

The Hong Kong flu outbreak of 1968-70 claimed over one million lives worldwide. Retired GP Elizabeth Clyde reflects on her first-hand experiences from this widely forgotten pandemic.



HONG KONG FLU

REMEMBERING THE FORGOTTEN PANDEMIC

In July 1968, a new strain of the influenza virus was identified in the then British colony of Hong Kong. Referred to by some as the “Mao Flu”, due to a suspicion the virus originated in mainland China, Hong Kong flu rapidly spread across the globe, with more than 30,000 deaths in the UK, half of which were people aged under 65. The disease was considered to be mild compared to other flu outbreaks, such as the Spanish Flu, which is estimated to have killed around 50 million worldwide. With several major historical events occurring at a similar time – including the Moon landings, Vietnam war and Stonewall riots – Hong Kong flu is often overlooked and dubbed by historians “the forgotten pandemic”.

A lack of measure

Nathaniel Moir, a postdoctoral fellow at Harvard University, said in the *New York Post*: “It was like the pandemic hadn’t even happened if you look for it in history books. I am still shocked at how differently people addressed – or maybe even ignored – it in 1968 compared to 2020.”

HONG KONG FLU FACTS

- ✓ Symptoms included: chills, fever, muscular aches, fatigue, cough, sore throat, runny nose, headache and vomiting and diarrhoea for some.
- ✓ Symptoms would last approximately 4-6 days, though could persist for two weeks.
- ✓ The first peak occurred in the winter school holidays and a vaccine was developed early, but not widely available until later.
- ✓ The pandemic occurred in two major waves – winter 1968-69 and 1969-70.
- ✓ The second wave of Hong Kong Flu in Europe and Asia had far higher mortality. This was not the case for the US.
- ✓ H3N2 still circulates today, among the usual seasonal winter flu strains.



There was no formal lockdown and no social distancing measures, as we see today. The advice from one Hong Kong official was to “stay at home and take aspirin, tea, lemon drinks, whisky or brandy, according to taste”.

In the UK, the medical council alerted the public to the threat, saying it was likely to “spread through the country like wildfire”.

The daughter of Phillip Snashall, a retired professor of medicine had the first case of Hong Kong Flu in Europe. He told the *British Medical Journal*: “How things change. The stock market did not plummet, we were not besieged by the press, men in breathing apparatus did not invade my daughter’s playgroup.”

Society had experienced the Spanish and Asian flu, the Second World War and diseases such as tuberculosis and measles were commonplace. There was also less pressure for governments to act in a world without social media, 24/7 news and the internet.

“That generation approached viruses with calm, rationality and intelligence”, said Jeffrey Tucker, from the American Institute for Economic



Research. “But as with now, no one knew for certain how deadly it would turn out to be. Regardless, people went on with their lives”.

Nathaniel Moir added: “There were few precautions taken during the H3N2 pandemic other than washing hands and staying home when sick.”

Highly contagious

Due to advances in technology and healthcare, the virus was quickly identified by virologists as the H3N2 strain of the influenza A virus, thought to have jumped to humans from pigs. However, it descended from the earlier H2N2 Asian flu strain.

Hong Kong Flu was highly contagious and spread fast – first across Southeast Asia, then the world, including Australia, Africa, Europe and South America, reaching the US via troops returning to California from Vietnam in October 1968. *The Wall Street Journal* reported that corpses were being stored in Berlin underground tunnels and binmen were recruited to bury bodies due to undertaker shortages across West Germany. The virus is also reported to have infected prominent individuals including US president Lyndon B. Johnson, who said it was the worst he had felt in his life and NASA astronaut, Frank Borman –

IMAGES: ALAMY/GETTY © DR. FRED MURPHY © CDC

protective equipment and I didn’t worry because I was in my twenties and I knew that most people in that age group would get over it. I got the flu a few weeks after treating patients and recovered quickly.”

Upon arriving at the patient’s home, Elizabeth would assess the general condition of the patient before checking for Hong Kong flu. “I’d enquire about cough and sputum, examine the chest and when you listened, a lot of them had very early chest symptoms.”

In severe cases, the virus would weaken the lungs enough to allow opportunistic secondary bacterial infections to take hold – frequently pneumonia, leading to hospitalisation and, in some cases, death.

“A lot of people got over it without any treatment. If there was the slightest doubt they were getting a chest infection, I would prescribe a course of broad-spectrum antibiotics to the very elderly, diabetics, smokers, and those who would be shielded these days were prescribed prophylactic oral antibiotics even though their chest was clear,” says Elizabeth.

“There were no antiviral drugs at that time and the flu vaccine was in its infancy. The hospitals were absolutely full of patients who started with flu and developed pneumonia. Ambulances had to check which hospitals had free beds.”

The concept of self-isolation and social distancing wasn’t as well developed or universally enforced as with the current pandemic. Asked about the social distancing and lockdown measures in place at the time, Elizabeth said: “Although I did say to people who had flu and other members of their family to stay in until their risk of infection was over, there were no general instructions to people to stay at home.”

As Hong Kong Flu began to subside, Elizabeth was immediately faced with a new major threat: “As the flu gradually died out, I remember there was a measles epidemic after that and I was quite busy with that, as there was no immunisation against measles in those days.”



who fell ill to a flu-like illness while orbiting the moon on board Apollo 8.

On the frontline

Elizabeth Clyde, 77, is a retired GP who was working as a trainee doctor in her early twenties in Edinburgh during the Hong Kong flu pandemic. “A few weeks after the start of my GP training in an Edinburgh practice there was a recurrence of flu,” she says. “We were very busy visiting ill patients and I, being the youngest and fittest, was allocated visits in tenements.”

On her rounds, Elizabeth would enter several patients’ flats every day and was not provided with any type of personal protective equipment. “We had no