole new freedom of life. We could just walk in - it was like an apartment - we could just walk out and shut the door, and come up here. (Although we were burgled twice.)

We were there until last September. We had planned to hang onto the place at Lavender Bay, if we could do it financially, but we found we were only spending one night a week in Sydney once this house was built. It was more attractive to be up here. We thought we might buy a small one bedroom apartment, but when you look at the finance of it it's really not worth it, so we joined the Royal Automobile Club and when we go to town now we stay at the Club overnight. And we always combine things. Next week we're going down for a dinner, so we're going to go down early and do some shopping on the day we go down, then we'll go to the Art gallery the next morning and meet an old friend for lunch. So we might get a worthwhile couple of days down there.

How much time did I get for lunch and tea breaks in the pharmacy? Pharmacists don't have lunch! The law says there must be a pharmacist on the premises at all times. The average small suburban pharmacy only has one pharmacist in it, so you don't have a lunch hour. You're supposed to be able to sit down for lunch, but in reality that often doesn't happen. If you can grab ten or fifteen minutes to sit down you do so. If you don't, you just keep working. It depends how much work is there to be done. But usually it was just a sandwich at the bench.

There was a lot more to the job than dispensing medicines. You are running a retail business, remember, so there's ordering, and seeing that everything's in place. There's an enormous amount of counselling done each day. I often used to think with some places I worked that I was bit of a social worker as well, because people like to come to you with their problems. A lot of that is them trying to avoid having to go to the doctor, but you know your limitations, so you do what you can. I never hesitated to say to someone that she see a doctor if I thought they should.

As you get to know your customers they become fairly confidential with you, because of the nature of what you're doing for them, and you do become involved with their emotional life as well - particularly if you've got someone with a spouse with a terminal illness, and you're very aware of the progress of the terminal illness because of the prescriptions you are doing and the contact that you've got with their doctor. They do a lot of crying on shoulders. I've had a few people crying on my shoulder when there's been a marriage break-up and things like that. It was counselling in the broadest sense, and that part of pharmacy is getting wider today and some pharmacists are actually setting up counselling rooms - not for social counselling, but for medical counselling, particularly

compliance with medication.

It's always been a profession where people come to you for advice of all sorts. I think every pharmacist feels a bit exploited, because it's the truth - people *are* trying to save money. Some of them might flatter you and say that they always trust what you say to them, but in the end you try to be a friend to them all - I guess that's what it amounts to. One minute you're counselling people, and the next minute you're selling them a tube of toothpaste. It's a very broad field today, pharmacy.

The advent of supermarkets brought about the increase in the range of products that chemists now sell, because supermarkets sold so many what we call HBA lines - health and beauty aids. They were taking away a lot of the bread and butter from pharmacies, so pharmacies had to fight back by diversifying their front-of-shop stock. Pharmacy used to be a very profitable business in the dispensary too, but with the tremendous traumas of the National Health scheme during the 1980s the bottom dropped out of that. Pharmacists are now only paid a ten percent mark-up by the government on the prescriptions, plus a dispensing fee, so that cut a lot of the profit margin back. I think people rely more on their front-of-shop now to make some money - because you are there to make a living, after all. Some pharmacists hate this, and they get out of retail. I'm a fairly gregarious person so it didn't worry me. I like to always come home and think I've done a good day's work - I think that's what it amounts to.

I probably should mention that we've had a lot of blips in our personal life during all of this period too. In 1974 Brian got cancer and was not expected to make it. His prognosis was not very good because it was a fairly massive cancer. I suppose somewhere in my mind there might have been a niggles of guilt about my working, but never again from that day on because I realised that if Brian couldn't work I could support the family. I did stop working for a few months to nurse him at home after he came out of hospital, but I never queried the fact that I worked again, because it was very important. Fortunately his company was very good to him as well. He was a valued member of the staff and we got through it all. But it was an expensive time, and a very harrowing time. But to look at him now of course you'd never know that there had been anything wrong with him. (We call him "the gutless wonder" because they took them all out!)

