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October 16, 2020

MACS 317: Flu Files

Connecting Spanish Flu Historical Texts with Current Pandemic

The world being hit so quickly and intensely by today's COVID-19 pandemic has led to questions about whether history does repeat itself, bringing the Spanish influenza outbreak, from the early 1900s, back into conversation. While diving into the historical editions of the newspaper, the *Chicago Daily Tribune*, it was found that the most mentions and references of the keywords "Spanish flu" were made during October 1918, which is why I chose a historical text written at this time, curious to see how the Spanish flu was being portrayed in one of the biggest cities of the United States. The historical text chosen was a newspaper article in the October 10, 1918 edition of the *Chicago Daily Tribune*, "How to Keep Well" by Dr. W. A. Evans. This form of educating and informing people, through a sort of Q&A scientific journalism, sheds light on how doctors were telling people to react towards a pandemic about a hundred years ago and how this has since changed, unless, of course, it hasn't.

Looking back on previous weeks of the newspaper, this article, by Dr. Evans, seems to be a weekly advice column, advising people on how to stay healthy and answering people's questions that center around the topics of "hygiene, sanitation, and prevention of disease", with this week's edition choosing to focus on the Spanish flu. Even though this is a column that seems to center around the Spanish flu, it was found all the way on page 8 of a newspaper that was packed with World War I headlines. This left the deadly illness to be buried within heavy war content, even though "an estimated 675,000 Americans died of influenza during the pandemic, ten times as many as in the world war", with half of the US soldiers who died in Europe actually dying because of the influenza virus, instead of being killed by the enemy (Billings). Not only were hospitals using their resources, equipment, and space to help those who were getting harmed in the war, they were also getting their resources depleted because of the Spanish flu that was going around at the exact same time. The COVID-19 pandemic hit hospitals hard, making it so that "hospitals had to stop all but the most urgent non-COVID care", which is something that just couldn't be done in the 1900s when a world war was occurring (aha.org). In both of these troubling times, hospitals were reaching mass capacity, but for different reasons. With the Spanish flu leaking into the soldiers at war, as well as those back home, there were so many questions about what could be done to put this unknown disease to a halt.

Getting into the newspaper column, Dr. Evans states that, "quarantine and isolation are impracticable", drawing from an official public service report from a month before. Reading this quote, as someone experiencing the COVID-19 pandemic, was startling, considering the fact that so many places around the world got quarantined for months because of COVID-19, leaving schools and businesses completely shut down with the fear that this illness would spread further. The only advice given in 1918, towards an influenza that was deadlier than war, was to simply avoid crowded places and refrain from coughing and spitting around people. Another interesting piece of advice, that was made in Dr. Evans' article, was to wear a face mask only if you're the

one who was infected, or you were caring for someone with the virus. These face masks were described as “several layers of gauze held in front of the nose and mouth by tapes, which fasten behind the neck or around the ears”, which is completely different from the pieces of cloth people are wearing on their faces today, leaving me to wonder whether we were more prepared for the COVID-19 pandemic than we thought.

During 1918, nobody knew that an influenza would impact the world with such severe results but in 2019, the world should’ve seen another pandemic striking soon. In Dr. Evans’ article, the only methods known to treat this influenza was “rest in bed, warmth, fresh air, and abundant food”, with relief of symptoms apparently coming from “quinine, Dover’s powders, and aspirin, or some other forms of salicylates”. It’s clear that people, even doctors, were far off the mark about how serious this virus was, even so uninformed about *what* it was, with Evans having “no information” on many aspects of the disease, including how long a man who has had influenza is capable of spreading the disease, which can only lead it to be getting spread more, without the correct safety precautions. Fast-forward to 2020, people know of the effects this coronavirus has had on the world and still somehow make the idea of wearing masks into something to complain about. Today, there is much more information known about where this virus comes from, how to prevent from getting it, and doctors are even on their way to a vaccine, but there still seems to be consistently higher numbers of those infected all over the world.

While both COVID-19 and the Spanish flu of the 1900s have similar characteristics, such as having the same weaknesses, pains, aches, and sudden onsets of symptoms, the two can hardly be compared when it comes to the way they were both handled, by doctors and people alike. Without the advanced scientific knowledge, technology, and worldwide communication that people of the twenty-first century are privileged with, it was difficult for doctors in the 1900s to come up with a vaccine for a virus they could barely get their minds around. This led to Dr. Evans only being able to provide bits and pieces of information, even stating that European observers weren’t even able to find the germ that started this influenza, with the only advice being to “take care of yourself”. This kind of worldwide spread of disease had never before been seen by populations and history ended up repeating itself a hundred years later because the Spanish flu was forgotten, leaving the world as unprepared as it had been before. There was no excuse for the chaos that ensued because of COVID-19 and by simply going back to these historical texts created during a similar pandemic, things could’ve gone much smoother in terms of staying protected and safe from the virus which is still getting thousands of people sick on the daily. With the modern technology we’ve been provided in the United States, we wouldn’t even need a weekly newspaper column to answer our questions about the pandemic, considering we have the information at our fingertips. The difference is that few people are putting modern technology to use and continue to stay ignorant on the health issues happening right in front of us. The improved media has provided an increase in the coverage of health, with coronavirus being seen in tv shows, heard about on the radio, and movie theaters being completely closed down because of the pandemic, and yet, the Spanish flu seems to have taught us nothing in terms of preparing for this situation. It only leads me to hope that the next time this happens, people remember COVID-19.

