In 1975 the purpose of *The International Pharmacopoeia* was reconsidered. It was decided that the publication should focus more on the needs of developing countries and recommend only simple, classical chemical techniques that had been shown to be sound. Priority would be given to drugs that were widely used throughout the world, with emphasis on the therapeutic value of these drugs. High priority would be accorded to drugs important to WHO health programmes, and to those likely to contain impurities arising from degradation or due to difficulties in their manufacture. Wherever possible, classical procedures would be used in the analytical methods so that the pharmacopoeia could be applied without the need for expensive equipment. Where a sophisticated analytical method was suggested an alternative, less complex method would also be proposed.

Since 1979 the drugs appearing in *The International Pharmacopoeia* have been selected from the list of essential drugs based on the first report of the WHO Expert Committee on the Selection of Essential Drugs. Specifications are provided in the monographs for the identification, purity and content of the essential drugs appearing in the WHO Model List of Essential Drugs (EML) and their updates.

The Third Edition eventually consisted of five volumes: Volume 1 contained general methods of analysis; Volumes 2 and 3, quality specifications for the majority of essential drug substances in the EML; and Volume 4, information on tests, methods and general requirements and quality specifications for pharmaceutical substances, excipients and dosage forms. Volume 5 contained tests and general requirements for dosage forms and quality specifications for pharmaceutical substances and tablets, which practically completed the list of monographs for active pharmaceutical substances, and a section on antimalarial drug substances and their most widely used dosage forms.