Just as Brian was recovering from all that our eldest son had a horrific accident on a motor bike. Much against our will we'd got him a motor bike to go to university, to make the travelling easier. Brian got him a job in the factory for the university vacation, and on his second day on the job he was driving home through Parramatta and an elderly man, driving out of a parking area and talking to his grandchildren in the back seat, drove straight into Mark. This was the week before Christmas. It was pretty nasty. His life was saved I think by the fact that he was wearing a full-face helmet. We spent Christmas Eve sitting outside an operating theatre while he had surgery.

He also recovered, but it changed the direction of his life because he gave up university. He'd been doing wool and pastoral science, and when he recovered some three or four months later he said he didn't want to go back to university. We said we didn't care, that the main thing was that he was alive, and for him to do whatever he wanted. He got himself a job with CAGA Finance (maths had always been his best subject - took to it like a duck to water) and the next thing we knew he had decided to do a degree in business. He did it part-time on the Kuringai Campus and he's now a very successful businessman in the world of

finance. So it changed his life, but changed it in a very good direction.

All our children are successful in their chosen fields. David has a degree in music and is Musical Director of the RAAF Air Command band. Fiona did nursing and is now a CNS Recovery, which means she is a specialist in the recovery field post-surgery.

But I guess every family has its ups and downs.

What changes have I seen in pharmacy over the years? I think the stress in pharmacy is very much greater than it used to be. You've got to work a lot harder than you used to because the population's larger, there aren't as many pharmacies per head of population as there used to be, and therefore you're working at a much greater pace. Because the bulk of the prescriptions are proprietary medications today, people think that all you have to do is to take a bottle off the shelf - and that's my absolute bugbear! - and therefore they want the prescription filled five minutes before they walked in. So you're really working under big pressure the whole time.

You've got to be very aware of what you're doing, and be aware of drug interactions (because of the sophistication of drugs today.) So there is a lot of pressure, but there usen't to be when I first started. Pharmacy had changed because of the diversification of lines at the front-of-shop. You've got to be much more of a merchandiser today than used to be the case - particularly if you own the business. I think, generally speaking, the trend is going now to fewer, but much larger pharmacies. When I first started I didn't know of anybody who had a pharmacy with eight or ten on the staff, but that's very common today. I think that's also been brought about by regional shopping centres concentrating the shopping population. It's moved in a business direction. The very fact that the pharmacy course at university is shortly going to become four years full-time is indicative of the fact that more and more study is required. There is also the Australian Institute of Pharmacy Management to cater for business administration training.

Continuing education is very important, too. There are no formal provisions for that yet, but it's happening, and one's going to have to do at least twenty hours a year of continuing education. Right now there's an organisation called the Australian College of Pharmacy Practice which runs a points system. You can get your points by either attending lectures that are put on every two or three months in regional areas. They might be on various topics - asthma, arthritis, cardiac problems - whatever. They have very, very good speakers. Or you can do it just by home study. In the Journal to which I subscribe every month there's always a quiz that you can answer and things like that. But ongoing reading and education is a very important part. I went overseas at one stage for six weeks, and on the very first day when I came back to work I dispensed five drugs that hadn't been on the market here when I left six weeks before. And that's happening all the time. You've really got to try to keep up with it.

Of course the other big thing is computers. They've revolutionised the dispensary. There's been more and more clerical work associated with the dispensary over the years because of government regulations, and you had to try to retain it all in your head once - all the actual regulations. Now, you put your update disk in once a month and on the first of every month you're up and

running on the computer and the computer's already got the changes there. You might have read the precis, but you mightn't have necessarily remembered it.

Then there's the history of the patient. You go to dispense a prescription and you bring up the patient's computer entry if they're a regular, and up flashes their history, and you can say, "Oh dear! They only got this filled a week ago. Maybe they're taking too big a dose," and you can go out and have a word to them to make sure that they're taking the right dose. There may be a valid reason for re-ordering so soon, like holidays coming up or something, but very often people don't understand the dosage. Computers help you to pick up all sorts of little problems like that. If they go to a different doctor and the doctor prescribes something that's going to interact with something else they're taking, the computer will flash a warning that you've got a drug interaction. You can give much greater service to the patient.