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THURSDAY, OCTOBER 10, 1918.

How to Keep Well. *** By Dr. W.A. Evans.

Questions pertinent to hygiene, sanitation, and prevention of disease, of interest to general interest, will be answered in this column. Where space will not permit, or the subject is not suitable, letters will be personally answered, referred to proper authorities and where a stamped, addressed envelope is enclosed, Dr. Evans will not make diagnosis or prescribe for individual cases. Requests for such service cannot be guaranteed.

(Copyright, 1918, by Dr. W.A. Evans)

SPANISH INFLUENZA.

THE Public Service Report, dated Sept. 23, gives the following advice about so-called Spanish influenza: Quarantine and isolation are impracticable. Persons should avoid crowded assemblies, street cars, and the like. Pneumonia coughing and spitting must not be tolerated.

When a person comes down with the disease he should be cared for in well-ventilated, warm rooms as far as possible from other members of the family. The sick person and the attendants should wear face masks. A face mask consists of several layers of gauze held in front of the nose and mouth by tapes, which extend behind the neck or around the neck. When a face mask becomes soiled or damp it should be replaced by a fresh one. Where there is more than one patient in a room a screen should be placed between the beds. The public health service gives no advice as to nose washes and sprays.

Treatment of the patient consists in rest, food, warmth, fresh air, and abundant fluid. The service gives no advice as to nose washes for those with the disease.

For the relief of symptoms, salicylates, Dover's powder, and aspirin, or some other form of salicylate, is recommended. The last is reported to be very effective in relieving the aching pains.

The opinion is expressed that the germ in the Spanish influenza bacillus, though many bacterial observers have failed to find it, shows histological signs that it is due to a modified pneumonic bacillus.

The bacillus is spread by the nose and mouth mucosities. These secretions are spread by coughing, spitting, sneezing, by the use of soiled handkerchiefs, towels, cups, saucers, and so forth.

The incubation period is generally given as one to four days. In this epidemic the incubation period is within longer than forty-eight hours. There is no information as to how long a man who has had influenza is capable of spreading the disease.

The disease starts like an ordinary cold except that it goes with a muffled start. The symptoms that it would take a cold two or three days to make, influenza will manifest in a few hours. A pretty common story brought the body of a man to the station in the city the afternoon before and had to leave up a doctor for several hours before he could get back to his post. When he got back he went to bed and would sleep until a week, suffering from a high fever and much coughing and sneezing but a person with influenza is supposed to have. His eye will suffer that, but the eye was all right. It took him a couple of weeks to get back to where he had any sleep in his life.

A lot of the cases have no symptoms except those of a bad cold.

The recent report: "The present influenza epidemic is characterized by a peculiarly sudden onset, the victims being struck down with dizziness, weakness, and pains in various parts of the body while at work or at the street. There is a sharp rise of temperature to 102 or 104 degrees."

All reports agree that the man with influenza must take good care of himself. He may not need medicine, but he must go to bed, and then after his fever has left he must go down until he gets his strength back.

A NURSE'S REMINIS.

L. J. C. writes: "I was interested in your article on bed resting which appeared Sept. 10 and wonder if the amateur nurse who works to put her suggestions on this subject might not want to try a simple remedy and successfully for many years by a Swedish nurse at the Tremont hospital for convalescents. The treatment consisted of keeping the patient in the bed with cold water, commencing with liquid water, every night at bedtime for about two weeks. Medical improvement was seen after a few treatments. During the treatment the nurse advised from referring to the child weakness and made the nurse spending her a pleasant story hour."

GOOD THERAPY.

M. B. writes: "I am interested in your article on the grip of 1918 which was published in the case of some of the family and neighbors:

"First, a glass.

"Second, a good big dose of very hot lemon tea. (Cold lemon can be had from any druggist.)

"Third, rest in bed with plenty of warm covering.

"The you think this treatment would help in the present epidemic?"

REPLY.

"This was good treatment. The influenza infected beds will do well to take this treatment."

NOT CONTAGIOUS NOW.

A constant reader writes: "What is the longest length of time you have known a case of Spanish fever to last? If after ten weeks there is still some slight peeling off of the bottom of the feet is that still from the disease and is there any danger of contagion?"

REPLY.

"Feeling of the skin to see if there is any peeling off is all right. If the skin is still peeling off, it is still from the disease. If the hands have peeled and there are no sores or eruptions, the child can go out without danger of contracting the disease."

PREVENTION CHILDREN.

W. R. writes: "Kindly advise where one can get the present information how to prevent serious children. Our little boy is nervous and hard to control. Frustrating does not do a bit of good."

REPLY.

"To those who write for it, sending it with postage, we send a pamphlet by Prof. Charles of Johns Hopkins on 'Management of Children' by Dr. J. H. Thompson. This contains a list of books for sale designed for those who wish to get more deeply into the subject."