

Zoom Talk on “The Great Influenza” with John M. Barry

Lessons from 1918

MARY KORR
RIMJ MANAGING EDITOR

On April 20th, the *Rhode Island Medical Journal* (RIMJ) and other media outlets participated in a National Press Foundation (NPF) Zoom book talk with Providence native **JOHN M. BARRY**, author of “The Great Influenza: The Story of the Deadliest Pandemic in History,” which was named the National Academy of Sciences’ outstanding book on science or medicine in 2004. The book returned to the *New York Times* bestseller list recently. Barry is currently a professor at the Tulane University School of Public Health and Tropical Medicine.

In the hour-long discussion, it was evident that the lessons from the past resonate today in the current COVID-19 pandemic. Barry, who spoke from his home in New Orleans, gave a shout-out to his home state when responding to a question from RIMJ. “Hello, Providence. I went to Classical High School and Brown University. My mother still lives there; she’s 102 years old and still kicking.”

During his talk and in the Q&A period, he gave an overview of the emergence of the influenza of 1918 and public response. He offered his two key takeaways presented in his book:

1. Failure to tell the truth killed people.
2. Well-established social distancing measures work, but you need to get compliance from the public; the public needs to believe the message from government. Ultimately society’s response is based on trust.

In 1918, the public heard from officials that the flu in 1918 was like any other flu, “an ordinary influenza by another name. There was no Tony Fauci in 1918,” he said wryly. Complicating matters was World War I. He said government officials and public figures as well as newspapers felt pressured to maintain wartime morale, and as a result the truth suffered, as well as trust in government.

The first influenza wave was mild, Barry said, but described the second wave in the fall of 1918 as “lethal.” He quoted Dr. Victor Vaughn, who was the Dean of the University of Michigan Medical School, and who served as head of communicable diseases for the US Army during that period, and who was dispatched to Army camps to investigate when thousands of troops became ill. Vaughn said: “If the epidemic continues its mathematical rate of acceleration, civilization could easily disappear from the face of the earth.”

By the time the epidemic ran its course, over a million troops were afflicted with influenza, and 30,000 of them died; 675,000 people died in the United States as a whole. Barry said industrial Pittsburgh had one of the highest mortality rates and that statistics from *Metropolitan Life* showed that the younger people were the most susceptible, with the peak age of death at 28 years and two-thirds of the deaths in the 18–45 age range. “18% of all factory workers died in a compressed time frame from 6 to 8 weeks.”



John M. Barry (bottom) during a Zoom Book Talk from his New Orleans home. **Chris Adams**, top, of the National Press Foundation, moderated the event.

Barry noted there was a third influenza wave in 1919 and arguably a seasonal wave in 1920 but that the most lethal was in the second wave of 1918. He said the source of the influenza, whose natural reservoir is birds, still remains definitive; at first it was thought to be from a small corner of Kansas, transmitted then to an Army encampment, but that it could also have come from overseas, or New York. “We will never really know,” he said.

Most of the victims, he related, died of bacterial pneumonia or acute respiratory distress syndrome (ARDS). In response to another question, he stated that as the influenza of 1918 started to ebb, people wanted to get back to normal and cities opened up shuttered saloons, restaurants, and theaters and allowed large gatherings, such as parades. But, one city had to shut down three times when the virus returned “with a vengeance.”

In response to the question RIMJ asked: “The influenza pandemic also catalyzed a dramatic evolution in American medicine. Are there similar paradigm changes in medicine that we are likely to see from the current pandemic?” he answered he thought COVID-19 has served as a catalyst for unprecedented cooperation among competing scientists and the scientific community that hopefully will result in expedited vaccines and a broad spectrum of antivirals.

“This is not the only virus in the wild that can jump species. In fact, this is an event that a lot of people predicted. There will be more in the future,” he said. ♦