I've always maintained that the pharmacist is the doctor's watchdog. You've got to be there to double check, for the patients' protection. Even with the computer, if you're on good terms with the local GP he might ring you and say, "What in heck are Mrs Jones' little blue pills that I prescribed four months ago? I haven't noted them on her history card and I can't remember." You can just flash up the history and tell him. This interaction between the pharmacist and the doctor is becoming more important these days too - all for the protection of the patient.

At one stage pharmacies were about second on the hit list for armed robbery. Thank God I've never been robbed - touch wood! - although I did have two break-and-enters in 1987. It's not fun being called by the police at 2am and spending the rest of the night cleaning up broken glass etc.

We have standing orders from the Police which we're supposed to put the staff through every six months. We have to make sure that they read it and that they know it. I have had a schizophrenic fall apart on me one day in the shop, and threaten to wreck the shop and me as well - which was pretty hairy - but as far a robbery goes, thank God I haven't, because it's a pretty traumatic experience for those who have. At the moment I believe that pharmacies have gone down to number four or five on the hit list. The Seven Eleven-type stores are the most at risk of hold-up now. It used to be money *and* drugs when they robbed pharmacies, but now it's usually money *for* drugs, because they find that it's mainly addicts who are doing it.

Only a matter of months ago we were warned that there was a scam going on around the area where I was working, with three young guys. They would come in, and two of them would occupy the staff with bogus questions, and the third one would sneak around into the dispensary and look for money. This particular day was at North Sydney and we were pretty busy, as usual. I noticed a guy asking one of the girls about men's hair dye, and he was only about seventeen. Then there was a second one talking to the second girl about knee-supports, or something like that. There was a third customer, and I dashed up to serve her, and she wanted some photographs done, which were going to take some time. What alerted me I don't know, but I just started to prickle, and I thought: "He wouldn't want hair dye. This is a scam," and I said to the customer, "I'm sorry, madam, to keep you waiting..." and I ran back to the dispensary and here was another young guy just starting to go through the drawers! I challenged him, asked him what he was doing there, and he pretended that he was looking for something that he wanted to buy. His two mates cut and ran... and I made him buy something! But it was obvious we were about to be robbed, and it was sheer

good fortune that we weren't.

But that sort of thing wasn't rife in earlier days, but the drug problem wasn't rife then, either. And it all adds to the stress levels. I know one lass who was shot, and she's never been the same since. Some areas are apparently worse than others, but I think we're all vulnerable. It's a very big hassle for us.

Yes, I did find the job satisfying. I think the most satisfying aspect of it was helping people. If I had my druthers I'd do medicine. I wouldn't do pharmacy again because physically and legally it's very limiting. This business of not being able to leave the shop because I'm the only pharmacist on the premises... My father had wanted me to do medicine, but I said, "No way. I'm not going to study for six years if I only have to study for three," but I think that if I had my druthers I'd do medicine. But I like working with people - always have done, and I think that's the most satisfying part of it.

I decided that I wanted to be a pharmacist when I was a kid, and I just never deviated from it. I used to go and sit on a stool in the local pharmacy and I used to go and watch him working. In retrospect, what a nuisance I must have been! I suppose at eight years of age I thought it was glamorous - dear God it's not! (*Laughs*). All my working life people have said, "Oh it must be such a lovely job for a lady. It's such a clean job," but it's a filthy job! Even the front-of-house work... apart from anything else there's a lot of bottles to dust, but also a lot of the things you do are pretty dirty jobs. Some of the ointments you make are dirty jobs. It's not a clean job at all. Perhaps it's an illusion from the white uniform.

There've been quite some changes in the sorts of things you do in the dispensary. When I first started, practically all of the dispensing was extemporaneous - compounded on the spot. Now, in the average pharmacy it's about five percent. This is because of all the synthetic things coming in. Most of our "Galenicals" as we called them were herbal preparations, tinctures of this or that. And everything was in Latin then too, of course. A lot of my habits have never changed over the years. If I want to write "olive oil" on the order pad, I put "OOO", and young pharmacists coming through today don't know what that means. (It stands for "Oleum Olivae Optimum" - best olive oil). But because I was trained in Latin I've always stayed with the Latin expressions to a large degree. "Latin in Pharmacy" was one of our university subjects, but of course now they don't study Latin any more. They're given the abbreviations without knowing what the abbreviations mean. They know that "A.C." means "before food" but they don't know that it means "ante cibe". Same with P.C., "after food" - "Post cibe". The stylised R that comes at the beginning of every prescription stands for "recipe" - "take thou" and comes from the Latin, but kids going through today know that it comes at the beginning of a script but they don't know why it's there or what it actually means. If you happen to be in a practice that is near a dermatologist, particularly, you'll get more extemporaneous stuff today than other places because dermatologists still order a lot of ointments and lotions and things like that.

But things have changed for the better, because the drugs available today are just so wonderful. Nutrition has become very important for pharmacy, too. In fact I was just reading in one of my magazines this month that there's a nutrition course that has just been officially recognised as another string to your bow in pharmacy, because vitamins and nutrition are a very big part of health today. Pharmacists have always talked about nutrition, of course, but there wasn't the range of herbal products that you have today. The swing to alternative medicine

is clearly reflected in pharmacy.

I've been a pharmacist for forty four years, so I've seen some changes. I can remember in my early days having to make suppositories and pills, which is unheard of today. I've got a suppository mould downstairs that I'll show you later. Pills were made on a board. You had to actually compound the mixture in a mortar and pestle, then you put it onto the board and roll it out into a long thin snake. You had a little cutter - a little grooved thing a bit like a little washboard, and this used to cut it into equal portions. Then you had this little round wooden gadget and you used to have to take each individual pill and roll it in a figure eight motion so that it became perfectly rounded. And that's a terribly time-consuming exercise. Certainly I didn't do it often, but I have done it in the very early days.

And powders... you used to make powders - grind it up and then divide it up into equal portions and then fold each one individually - a bit like the old Bex Powders were folded. Even things like Bex and Vincent's APC Powders - well, people just don't buy things like that any more. They're things that have gone by the board, and a lot of the old Galenicals you just don't use any more. When I started pharmacy, the pre-compounded tablets and things would have filled one small cupboard - that was all. Now they fill rows and rows of fixtures and your Galenicals fill one small cupboard.

Yet still, by law, you have an inspection, on average about once a year. The pharmacy has to be registered, and the inspector comes around and you've got to have x number of mortars and pestles and x number of spatulas, and x hundred of government stamped measures and so on. You must have all that equipment, even though you don't use it anything like as much. You also had to have a huge amount of mandatory reference books, which are very expensive.

I guess one of the biggest changes in pharmacy over the years is the amount of women who are in pharmacy now. When I went through there was tremendous resentment against women. One of the chief examiners had the attitude: "Why spend all this money training a woman, because she's only going to get married and give it up." I guess we constituted about fifteen to twenty percent then, whereas today the proportion of women enrolled make up around 74 percent. Men aren't going into pharmacy probably because the remuneration isn't there, basically. Plus the fact that it's a retail thing - and if they're scientific-minded they tend to go into the more science-oriented fields a lot. A lot of the people coming through today aren't coming into the retail world at all - they're going into research. There's a much greater field for that now than there used to be. Women as well as men are doing this. So that's been an enormous change, and I think now that women in the retail scene are more popular with the customers than the men are.

We're a service industry, so there hasn't been any relaxation in the rigorous hours we have to work each day. It's just assumed that mothers in pharmacy will have to spend a bigger slice of their income on child care. There's been a big push going on at the moment within pharmacy in general to try and get more women into pharmacy ownership, because that's been a very light field for women, and you do find women going into partnership together now, so that they can get more time at home, and that seems to be working quite well.

Throughout my training time, people would come in and ask to see the chemist. "Could I help you?" I'd ask. "No. No. I want to see the man." So you'd go out to the pharmacist, gnashing your teeth, and tell him that they wanted to see him. I could hardly wait to finish my training so this could no longer happen, and the first

opportunity I had after I'd finished my training was when this woman came in to where I was working and asked to see the chemist. "I *am* the chemist" I replied, rather loftily, and she just said "Oh," and lifted her kid up onto the counter, dropped his tweeds, popped his penis at me and said, "An ant bit it. What will I do?" My boss was out the back absolutely cracking up. He said "Serves you right!" (*Laughter*). It was so funny. It brought me down to earth with an enormous thud.

An 81-year-old man staggered in on his walking stick one day. At the time there was a product on the market called Nu-Man - it was a vitamin thing specially for men. He said to me, "I'm eighty one and it's a bit hard to get an erection. Do you think that Nu-Man might do me some good?" I had to tell him that I'd had no experience with it!

You get a lot of things like that happen, but it's hard to bring them to mind. There's the age-old one where the suppositories are always wrapped in aluminium foil, or always used to be, and the number of patients who've asked if they remove the foil before they insert it would surprise you. Over the years, I've come across a number of people who've been given a gelatine capsule to take and they want to know if they have to cut it open and put the contents into a glass of water. Those sorts of things are funny to us, but they're probably not funny to other people.

During the time I owned my pharmacy we had a young guy who was intellectually handicapped because he was an epileptic, and he knew that if he ever had a seizure anywhere nearby that he should be sent to me, because I would look after him. His dad was one of the local doctors and we had a very good relationship. On more than one occasion I'd had Fred out the back of the shop getting over a seizure, and I'd have to just shut the door of the shop and drive him home. He didn't ever have a seizure in the shop - he's a lovely boy.

One of the most dramatic and certainly horrendous experiences was only a couple of years back. I'd sold my pharmacy and was doing a locum for a friend in Mosman and the very first day that I was there this guy came rushing into the shop from the bank, which was a few doors down the street. He said, "Quickly, quickly! Can you come? Someone's just collapsed on the floor of the bank!" I just said to the two shopgirls, "Do the best you can..." and ran to the bank. I got there to find a very old man who had obviously had a cardiac seizure and he was to all intents and purposes dead on the floor. This young bank girl was trying to give him CPR and I could see that she wasn't doing it properly, because fortunately I'd done a course in it a year before. I said, "Your hands are too high. You'll break his ribs", and she just stood away and said, "You do it. You do it!" I got down on the floor alongside him and fortunately there was a customer who knew a little bit about mouth to mouth, and he offered help. I said to him, "Yes. You do that end and I'll do this end" and we worked on him for twenty minutes till the ambulance came. We got him back at one stage, and I could feel a pulse in his neck. I rolled him over into the recovery position, but we lost him again. We kept on trying, and the ambulance guys walked in and saw my badge, and told me to keep on with what I was doing while they put an oxygen mask on him. They did all of that but he was gone - we couldn't resuscitate him. It was a horrible experience. You do these courses, but you don't think it's ever going to happen to you. A cardiologist whom I know said it's even difficult for him in the hospital situation, so it was easy for him to appreciate how hard it was to be on the floor of a bank in the middle of a crowd, and called upon to do something that wasn't necessarily within my expertise. I wasn't due to work the next day, fortunately, because the emotional

reaction set in with a vengeance, and I felt terrible because I couldn't save him. When we ripped his shirt open he was wearing a trans-dermal patch, so he obviously had a history of heart disease. It was probably just that his time had come. But it was an awful experience.

That was the most dramatic, but of course there have been umpteen first aid experiences. The number of times I've staunched blood, and had people's blood all over me - now of course you pull a pair of rubber gloves on! That's another very big change, and we have to be far more aware now whereas once upon a time you'd never stop to think about HIV or hepatitis. You don't get asked to do all that much first aid, but you still get some - so the rubber gloves are always handy now. And of course today many pharmacists do sugar testing, cholesterol testing and blood pressure checks.

When we lived in Castlecrag, the street we lived in was a sort of community area, and whenever one of the neighbour's kids got hurt they'd bring them up to me to be fixed up. I was the local First Aid station.

I don't think I'd have kept doing pharmacy if it hadn't been satisfying. I like the interaction with people. It's a satisfying feeling to know that you've helped someone.

I think I was a feminist before my time, but also I would never take away from Brian's support. He's supported me every inch of the way. I'm very fortunate in that I've had a very good marriage. I belonged to a play-reading group which he encouraged me to join, and for years I'd be off to these play readings, and I'd have a lot of fun while he was doing his Masonic Lodge thing. We've always said that we're each the President of the other's Mutual Admiration Society. I don't think I'd have been able to do what I've done had I not had his support, and we're very lucky in that respect.

I never felt any underlying resentment at the way women have been treated because I worked in a profession where there hasn't been any inequality. We've always had equal pay, for instance, which is an enormous factor, so I didn't ever feel denied. And when I say I was a feminist, I wasn't a bra-burning one. I mean, I like being a woman. I like being looked after by a man. But I wasn't going to let the prevailing attitudes of my time stop me from doing what I wanted to do, and behind that there was parental influence, too, because my Mum was a strong lady. I admired her terribly, and I hated it in her latter years when she became physically frail. We're going through it now with Brian's Mum, and I hate to see that loss of dignity that they suffer when they become frail. It's not something any of us want, and we hope we don't live that long.

Now that I'm virtually retired - well, seven-eighths retired, I've settled into that alright, though I never thought I would. I could never see myself in this scene, but I'm loving it. Yesterday, for instance, having spent the night at the Royal Automobile Club, we got up, had a leisurely breakfast, walked in a very roundabout fashion through the Botanical Gardens to the Art Gallery. Later we saw a play, visited the Archibald, the Wynne, and the Sulman Exhibitions, went and had a lovely lunch, and then drove home. A most perfect day. A beautiful day. Time hasn't yet hung heavily on my hands, and I hope that doesn't happen. But

it's still early days as far as being retired goes, I remind myself.

I had a wonderful thing said to me when I was selling the pharmacy. One of my customers, who still teaches at Knox College at eighty years of age said, "Be very careful. I always remember a friend of mine who said: 'I woke up this morning and the day *yawned* before me.'" And he went on to say to me, "Never do everything. Always leave something for the next day." It's a pretty good adage, when you think about it, and it suits me, because I'm a very good procrastinator!

But at the moment retirement is still new, and I'm madly finding new activities. For instance, I'm going to Spanish classes at the moment, and next term I'm going to teach a class how to do cryptic crosswords. That's what I was telling you about last time over coffee - about the University of the 3rd Age (U3A)- that's now been confirmed. And I'm looking for some things to do that will challenge the brain, because I think it's terribly important to keep the brain power working. I've already done Meals on Wheels and those things - I don't really feel the call to do more of that. If I'm going to do charity work it's got to be something where I use my brain, and that's what this U3A is - it's all voluntary work - helping other retired people, stimulating them.

I didn't look on work as a necessary evil - something that you had to do to get money to live by. When I first went back, it was the result of a dare. We went to a dinner dance one night and there were a few pharmacists at the table and they were talking shop. I told them to stop it, because I'd forgotten all about all that after six years away from the business. One of the guys said to me, "Look. I want a week off. Come and work for me for a week. It'll do you good."

I thought about it, and I thought, "Oh, why the heck not?" He said that he had a very good unregistered pharmacist working for him, and he only needed my name. That sounded alright, so I got a housekeeper in for the week and off I went. But these devils had cooked it all up between them, because the moment I got there the unregistered said to me, "While Peter's not here, he wants me to be out the front of shop doing his work." and pointed out to me where everything was in the dispensary and said, "I'll leave you to it, then."

I was so nervous, that first day I think I quadruple-checked everything that I did - but by the end of the week I felt as if I'd never been away. So I decided that that I really should keep on doing something, purely for the practice and professionalism. When Brian was ill, it was very gratifying knowing that I could support the family if I had to, but in those days I didn't *have* to do it for the money. I did it because I wanted to do it.

As far as professional bodies goes there's the Pharmaceutical Society of Australia, of which I'm a member. That's THE professional organisation, and that organises all the ongoing education. They have a monthly magazine and you get access to text books and things, and it's fairly important, I feel to be a member of that body.

I've never had any desire to go into the Committee side of it - I think perhaps I've been too busy - but there's also, for pharmacist-owners, an association called the Pharmacy Guild of Australia, and you must own a pharmacy to be a member of

that. After I sold my pharmacy I could be an Associate, but I couldn't be a full voting member. That was a good thing for pharmacy ownership because they keep you up-to-date with all the industrial awards and anything of that nature. They act on your behalf. They dealt with the government in all these terrible stresses we've had with the government over the last few years with the National Health Scheme - or the Pharmaceutical Benefits Scheme as it's now called. That was an important membership, but I've let that lapse in the last twelve months because I couldn't see any point in being in it now I don't own a pharmacy.

There is a Salaried Pharmacists' Association as well, but it's never been strong, and I don't know that it's ever really done very much.

Through the Alumni Association there's a social aspect because the aims of the Alumni are to keep up the fellowship of pharmacy. With all the continuing education functions there's usually a supper involved - there's lots of dinners and things to which one goes. There are two or three conferences every year; they have what's called an Offshore Refresher Course somewhere every year; there's the FIP Conference which is coming up in September in Tel Aviv (FIP - *Federation Internationale Pharmaceutique*). They have a big social content as well. On top of that you have your own small group of friends that you see. I've retained friendship with some others ever since university.

I think it's very important to enjoy what you're doing. My second son, for instance, is a musician, and I think it must be wonderful for him to get so much pleasure out of what he does, and for it to give so much pleasure to so many people. I think work should be very self-satisfying. It must be terrible to think, "Oh my God! I've got to do it again! I've got to get up today and go..." I think that would be awful. People who are working at a job they dislike because they have got to must feel like that a lot of the time, which is a great shame. But then I daresay, in that kind of job they've got more time for relaxation and they get their kicks that way.

I have always studiously avoided discussing politics with customers in the pharmacy, as a matter of policy, because I think it's very dangerous. As an example, when the Third Runway business had just started, a customer came into the pharmacy one day and asked me to sign a petition and I refused to sign it. I refused for two reasons: (a) I didn't live in that area, and (b) I felt it wasn't good for me to take sides. I thought that as a business person providing a service to the people of the area, I had to be a fence-sitter. And she was very, very annoyed with me. But then, had I signed it, someone who didn't agree with her may have been annoyed. So I avoided it for that reason. I've never been an avid person politically. My father was, and I did argue with him, but it's never been high on my agenda.

Mind you. I had tremendous resentment against the federal government in 1989 - along with most other pharmacists. For the first time ever, then, pharmacists closed their doors and had a strike. That had never ever happened in the history of the country. In the 1950s, when the National Health Scheme started we were the envy of all. We had the best National Health Scheme in the world, and gradually, over the years, it's been eroded and mucked around because politicians don't have peripheral vision, I've decided, regardless of what Party

they belong to. They're worried about the blow-out of the cost of the Pharmaceutical Benefits Scheme because of all the new high-tech drugs that are on the market. What they don't see is that people are living longer, and naturally, with an older population it's going to cost more.

For instance, when was the last time you heard of anyone having an operation for a stomach ulcer? They cure them now with the high-tech drugs. Yet to turn them around in hospital and have the surgery and two weeks stay in hospital would probably have cost the government around ten thousand dollars. So one makes up for the other, but they never seem to see it that way, and it causes tremendous chagrin and stress - tremendous.

The strike achieved its aims, because the proposal was that we would have to carry, say, 50,000 dollars worth of drugs in our dispensary and dispense them with a nil mark up and a \$4.30 dispensing fee. So if you had a drug that cost you \$150, and your gross profit was \$4.30 - well, that's not the way you earn a living. We finished up, because of this tremendous action - we had pharmacists standing for parliament, and this hadn't happened before either, purely on this platform - we finished up getting a 10% mark-up plus the dispensing fee. It was not what we wanted - because we used to get 25% - but it was better than a kick in the teeth. So it did achieve its ends, and it also caused them to set up what they called the Pharmacy Restructuring Authority, and that worked for the good of pharmacy in the long term.

In recalling my working life I realise it has been a fairly happy one. I've had my share of satisfaction, challenge, and I feel I have been a successful pharmacist. (I mean that in a professional, not financial sense.) It's a good feeling to think that I have helped a lot of people, made a lot of friends, and perhaps put back into the community something of which it has given me.

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